



Patient's Bill of Rights (Revised April 2012)

TIRR Memorial Hermann recognizes the rights of human beings for independence of expression, decision, and action and will protect these rights of all patients, regardless of age, in order that their needs for privacy and personal dignity be considered and preserved.

In order to provide quality health care to patients and their families, TIRR maintains that our patients have the following rights:

1. **RIGHT TO HAVE A FAMILY MEMBER OR REPRESENTATIVE OF HIS OR HER CHOICE AND HIS OR HER OWN PHYSICIAN NOTIFIED PROMPTLY OF HER OR HER INPATIENT ADMISSION TO THE HOSPITAL.** At time of admission, the patient, or representative, will be asked whether the hospital should notify a family member or representative about the admission. Additionally the patient, or representative, will be asked whether the hospital should notify his or her own physician.
2. **RIGHT TO REASONABLE RESPONSE TO REQUEST FOR TREATMENT.** The patient has the right to the facility's reasonable response to his or her requests and needs for treatment or service, within the facility's capacity, its stated mission, and applicable law and regulation. The facility must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically appropriate and legally permissible, or when a patient has so requested, a patient may be transferred to another facility. The facility to which the patient is to be transferred must first have accepted the patient for transfer. The patient must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a transfer.
3. **RIGHT TO INFORMATION ABOUT PATIENT RIGHTS.** At the time of admission, the patient has the right to receive information about the facility's patient rights policies and the mechanism for the initiation, review and, when possible, resolution of patient complaints concerning the quality of care.
4. **RIGHT TO CONSIDERATE AND RESPECTFUL CARE.** The patient has the right to considerate, courteous and respectful care. The care of the patient includes consideration of the psychosocial, spiritual, and cultural variables that influence the perceptions of illness. The care of the dying patient optimizes the comfort and dignity of the patient through treating primary and secondary symptoms that respond to treatment as desired by the patient or surrogate decision-maker, effectively managing pain, and acknowledging the psychosocial and spiritual concerns of the patient and the family regarding dying and the expression of grief by the patient and family.
5. **RIGHT TO MAKE HEALTH CARE DECISIONS AND TO ACCEPT OR REFUSE TREATMENT.** The patient has the right, in collaboration with his or her physician, to make decisions involving his or her health care including managing pain effectively and not receiving excessive or unnecessary medications. The patient has the right to accept medical care or to refuse treatment to the extent permitted by law and to be informed of the medical consequences of such refusal.

6. **RIGHT TO INFORMATION ABOUT MEDICAL TREATMENT.** The patient has the right to the information necessary to enable him or her to make treatment decisions that reflect his or her wishes. The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis. When it is not medically advisable to give such information to the patient, the information should be made available to the patient's legally qualified representative.

7. **RIGHT TO GIVE INFORMED CONSENT.** The patient has the right to receive from physicians information necessary to give informed consent prior to the start of any procedure or treatment. Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedure or treatment, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their accompanying risks and benefits. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to know the name of the person responsible for the procedure or treatment.

8. **RIGHT TO KNOW IDENTITY OF CAREGIVERS.** Patients have the right to know the identity of physicians, nurses, and others involved in their care, as well as when those involved are students, residents, or other trainees. The patient also has the right to know the immediate and long-term financial implications of treatment choices, insofar as they are known.

9. **RIGHT TO MAKE DECISIONS ABOUT PLAN OF CARE.** The patient has the right to make decisions about the plan of care prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and facility policy and to be informed of the medical consequences of this action. In case of such refusal, the patient is entitled to other appropriate care and services that the facility provides or transfer to another facility. When refusal of treatment prevents the provision of appropriate care in accordance with professional standards, the relationship with the patient may be terminated upon reasonable notice. The facility should notify patients of any policy that might affect patient choice within the facility.

10. **RIGHT TO HAVE ADVANCE DIRECTIVES.** The patient has the right to have an advance directive (such as a living will, directive to physicians, or durable power of attorney for health care) concerning treatment or designating a surrogate decision-maker with the expectation that the facility will honor the intent of that directive to the extent permitted by law and facility policy. The provision of care shall not be conditioned on the existence of an advance directive. Health care institutions must advise patients of their rights under state law and facility policy to make informed medical choices, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about facility policy that may limit its ability to implement fully a legally valid advance directive.

11. **RIGHT TO PRIVACY.** The patient has the right to every consideration of privacy. Case discussion, consultation, examination and treatment should be conducted so as to protect each patient's privacy.

12. **RIGHT TO CONFIDENTIALITY.** The patient has the right to expect that all communications and records pertaining to his or her care will be treated as confidential, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. The patient has the right to expect that the facility will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.

13. **RIGHT OF ACCESS TO MEDICAL RECORD.** The patient has the right to review the records pertaining to his or her medical care and to have the information explained or interpreted as necessary, except when restricted by law. The hospital allows the patient to request, amend, and obtain

information on disclosures of his or her information, in accordance with laws and regulations. The patient and/or the patient's legally designated representative have the right to access the information contained in the patient's medical record, within the limits of the law.

