Welcome

Voivodeship Specialist Hospital for Nervously and Mentally III – Independent Public Healthcare Centre in Cibórz

Write a message <u>szpital@ciborz.eu</u>

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Admissions unit open 24/7 Admissions unit – on-call room: internal 117 Doctor's on-call room 1: internal 252 Doctor's on-call room 2: internal 251 FAX : +48 68 34-19-415

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Zielona Góra: +48 68 322 18 68		
Psychoactive Substances Addiction Therapy Clinic		
Zielona Góra: +48 68 322 18 68		
Mental Health Clinic		
Cibórz : +48 68 506 60 21, +48 68 506 60 00 internal 521		
Zielona Góra: +48 68 322 18 68		

Sulechów : +48 68 385 70 29

Community Treatment Team

Zielona Góra: +48 68 322 18 68

Cibórz : +48 68 506 60 21, +48 68 506 60 00 internal 521

Alcohol Addiction and Co-Addiction Therapy Clinic WOTUW Zielona Góra

Zielona Góra:+48 68 325 79 17, +48 68 324 33 78

Psychoactive Substances Addiction Therapy Clinic WOTUW Zielona Góra

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Psychiatric Day Ward (Zielona Góra, ul. Chopina 9)

Registration: +48 68 322 18 68

Alcohol Addiction Therapy Day Ward WOTUW Zielona Góra

Registration: +48 68 325 79 17, +48 68 324 33 78

MEDICAL STATISTICS AND SETTLEMENT SECTION

Head of the Section: internal 509

Medical Statistics and Settlement Section: internal 507, 508, 510, 520

FINANCIAL AND ECONOMIC DEPARTMENT

Chief Accountant: internal 582

Payroll and Benefits Accounting Section: internal 552, 553

Financial Accounting/Deposits: internal 550, 551

Counter: internal 548

TECHNICAL AND OPERATING DEPARTMENT

Head of the Department: internal 545, +48 68 341 92 85 Technical and Operating Section: internal 544, 545, 546 or +48 68 341 93 36 Public Procurement Section: internal 560, 561 Maintenance Workshop (head): internal 285 Electricians/oxygen: internal 266 Administration Section: internal 255 Transport – ambulance drivers: internal 255 Wastewater Treatment: internal 211 Water tanks: internal 281 Procurement: internal 562 Laundry room: internal 303 **HR AND ORGANIZATION SECTION** Head of the Section: internal 557 HR and Organization Section: internal 554, 556 **IT SECTION:** internal 290

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ONE-PERSON POSITIONS

Company Inspector for Defence, Civil Defence, OHS and Fire Safety: internal 257

Hospital's Chaplain: internal 223

Data Protection Officer: internal 891

Classified Information Agent: internal 893

Dietician: internal 547

Patient's Rights Ombudsman: 728 320 510

Hospital general telephone numbers

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HOSPITAL MANAGEMENT

Director: internal 234

Deputy Director for Therapeutic Issues: internal 234

Outer office: internal 234

Chief Nurse: internal 239

Deputy Chief Nurse: internal 237

ADMISSIONS UNIT

Admissions unit – on-call room: internal 231 Doctor's on-call room 1: internal 252 Doctor's on-call room 2: internal 251 FAX: +48 68 34-19-415

Information clause

The Controller is Voivodeship Specialist Hospital for Nervously and Mentally III – Independent Public Healthcare Centre in Cibórz (address: 66-213 Cibórz 5 post office Skąpe, tel. 68 506 60 00, e-mail: szpital@ciborz.eu).

Data protection officer contact details – e-mail: iod@ciborz.eu.

Data are processed only to answer the question from the contact form.

The basis for the processing of data is consent of the data subject, granted through explicit confirming action (i.e. sending a message).

Your personal data are processed no longer that it is necessary to give an answer, and thereafter may be processed until the statute of limitations for any claims.

Data are disclosed only to people authorised by the controller.

