

BIRTHING CENTER OF NY, INC.

PATIENT'S BILL OF RIGHTS

COMPLAINTS AND INCIDENT REPORTING POLICY

NYPORTS REPORTING

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Patients Bill of Rights

- (a) receive service(s) without regard to age, race, color, sexual orientation, religion, marital status, sex, national origin or sponsor;
- (b) be treated with consideration, respect and dignity including privacy in treatment;
- (c) be informed of the services available at the center;
- (d) be informed of the provisions for off-hour emergency coverage;
- (e) be informed of the charges for services, eligibility for third-party reimbursements and, when applicable, the availability of free or reduced cost care;
- (f) receive an itemized copy of his/her account statement, upon request;
- (g) obtain from his/her health care practitioner, or the health care practitioner's delegate, complete and current information concerning his/her diagnosis, treatment and prognosis in terms the patient can be reasonably expected to understand;
- (h) receive from his/her physician information necessary to give informed consent prior to the start of any nonemergency procedure or treatment or both. An informed consent shall include, as a minimum, the provision of information concerning the specific procedure or treatment or both, the reasonably foreseeable risks involved, and alternatives for care or treatment, if any, as a reasonable medical practitioner under similar circumstances would disclose in a manner permitting the patient to make a knowledgeable decision;
- (i) refuse treatment to the extent permitted by law and to be fully informed of the medical consequences of his/her action;
- (j) refuse to participate in experimental research;
- (k) voice grievances and recommend changes in policies and services to the center's staff, the operator and the New York State Department of Health without fear of reprisal;
- (l) express complaints about the care and services provided and to have the center investigate such complaints. The center is responsible for providing the patient or his/her designee with a written response within 30 days if requested by the patient indicating the findings of the investigation. The center is also responsible for notifying the patient or his/her designee that if the patient is not satisfied by the center response, the patient may complain to the New York State Department of Health's Office of Health Systems Management; 800-804-5447
- (m) privacy and confidentiality of all information and records pertaining to the patient's treatment;
- (n) approve or refuse the release or disclosure of the contents of his/her medical record to any health-care practitioner and/or health-care facility except as required by law or third-party payment contract;
- (o) access his/her medical record pursuant to the provisions of section 18 of the Public Health Law, and Subpart 50-3 of this Title;
- (p) authorize those family members and other adults who will be given priority to visit consistent with your ability to receive visitors; and
- (q) make known your wishes in regard to anatomical gifts. You may document your wishes in your health care proxy or on a donor card, available from the center.

Patient's Signature: _____

Date: _____

Print Name: _____ Witness: _____ Date: _____

BIRTHING CENTER OF NY COMPLAINT POLICY

Express complaints will be handled as judiciously as possible by the Director of Midwifery and referred to the Medical Director after investigation by a non-involved party.

A written response of findings and actions if any are needed within 30 days if requested by patient.

If the findings and resolution are not to the patient's satisfaction may be referred to the NYS Department of Health Office of Health Systems Management, (212) 417-4200 located at 90 Church St., New York, NY or to the NYS Birthing centers and Diagnostic and Treatment Centers at 1-800-804-5447. The form is available online <http://www.health.ny.gov/forms/doh-4299.pdf>.

S2805-l. Incident reporting

Public Health Law
Article 28 BIRTHING CENTERS
S 2805-l.

1. All birthing centers, as defined in subdivision ten of section twenty-eight hundred one of this article, shall be required to report incidents described by subdivision two of this section to the department in a manner and within time periods as may be specified by regulation of the department.
2. The following incidents shall be reported to the department:
 1. Patients' deaths or impairments of bodily functions in circumstances other than those related to the natural course of illness, disease or proper treatment in accordance with generally accepted medical standards;
 2. Fires in the birthing center which disrupt the provision of patient care services or cause harm to patients or staff;
 3. Equipment malfunction during treatment or diagnosis of a patient which did or could have adversely affected a patient or birthing center personnel;
 4. Poisoning occurring within the birthing center;
 5. Strikes by birthing center staff;
 6. Disasters or other emergency situations external to the birthing center environment which affect birthing center operations; and
 7. Termination of any services vital to the continued safe operation of the birthing center or to the health and safety of its patients and personnel, including but not limited to the anticipated or actual termination of telephone, electric, gas, fuel, water, heat, air conditioning, rodent or pest control, laundry services, food or contract services.
3. The birthing center shall conduct an investigation of incidents described in paragraphs (a) through (d) of subdivision two of this section and shall inform the department of the expected completion date of the investigation. The birthing center shall provide to the department a copy of the investigation report within twenty-four hours of completion. Nothing herein shall limit the authority of the department to conduct an investigation of incidents occurring in general birthing centers.
4. The Commissioner shall make, adopt, promulgate and enforce such rules and regulations, as he may deem appropriate to effectuate the purposes of this section.