14. **RIGHT TO BE INFORMED OF BUSINESS AND PROFESSIONAL RELATIONSHIPS.** The patient has the right to ask and be informed of the existence of business relationships among the facility, educational institutions, other health care providers, or payers that may influence the patient's treatment and care. The patient has the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating the patient.

15. **RIGHT TO PARTICIPATE IN ETHICAL ISSUES.** The patient or the patient's designated representative has the right to participate in the consideration of ethical issues that arise in the care of the patient.

16. **RIGHT TO PARTICIPATE IN RESEARCH.** The patient has the right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct patient involvement, and to have those studies fully explained prior to consent. A patient who declines to participate in research or experimentation is entitled to the most effective care that the facility can otherwise provide.

17. **RIGHT TO CONTINUITY OF CARE.** The patient has the right to expect reasonable continuity of care when appropriate and to be informed by physicians and other caregivers of available and realistic patient care options when hospital/medical care is no longer appropriate. The patient has the right to know in advance what appointment times and physicians are available and where. The patient has the right to expect that the facility will provide a mechanism whereby the patient is informed by his or her physician, or a delegate of the physician, of the patient's continuing health care requirements following discharge.

18. **RIGHT TO BE INFORMED OF POLICIES AND PROCEDURES.** The patient has the right to be informed of facility policies and practices that relate to patient care, treatment, and responsibilities. The patient has the right to be informed of available resources for resolving disputes, complaints, grievances, and conflicts, such as ethics committees, patient representatives, or other mechanisms available in the facility.

19. **RIGHT TO RECEIVE EXPLANATION OF BILL.** The patient has the right to be informed of the facility's charges for services and available payment methods. The patient has the right to examine and receive an explanation of his or her bill regardless of source of payment.

20. **RIGHT TO EQUAL ACCESS TO TREATMENT.** Patient shall have equal access to treatment or accommodations that are medically indicated regardless of race, creed, sex, national origin, or source of sponsorship.

21. **RIGHT TO PARTICIPATE IN TREATMENT AND DISCHARGE PLANS.** The patient has the right to be included in establishing and monitoring his or her individual treatment plan to the extent possible based on physical and cognitive status. The patient is expected to participate in decisions regarding his or her discharge plan to the extent possible based on physical and cognitive status.

22. **RIGHT OF ACCESS TO INTERPRETER.** The patient who does not speak or understand the language of the predominant population will have access to an interpreter to assure understanding of the patient's medical status and rehabilitation treatment plan. The patient with hearing or speech impairments will have access to appropriate communication services. Patients and families who sign as a communication technique are provided certified level 3 signers for interpretation of medical information and home care instruction.

23. RIGHT TO SURROGATE DECISION-MAKER. The patient's guardian, next of kin, or legally authorized responsible person has the right to exercise, to the extent permitted by law, the rights delineated on behalf of the patient if the patient has been adjudicated incompetent in accordance with the law; if the patient is found by his or her physician to be medically incapable of understanding the proposed treatment or procedure; if the patient is unable to communicate his or her wishes regarding treatment; or if the patient is a minor.

24. RIGHT TO BE FREE FROM ABUSE. The patient has the right to be free from mental, physical, sexual, and verbal abuse, neglect, and exploitation. Patients have the right to access protective and advocacy services.

25. RIGHT TO BE FREE FROM RESTRAINTS. All patients have the right to be free from restraint or seclusion, of any form, imposed as a means of coercion, discipline, convenience, or retaliation by staff. Restraint or seclusion may only be imposed to ensure the immediate physical safety of the patient, a staff member, or others and must be discontinued at the earliest possible time.

26. RIGHT TO PRESERVATION OF SELF-IMAGE. The patient has the right to an environment that preserves dignity and contributes to a positive self image.

27. ADDITIONALLY THE ADOLESCENT PATIENT IS ENTITLED TO THE FOLLOWING PATIENT RIGHTS:

- a. Right to request to be separated from adult patients
- b. Right to regular communication between the minor patient and the patient's family.

28. RIGHT OF THE PATIENT TO HAVE VISITORS: TIRR Memorial Hermann informs its patients:

- a. Of his or her visitation rights as a patient, including any clinical restrictions or limitations on such rights;
- b. Of the right, subject to his/her consent to receive the visitors whom he or she designates, including, but not limited to, a spouse, a domestic partner (including same sex domestic partner), another family member, or a friend and his or her right to withdraw or deny such consent at any time;
- c. TIRR MH will not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability;
- d. TIRR MH will ensure that all visitors enjoy full and equal visitation privileges consistent with patient preferences.