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Write a message

Full name (required)

X

E-mail address (required)

Telephone number (required)

 \times

Message content

X

The Admissions Unit tasks are:

- registration of the person coming in with simultaneous verification of eligibility for health services,
- providing the patient with emergency nursing and medical care according to their condition, including carrying out the necessary tests and administering medication,
- ensuring immediate examination by the doctor on duty,
- admission to the hospital and transfer to the ward of a patient qualified for hospitalisation,
- providing advice and emergency assistance to a patient not qualified for hospitalisation,
- providing advice and emergency assistance within the Admissions Unit's Emergency Clinic,
- registration of the person coming to the Mental Health Clinic,
- maintenance of medical and statistical records.

Patients are admitted immediately, on a first-come, first-served basis (in justified cases, the order of admission may be decided by the Unit's staff).

Patients in life-threatening conditions are admitted out of queue.

Waiting time should not exceed 30 minutes. In justified cases, the waiting time may be extended.

The Admissions Unit realizes admissions to the following wards:

24/7 General Psychiatric Wards

The wards provide full psychiatric, psychological, laboratory, EEG diagnosis, CT scans supplemented by nuclear magnetic resonance (NMR) if necessary, and treatment of all types of mental disorders and diseases in adults. Patients under the age of 18 are also admitted and treated if necessary - consultations with a specialist in child and adolescent psychiatry are provided.

We provide access to the hospital's extensive diagnostic facilities (X-ray, arterial ultrasound, EEG, EEG mapping, CT scan, a wide range of blood laboratory tests), and patients have the opportunity to benefit from ongoing consultations with doctors from other specialities. A thorough psychological diagnosis is also carried out.

The wards provide detoxification for men and women addicted to alcohol. The range of activities of the wards includes treatment of continuous alcohol abuse, treatment of withdrawal syndromes and alcohol psychosis. Initial rehab advice is provided, and contacts with Alcoholics Anonymous groups, indications for further treatment in the 24/7 Alcohol Addiction Therapy Ward and Alcohol Addiction and Co-Addiction Therapy Clinics are also established.

Our patients benefit from additional forms of treatment that ensure their proper and rapid rehabilitation. They participate in activities: music therapy, bibliotherapy. In addition, because of the hospital's location (woods, lake), they enjoy walks. During spring and summer, barbecue gatherings with singing and music are organised. As part of hospital-wide occupational therapy, there are numerous sports and recreational activities, dance evenings in which our patients participate. Within the units operating in the hospital, we provide our patients with all the support they need to deal with their social and living issues. They also have the opportunity in fulfilling their religious needs, attending masses organised in the hospital chapel.

24/7 Ward of Forensic Psychiatry in Primary Security Conditions

24/7 Ward of Forensic Psychiatry in Primary Security Conditions provides hospital health services, including forensic psychiatry services in primary security conditions, covering diagnosis and treatment of adults with mental disorders subject to a protective measure, as defined in separate regulations and contracts in this respect.

The range of health services includes, for example:

1.

- 1. guaranteed services for the treatment of adult patients with mental and behavioural disorders,
- 2. 24/7 medical and nursing supervision,
- 3. to the extent necessary for the provision of guaranteed services, the provision of diagnostic tests, medications and medical devices to hospitalised patients,

- 4. the provision of health services by personnel as defined in separate regulations and contracts concluded with the NFZ (National Health Fund),
- 5. provision of consultations, under the terms of separate regulations and contracts concluded with the NFZ,
- the provision of health services by available methods and means in accordance with the current knowledge and principles of professional ethics and with due diligence,
- 7. applying other treatment and rehabilitation measures resulting from the rehabilitation process.

24/7 General Psychiatric and Geriatric Ward

The ward admits patients over 60 years old, of both sexes, with all kinds of mental disorders of old age, including neurotic disorders, affective disorders (depressive disorders), delusional syndromes and dementia syndromes (dementia of the Alzheimer's type, vascular dementia and others). Diagnosis of memory disorders is carried out. The ward also admits patients under 60 years of old if they have developed dementia.

