

Facility Healthcare Provider Services Policy

Policy Statement:

This policy outlines the procedures and guidelines for residents of [Facility Name] who choose to receive medical services from the facility's designated healthcare provider. Residents have the right to make informed decisions regarding their healthcare options while staying at the facility.

Scope:

This policy applies to all residents of [Facility Name] who voluntarily choose to receive medical services from the facility's designated healthcare provider.

Informed Consent Process:

Prior to receiving medical services from the facility's designated healthcare provider, residents will be provided with an informed consent form that outlines the nature of services, voluntary participation, benefits, risks, communication, confidentiality, and the right to decline or discontinue medical services.

Residents or their legally authorized representatives will be required to read, understand, and sign the informed consent form. A witness may be present during the signing process, as required by facility policy.

The informed consent form will be retained in the resident's medical record, and a copy will be provided to the resident or their representative.

Resident Autonomy:

Residents have the right to choose whether to receive medical services from the facility's designated healthcare provider or an external healthcare provider of their choice.

The facility's staff will provide residents with information about the facility's designated healthcare provider, the services offered, and the benefits of receiving care within the facility.

Quality of Care:

The facility's designated healthcare provider will offer medical services to residents within the facility premises as scheduled and deemed necessary by the healthcare provider.

The facility's staff will facilitate communication between the resident and the healthcare provider, ensuring that residents have the opportunity to ask questions, seek clarification, and make informed decisions about their medical care.

The facility's healthcare provider will adhere to all applicable privacy laws and regulations, maintaining the confidentiality of residents' medical information.

Right to Decline or Discontinue Services:

Residents have the right to decline or discontinue medical services from the facility's designated healthcare provider at any time, without affecting the quality of care or services provided by the facility.

The facility's staff will respect and support residents' decisions regarding their choice of healthcare provider.

Documentation:

The informed consent form, signed by the resident or their representative, will be securely filed in the resident's medical record.

Any changes to the resident's choice of healthcare provider will be documented in the resident's medical record and communicated to relevant facility staff.

Review and Revision:

This policy will be reviewed regularly to ensure its effectiveness and compliance with applicable laws and regulations. Any necessary revisions will be made to reflect changes in resident preferences or regulatory requirements.

Approval:

This policy has been reviewed and approved by [Facility Name] management.

Effective Date:

This policy is effective as of [Effective Date].