Confidentiality.

1. The information required to be collected and maintained pursuant to sections twenty-eight hundred five-j and twenty-eight hundred five-k of this article, reports required to be submitted pursuant to

section twenty-eight hundred five-l of this article and any incident reporting requirements imposed upon diagnostic and treatment centers pursuant to the provisions of this chapter shall be kept confidential and shall not be released except to the department or pursuant to subdivision four of section twenty-eight hundred five-k of this article.

2. Notwithstanding any other provisions of law, none of the records, documentation or committee actions or records required pursuant to sections twenty-eight hundred five-j and twenty-eight hundred five-k of this article, the reports required pursuant to section twenty-eight hundred five-l of this article nor any incident reporting requirements imposed upon diagnostic and treatment centers pursuant to the provisions of this chapter shall be subject to disclosure under article six of the public officers law or article thirty-one of the civil practice law and rules, except as hereinafter provided or as provided by any other provision of law. No person in attendance at a meeting of any such committee shall be required to testify as to what transpired thereat. The prohibition relating to discovery of testimony shall not apply to the statements made by any person in attendance at such a meeting who is a party to an action or proceeding the subject matter of which was reviewed at such meeting.
3. There shall be no monetary liability on the part of, and no cause of action for damages shall arise against, any person, partnership, corporation, firm, society, or other entity on account of the communication of information in the possession of such person or entity, or on account of any recommendation or evaluation, regarding the qualifications, fitness, or professional conduct or practices of a physician, to any governmental agency, medical or specialists society, or birthing center as required by sections twenty-eight hundred five-j, twenty-eight hundred five-k and twenty-eight hundred five-l of this article or any incident reporting requirements imposed upon diagnostic and treatment centers pursuant to the provisions of this chapter. The foregoing shall not apply to information which is untrue and communicated with malicious intent.

Appendix 2

Effective Date: 10/14/98

Title: Section 405.8 - Incident reporting

405.8 Incident reporting.

1. Any incident required to be reported pursuant to subdivision (b) of this section shall be reported to the department's investigation and identification information required by the department.
2. Incidents to be reported are:
 1. Patients' deaths in circumstances other than those related to the natural course of illness, disease or proper treatment in accordance with generally accepted medical standards. Injuries and impairments of bodily functions, in circumstances other than those related to the natural course of illness, disease or proper treatment in accordance with generally accepted medical standards and that necessitate additional or more complicated treatment regimens or that result in a significant change in patient status, shall also be considered reportable under this subdivision;
 2. Fires or internal disasters in the facility which disrupt the provision of patient care services or cause harm to patients or personnel;
 3. Equipment malfunction or equipment user error during treatment or diagnosis of a patient which did or could have adversely affected a patient or personnel;
 4. Poisoning occurring within the facility;
 5. Patient elopements and kidnappings;
 6. Strikes by personnel;
 7. Disasters or other emergency situations external to the birthing center environment which affect facility operations; and

8. Unscheduled termination of any services vital to the continued safe operation of the facility or to the health and safety of its patients and personnel, including but not limited to the termination of telephone, electric, gas, fuel, water, heat, air conditioning, rodent or pest control, laundry services, food, or contract services.
3. The birthing center shall conduct an investigation of incidents described in paragraphs (b)(1)-(6) of this section and those incidents in paragraphs (7)-(9) deemed appropriate by the department.
4. The center shall provide a copy of its investigative report to the area administrator within 24 hours of its completion. This report shall document all birthing center efforts to identify and analyze the circumstances surrounding the incident and to develop and implement appropriate measures to improve the overall quality of patient care. This report shall contain all information required by the department including:
 1. An explanation of the circumstances surrounding the incident;
 2. An updated assessment of the effect of the incident on the patient(s);
 3. A summary of current patient status including follow-up care provided and post-incident diagnosis;
 4. A chronology of steps taken to investigate the incident that identifies the date(s) and person(s) or committee(s) involved in each review activity;
 5. The identification of all findings and conclusions associated with the review of the incident;
 6. Summaries of any committee findings and recommendations associated with the review of the incident; and
 7. A summary of all actions taken to correct identified problems, to prevent recurrence of the incident and/or to improve overall patient care and to comply with other requirements of this Part.
5. e) This section does not replace other reporting required by this Part.
6. f) Nothing in this section shall prohibit the department from investigating any incident included in subdivision (b) of this section.

Contact in Albany- Colleen Kewley, colleen.kewley.health.ny.gov, for questions.