24/7 Alcohol Withdrawal Syndrome Treatment Ward

The 24/7 Alcohol Withdrawal Syndrome Treatment Ward carries out detoxification of men and women addicted to alcohol. It cooperates with the 24/7 Alcohol Addiction Therapy Ward and Rehab Clinics.

The ward's activities include the interruption of consecutive alcohol use, treatment of withdrawal syndromes, alcohol psychosis and therapy to motivate the patient to continue treatment. An individual treatment plan is established for each patient, conducted in a rehab ward or rehab clinic, supported by contacts with "Alcoholics Anonymous" groups. Initial counselling for families of people addicted to alcohol is also provided.

24/7 Psychoactive Substance Withdrawal Treatment Ward

For many people addicted to psychoactive substances, the beginning of the path of sobriety that is essential in starting rehabilitation is the detoxification ward. Detoxification is the cleansing of the body of toxic compounds that have accumulated in the body during the course of the addiction and the restoration of normal bodily functions.

Those addicted to psychoactive substances can undertake full detoxification treatment at Cibórz Hospital, which precedes rehabilitation. The type of addiction, the duration of the addiction, the mental state, as well as the maintenance of abstinence determine whether the patient is admitted directly to a rehabilitation centre or to a detoxification ward, which precedes rehabilitation. During admission, the patient is thoroughly diagnosed and, at the same time,

statistics are kept which allow the treatment to be targeted accordingly and, at the same time, adapted to the patients' requirements and expectations.

The detoxification ward has 20 beds.

Admitting a patient to the ward is subject to prior registration. Once an appointment is made, the patient reports to the Admissions Unit, where an initial examination takes place. The patient in the Admissions Unit should present a referral to the hospital, an identity card. Due to the fact that the detoxification ward is a specific ward, patients are only allowed to take essential personal belongings with them (this is detailed in the internal regulations).

The length of the patient's stay in the ward depends on their mental state and the psychoactive substances they took, but must not be longer than 14 days. The ward is co-educational, and people with no age restrictions are admitted. The aim of a patient's stay in a detoxification ward is to detoxify the body from psychoactive substances, so the necessary laboratory tests to guide the treatment process are carried out on admission. During the stay, the patient is diagnosed psychiatrically and, if necessary, the patient is consulted by doctors from other specialities. At the same time, we cover patients with psychological and therapeutic support, the primary aim of which is to motivate the patient to undertake rehabilitation. The patient's age and diagnosis determine which rehabilitation centre is offered to the patient to suit their individual needs. Therefore, we are constantly in contact with specialist centres in the voivodeship and the best centres throughout Poland. We work particularly closely with the centre at the local hospital. Whenever possible, we facilitate the patient's contact with the chosen centre by phone or email.

Key elements of detoxification are:

- safe cleansing of the body of toxins,
- stabilisation of medical parameters,
- rest,
- proper nutrition.

We are constantly in contact with patients' families, which significantly improves their treatment. Patients may be visited every day, but, due to the ward's specificity, in line with the internal regulations. We are always available to provide advice and assistance on issues related to this undoubtedly life-affecting disease. Our activities are aimed at facilitating the rehabilitation process of the person addicted, with the final result being a life of sobriety and, consequently, an increase in its quality.

24/7 Alcohol Addiction Therapy Ward

The 24/7 alcohol addiction therapy ward in Cibórz has 60 beds for Patients addicted to alcohol. The ward is divided into two sub-wards. The Men's Ward treats men in a closed group system, while the Women's Ward treats women in an open group system. We accept adults for treatment.

Patients are admitted on the basis of a referral from alcohol addiction clinics, subject to prior appointment. It is also possible to admit a patient directly after detoxification. The rehab treatment lasts about 8 weeks. We conduct individual and group therapies. The latter also covers "AA" meetings. As part of its additional services, the ward organises drinking relapse prevention sessions, "alumni" reunions and meetings with co-addicted. The ward cooperates with "AA" groups and Non-Drinker Clubs from the voivodeship and neighbouring regions. We also run a consultation centre for people with alcohol problems and their families.