PATIENT'S RESPONSIBILITIES

1. **RESPONSIBILITY FOR PROVIDING INFORMATION.** The patient is responsible for providing, to the best of his or her knowledge, information about present complaints, past illnesses, hospitalizations, medications, and other matters related to health status. To participate effectively in decision making, the patient must be encouraged to take responsibility for requesting additional information or clarification about his or her health status or treatment when the patient does not fully understand information and instructions. The patient has the responsibility to report unexpected changes in his or her condition to the responsible physician or member of the health care team.
2. **RESPONSIBILITY FOR FOLLOWING TREATMENT PLAN.** The patient is responsible for following the treatment plan recommended by the physician primarily responsible for his or her care. This may include following the instructions and recommendations of the rehabilitation team members assigned to carry out the coordinated plan of care. The patient is responsible for keeping appointments and, when the patient is unable to do so for any reason, for notifying the appropriate member of the health care team. The patient is responsible for informing his or her physician and other caregivers if the patient anticipates problems in following prescribed treatment.
3. **RESPONSIBILITY FOR REFUSAL OF TREATMENT.** The patient is responsible for his or her actions if the patient refuses treatment or does not follow the physician's instructions.
4. **RESPONSIBILITY FOR PROVIDING COPY OF ADVANCE DIRECTIVES.** The patient is responsible for ensuring that the health care facility has a copy of the patient's written advance directive if he or she has one.
5. **RESPONSIBILITY FOR FINANCIAL OBLIGATIONS.** The patient is responsible for assuring that the financial obligations of his or her health care are fulfilled as promptly as possible. The patient is responsible for providing necessary information for insurance claims and for working with the facility to make payment arrangements, when necessary.
6. **RESPONSIBILITY FOR FOLLOWING RULES AND REGULATIONS.** The patient is responsible for following facility rules and regulations affecting patient care and conduct. The patient should be aware of the facility's obligation to be reasonably efficient and equitable in providing care to other patients and the community. The facility's rules and regulations are designed to help the facility meet this obligation.
7. **RESPONSIBILITY FOR BEING CONSIDERATE OF RIGHTS OF OTHERS.**
Patients and their families are responsible for making reasonable accommodations to the needs of the facility, other patients, medical staff, and facility employees. The patient is responsible for being considerate of the rights of other patients and facility personnel, and for assisting in the control of noise and the number of visitors. The patient is responsible for being respectful of the property of other persons and of the facility.
8. **RESPONSIBILITY FOR PERSONAL HEALTH.** A person's health depends on much more than health care services. The patient is responsible for recognizing the impact of his or her life-style on personal health.



Patient's Rights and Responsibilities (Condensed Version – Revised April 2012)

TIRR Memorial Hermann recognizes the rights of human beings for independence of expression, decision, and action and will protect these rights of all patients, regardless of age, in order that their needs for privacy and personal dignity be considered and preserved.

In order to provide quality health care to patients and their families, TIRR MH maintains that our patients have the:

1. Right to have a family member or representative of his or her choice and his or her own physician notified promptly of his or her admission to the hospital.
2. Right to the facility's reasonable response to treatment requests within the facility's mission
3. Right to equal access to treatment
4. Right to be free from all forms of abuse
5. Right to access protective and advocacy services
6. Right to considerate, courteous and respectful care
7. Right to an environment that preserves dignity and contributes to a positive self image
8. Right to make health care decisions about the plan of care, including managing pain effectively and to accept or refuse treatment
9. Right to participate in treatment and discharge plans
10. Right not to receive excessive or unnecessary medications.
11. Right to effective communication and involvement in all aspects of care
12. Right to know the identity of healthcare staff and physicians providing care
13. Right to receive information about a treatment or procedure in order to give an informed consent
14. Right to be free from restraints of any form which are not medically necessary
15. Right to access an interpreter
16. Right to formulate advance directives
17. Right to appoint a surrogate decision-maker
18. Right to personal privacy and confidentiality of health information
19. Right to receive information about patient rights and the information on how to resolve patient complaints, grievances and conflicts
20. Right to participate in ethical issues, including resolution of problems regarding health care decisions
21. Right to be informed of human research and educational projects affecting treatment
22. Right of access to medical record
23. Right to request and receive an itemized bill.
24. Right to request to be roomed separately from adult patients (minors)

25. Right to regular communication between the minor patient and the patient's family.
26. Right of the patient to have visitors.

Patient's Responsibilities

1. Responsibility for providing information about present complaints, past illnesses, hospitalizations, medications, and other matters related to health status
2. Responsibility for following the treatment plan, facility rules and regulations
3. Responsibility for refusal of treatment
4. Responsibility for providing a copy of advance directives to the facility, if one exists
5. Responsibility for financial obligations to be fulfilled as promptly as possible
6. Responsibility for being considerate of the rights of others
7. Responsibility for personal health recognizing the impact life-style choices have on personal health.
8. Asking questions or acknowledging when you do not understand your treatment course or care decision
9. Following instructions, policies, rules and regulations in place to support quality care and a safe environment of all individuals in the hospital