24/7 Psychoactive Substances Addiction Therapy Ward

Cibórz Hospital offers comprehensive help for people addicted to psychoactive substances, providing psychiatric and therapeutic care adjusted to current needs of a patient.

The beginning of the journey for many addicts is the detoxification ward. During the 14-day stay, we comprehensively diagnose the patient, which allows us to plan further treatment after detoxification.

The primary aim of the patient's stay in the detoxification ward is to detoxify the body from psychoactive substances, so the necessary laboratory tests are carried out on admission. Besides that, the patient is diagnosed psychiatrically and, if necessary, consulted by doctors from other specialities.

At the same time, we cover patients with therapeutic help, which primarily aims to motivate the patient to undertake further therapeutic treatment that is adequate to the current needs and capabilities.

Directly after detoxification, the patient may undertake stationary treatment in the 24/7 Psychoactive Substances Addiction Therapy Ward or 24/7 Rehabilitation Ward for People Addicted to Psychoactive Substances. The initial psychiatric and psychological diagnosis carried out in the detoxification ward decides of referring the patient for appropriate treatment.

Psychiatric Day Ward

It is a co-educational ward with 30 beds. It provides therapy and rehabilitation for adults with mental illnesses and disorders, excluding alcohol and substance abuse disorders and moderate, severe and profound mental retardation.

Activities in the ward take place from Monday to Friday from 8.00 a.m. to 2.00 p.m. A therapeutic programme lasts 12 weeks. Admission to the ward is based on a referral from a psychiatrist or GP, following pre-qualification, which can be scheduled by calling 68 32-21-868.

Admission to the Hospital

Dear Patient, please read the terms and conditions for admissions to our Hospital

A Patient should

- 1. A patient coming to the Hospital should bring with them:
 - o identity card,
 - referral to this Hospital (valid for 2 weeks),
 - o big referral, i.e. a thorough history of the patient's condition,
 - medical documents:
 - information sheets on the treatment received,
 - results of diagnostic tests,
 - information on current treatment (doses of medication used).
- 2. On admission to hospital, the patient is required to have the necessary personal belongings.
- In the Admissions Unit, the patient should declare and hand over the deposit money and valuables – with a receipt.
- 4. The Hospital has a dedicated deposit account held by an accountant according to deposit cards per individual patient, which provides the opportunity to use their money during their stay.

A patient has the right to

- 1. Health services that meet the requirements of modern medical knowledge.
- 2. Respect for their intimacy and dignity during the provision of health services.
- 3. Be informed by a doctor about the purpose of admission to a psychiatric hospital, about their condition, the proposed diagnostic and therapeutic measures, and the foreseeable consequences of these measures or their omission.
- Give consent or refuse to give consent for certain services after having been duly informed, unless it is possible to provide the relevant services without the patient's consent under separate provisions of law.
- Contact in person, by telephone and by correspondence with outside persons, within the limits set by the hospital regulations; the patient's correspondence is not subject to control.
- 6. Pastoral care.
- 7. Treatment in the least restrictive environment possible.

- 8. Obtain permission from the head of the ward to stay temporarily outside the hospital without discharging the patient from the ward, if this does not endanger the patient's life or the life or health of others (leave, pass)9. Treatment and care based on an individually prepared plan discussed with the patient.
- 9. Contact with the judge visiting the Hospital.
- 10. Be heard by the court.
- 11. Access to medical records; the provision reads "The facility makes the records available to the patient or the patient's statutory representative or a person authorised by the patient, through the attending physician".
- 12. Lodge complaints and submit application, and get answers to them.

A patient is obliged to:

- 1. Interact respectfully with other patients and staff.
- 2. Comply with the hospital's regulations and, in particular, adhere to health and safety regulations (e.g. may only smoke in a permitted area, observe quiet hours at night).
- 3. Observe absolute abstinence.
- 4. Provide the relevant documents needed in connection with a hospital stay (identity card, insurance card with proof of employment or other insurance document, referral from a doctor or other institution) except in cases of emergency.
- 5. Have the necessary personal belongings (pyjamas, slippers, toiletries-soap, toothbrush, toothpaste, hair shampoo, comb, toilet paper, women sanitary pads).
- 6. Declare and hand over at the Admission Unit a deposit (of money and valuables)
- 7. <u>Admission to the psychiatric hospital</u>
- (Act on mental health protection: Article 22, 23, 24, 29 Journal of Laws No. 111, item 535 of 20.10.1994)
- Admission to a psychiatric hospital is based on a referral, which should be issued according to the model established by the Minister of Health and Welfare. Appendix 1 to the Regulation of the Minister of Health and Welfare of 23.11.1995 (item 736)
- 10. I.
- 11. A person with a mental disorder may be admitted to a psychiatric hospital with their written consent if the doctor on duty, after a personal examination (history, examination of mental and physical condition), establishes indications for psychiatric treatment.

- 12. If there are serious doubts about the capacity of the person with a mental disorder to give consent, this is recorded in the medical records, which are presented to the visiting judge at the Hospital.
- 13. A minor or a person who is completely incapacitated is admitted to a psychiatric hospital with the written consent of their statutory representative.
- 14. If the admission to hospital concerns a minor over 16 years old or a person who is completely incapacitated and capable of giving consent, the person's consent to the admission is also required. In the event of conflicting statements regarding admission to a psychiatric hospital for that person and their statutory representative, the guardianship court must consent to the admission.
- 15. A person who is incapable of giving consent is admitted to hospital with the written consent of their statutory representative. The statutory representative of a person who is not under parental care gives such consent with the authorisation of the guardianship court of the person's place of residence; in cases of emergency, it is not necessary to obtain the authorisation of the guardianship court before admission to hospital.
- 16. II.
- 17. A mentally ill person may be admitted to a psychiatric hospital without consent if their behaviour to date indicates that, because of this illness, they directly endanger their own life or the life and health of others.
- 18. The admission to hospital of a person referred to in paragraph 1 is decided by the doctor designated to do so after examining them personally and consulting, if possible, a second psychiatrist or psychologist.
- 19. The doctor referred to in paragraph 2 is obliged to explain to the patient the reasons for admission to hospital without consent and to inform them of their rights.
- 20. III.
- 21. Admission to hospital may also be based on a final decision of the Court or the Prosecutor's Office.

Final notes

Hospital staff are obliged to keep confidential everything they become aware of in the course of their treatment activities. The obligation of confidentiality can only be waived by the relevant legislation. Staff in psychiatric hospitals are obliged to know and respect the rights of the patient.

Patient's Rights

To give you an idea of your rights as a patient, here is a selection of key issues and answers to frequently asked questions. If you are interested in learning more about this, you can find information in the Act on health care services financed from public funds, the Act on patients' rights and the Patients' Ombudsman or the Act on medical activity, as well as on the websites of the institutions supervising the observance of patients' rights.

Patient's rights in legal acts

Below, we have included a list of acts that mention patient rights. Remember that the law changes, so make sure that when you refer to the content of the provisions of law, you use an up-to-date and reliable source.

- Constitution of the Republic of Poland of 2 April 1997 (Journal of Laws No. 78, item 483, as amended);
- Act of 27 August 2004 on health care services financed from public funds (Journal of Laws of 2018, item 1510);
- Act of 15 April 2011 on medical activity (Journal of Laws of 2018, item 160);
- Regulation of the Minister of Health of 8 September 2015 on general terms and conditions of contracts for the provision of healthcare services (Journal of Laws No. 2016, item 1146, as amended);
- Act of 19 August 1994 on mental health protection (Journal of Laws of 1994 No. 111, item 535, as amended);
- Act of 6 November 2008 on patient's rights and the Patients' Ombudsman (Journal of Laws No. 2017, item 1318, as amended);
- Act of 2 December 2009 on medical chambers (Journal of Laws No. 2016, item 522, as amended);
- Act of 5 December 1996 on professions of a doctor and dentist (Journal of Laws No. 2018, item 617, as amended);
- Act of 1 July 2011 on the self-government of nurses and midwives (Journal of Laws of 2018, item 916, as amended);
- Act of 15 July 2011 on professions of a nurse and midwife (Journal of Laws of 2018, item 123, as amended);
- Act of 29 May 1974 on supplies for the war and military disabled and their families (Journal of Laws of 2017, item 2193, as amended);

- Regulation of the Minister of Health of 9 November 2015 on types, scope and models of medical documentation and the method of its processing (Journal of Laws No. 2069, as amended);
- Act of 10 May 2018 on personal data protection (Journal of Laws of 2018, item 1000);
- Act of 19 August 2011 on sign language and other means of communication (Journal of Laws of 2017, item 1824, as amended);
- Act of 19 August 2011 on veterans of operations outside state borders (Journal of Laws of 2018, item 937, as amended);
- Act of 19 June 1997 on the prohibition of products containing asbestos (Journal of Laws of 2017, item 2119, as amended);
- Act of 4 November 2016 on support for pregnant women and their families "Pro Life" (Journal of Laws No. 1860, as amended);
- Act of 17 May 2018 on special solutions supporting people with severe disability (Journal of Laws, item 932).

Other:

 provisions of the appendix to Regulation No. 33/2015/BP of the President of the National Health Fund (NFZ) of 29 June 2015 on announcing a consolidated text of the regulation of the President of the National Health Fund on examining complaints and applications in the National Health Fund (as amended).

Treatment - consent and refusal

You have the right to grant consent to the proposed treatment or object. You may object, for example, to a proposed surgery or examination. Your consent or refusal should always be preceded by the doctor providing you with comprehensive and objective information about your condition and the proposed treatment, its effects, possible complications and possible consequences of not providing it.

If you are unconscious and unable to give informed consent to treatment, the treatment provided cannot be decided by, for example, your family or life partner. If you have established all the issues related to the proposed treatment prior to the loss of consciousness, they also apply after the loss of consciousness.

If you are unconscious and it has not been possible, for example, to obtain consent for a procedure, any action that is related to saving your life is decided by the attending doctor. In all other cases, decisions are made by a guardian appointed by the court.

In particularly justified cases, the doctor may not undertake or abandon treatment. However, any delay in providing assistance must not result in danger to your life, grievous bodily harm or serious disorder to your health. However, if your doctor decides to do so, they are obliged to give you reasonable notice and indicate the doctor or facility where you have a viable possibility of receiving treatment. In practice, this means, for example, agreement to transfer you to another hospital, and not just information on the possibility of further treatment in the indicated facility.

Who can ask about your health

As a patient, you have the right to obtain clear, understandable and straightforward answer to questions relating to your mental health condition and conducted or planned treatment. You also have the right to decide who, besides yourself, can be provided with such information. The authorised person may by anyone close to you. No affinity or place of residence decides on that. The requirement is your informed choice and consent. If you cannot confirm your decision in writing, for example, due to your health condition, you can, for example, indicate a person with gesture and confirm your choice with a nod or give an answer to question asked. A note in your medical records is required in such case. The authorised person also has such right after the patient's death.

Scope of information that you have the right to obtain is very broad. You have the right to full knowledge of your health condition. You have the right to know about the diagnosis, diagnostics and treatment, as well as the foreseeable consequences of treatment or the consequences of not treating the illness, about any planned procedures and examinations, and about prescribed medicines, their effects and possible side effects. You have the right to request information about the results of the treatment carried out and the further prognosis. You also have the right to obtain information about the persons e.g. participating in the examination or providing treatment.

You have the right to ask for clarification until the information provided to you by the authorised persons (doctor, nurse, midwife, physiotherapist) is fully understood by you and all doubts are clarified.

If you do not want to know details of your condition, you have the right to refuse to receive information. Then you should indicate exactly which information you are giving up.

Presence of other people

When receiving medical assistance, you have the right to have a close person with you during the provision of the service. So, if you wish so, you can be accompanied, for example, by a family member or close friend during your visit and examination by the doctor, or for minor procedures. It may happen that a doctor (nurse, midwife, physiotherapist) refuses the presence of a close person for reasons of your health safety or in case of an epidemic risk. In any such case, they are required to record the refusal and the reason for it in the medical records.

The presence of others at the provision of the service, such as medical students, also requires your informed consent. It is unlawful to condition the provision of services on the provision of such consent and to coerce it. If the patient is a minor, totally incapacitated or incapable of giving informed consent, the consent of their statutory representative or actual guardian is required.

Important! If you are hearing impaired or deaf-blind, you have the right to freely use the form of communication of your choice. The treatment facility (clinic, hospital) you use is obliged to provide you with a sign language interpreter or interpreter-guide of your choice in accordance with the Act on sign language. You also have the right to be assisted by a person of your choice (must be over **16** years of age) to facilitate communication.

Medical records

According to the regulations, the medical facility issues the records free of charge if the patient or statutory representative wishes to receive them to the extent requested for the first time. This means that if the particular part of the records that the patient is requesting has not been provided to the patient before, the medical facility may not charge any fee for it.

Example 1: On 3 June 2019, the X patient comes to the medical facility and requests records of their treatment (from page 15 to page 50). The medical facility establishes that, on 2 January 2019, the X patient received the records from page 1 to page 14. Therefore, the X patient should receive pages 15-50 free of charge.

Example 2: On 5 June 2019, the Y patient comes to the medical facility and requests records of their treatment (from page 20 to page 30). The medical facility establishes that ,on 9 December 2018, the Y patient received the records from page 19 to page 35. Therefore, the medical facility may require that the Y patient pay for the release of medical records

When can the release of medical records to patients, statutory representatives or authorised persons be charged?

Under the new legislation, a fee for the release of medical records can only be charged from the patient or statutory representative if the request relates to medical records to the extent that they have already been released to the patient (in whole or in part).

In addition, a fee may be charged for the release of medical records when the request is made by a person authorised by the patient.

Example 3: On 7 June 2019, the Z patient comes to the medical facility and requests records of their treatment (from page 20 to page 30). The medical facility establishes that, on 8 July

2017, the Z patient received the records from page 10 to page 25. Therefore, the medical facility may require that the Z patient pay for the release of medical records – but only for pages from 20 to 25. The facility may not charge the Z patient for pages from 26 to 30.

Example 4: On 10 June 2019, John Smit (a person authorised by the Z patient) comes to the medical facility and requests medical records of the Z patient (from page 20 to 30). As the request is not submitted by the patient, buy by an authorised person, the facility can change John Smith for the records.

Special rights in health care

Some patients have special rights such as free medicines, use of services without a referral or a stay in a sanatorium. The extent of such rights may vary depending on which privileged group you belong to.

Important! To exercise the right, you should present an appropriate confirming document.

We have gathered information on the scope of special rights of privileged people below.

If you have special rights to services, but they are not observed, you may report it to the facility's management or the complaints and applications department of a voivodeship National Health Fund branch.

Detailed information on privileges of individual society groups and legally required documents may be found on the <u>National Health Fund's</u> website.

PATIENTS' OMBUDSMAN OF THE PSYCHIATRIC HOSPITAL

Krystyna Grochmalska

Visits on a second Tuesday of a month from 8.15 a.m. to 4.15 p.m.

in the administration building

telephone number:

728 320 510

e-mail address:

k.grochmaiska@rpp.gov.pl

Pursuant to the Act of 19 August 1994 on mental health protection (Journal of Laws of 2017, item 882), a person using healthcare services provided by the psychiatric hospital has the right to assistance in the protection of their rights. The right to assistance in the protection of rights of a person referred to above is also due to their statutory representative, legal or actual guardian. The protection of rights of people using healthcare services provided by the psychiatric hospital is a duty of the Psychiatric Hospital's Patients' Ombudsman.

The duties of the Psychiatric Hospital's Patients' Ombudsman are:

Assistance in the pursuit of right in matters related to treatment, stay conditions and discharge from the psychiatric hospital,

Clarification or help in clarification of oral or written complaints of patients,

Cooperation with the family, statutory representative, legal or actual guardian of the patient,

Initiation and conduct of educational and information activity on the rights of people using healthcare services provided by the psychiatric hospital.

Patients' Ombudsman

Bartłomiej Chmielowiec

Patients' Ombudsman Office ul. Płocka 11/13, 01-231 Warsaw Toll-free helpline: 800 190 590 Patients' Ombudsman's helpline 800 190 590

www.rpp.gov.pl

Project – connected by the Patient

The controller of your personal data provided to the Psychiatric Hospital's Patients' Ombudsman is the Patients' Ombudsman with its registered office in Warsaw at ul. Płocka 11/13. Detailed information on the rules for personal data protection in the Patients' Ombudsman Office is available on information boards in the hospital and at the Psychiatric Hospital's Patients' Ombudsman.

Complaints and applications

Acceptance and consideration of complaints, applications or grievances

I. Acceptance of complaints, applications or grievances

- 1. Complaints, applications or grievances concerning the Hospital's activity may be submitted:
 - o in writing,
 - o by telefax,
 - o by e-mail,
 - o orally,
 - electronic serving box (elektroniczna skrzynka podawcza).
- 2. Complaints, applications and grievances in a written, telefax or e-mail form are accepted in the Hospital's Secretariat.
- 3. The Secretariat's employee records the accepted complaints, applications and grievances in the "Register of complaints, applications and grievances" in accordance with the columns contained therein.
- 4. For complaints, applications or grievances submitted orally, for which the answer requires clarifications or the applicant requests the answer in writing, the person accepting the notification prepares a report.
- 5. The report contains:
 - o first and last name (name) and address of the applicant,
 - o date of accepting the complaint, application or grievance,
 - brief description of the case,
 - contact telephone no., e-mail address (if given by the applicant for contact purposes),
 - o signature of the person submitting the complaint, application or objection,
 - signature of the employee accepting the notification and employees present during the notification.
- 6. The Secretariat, as a unit recording the accepted complaints, application or grievances in the Register, confirms the notification submitted in writing, by telefax, by e-mail, orally, when the report is prepared, with the "Accepted" stamp. Confirmation of the acceptance on the applicant's copy is put at their request.

II. Consideration of complaints, applications or grievances

- Complaints, applications or grievances that do not contain the first and last name (name) and address of the applicant are left with no consideration and clarifying response from the Hospital.
- 2. The Hospital's Director or their deputy assigns the accepted notification to an organisational unit or to a specific employee to take a position in the case.
- 3. If the consideration of the complaint, application or grievance requires prior investigation and clarification of the case, the organisational unit/employee gathers necessary materials.
- 4. If the subject matter of the complaint, application or grievance cannot be established on the basis of the content of the complaint, application or grievance, the applicant is called (in writing, by telephone) with the instruction that failure to correct these deficiencies within seven days of the call will result in the complaint, application or grievance being left without consideration and a clarifying response from the Hospital.
- 5. Deadlines for responses:
 - responses should be provided immediately, or
 - o not later than on the day indicated in the complaint, application or grievance
 - within one month if the case required additional investigation, but it will not extend the one-month term, or
 - over one month if the case requires additional investigation, which will extend the deadline for responding.
- 6. In case of extending the response to over one month from the date of notification, the applicant must be informed (in writing, by telephone) of the extension.
- 7. The draft response drawn up in 2 copies with the entire documentation (materials, notes, explanations) is submitted to the Hospital's Director or their deputy for approval and signature.
- 8. The response copy staying in the Hospital with the entire documentation is handed over to the Hospital's Secretariat to include it to the set of complaints, applications and grievances.