Policy Title:	Rights and Responsibilities – Patients		
Location:	"S"	Department:	Provision of Care
Policy Number:		Review Date:	
Original Effective Date:	10/2003	<b>Revision Dates:</b>	12/2009, 12/2012, 12/2015

#### I. SCOPE:

The rights and responsibilities set forth in this policy are applicable to all Valley Health System (VHS) medical staff, hospital and contract employees, and patients.

## II. PURPOSE:

To recognize, protect and promote the rights of each patient or surrogate decision-maker receiving hospital or healthcare services consistent with federal, state, and local law and regulation.

## III. POLICY:

The hospital provides written information on patient rights and responsibilities to all patients or surrogate decision-makers, upon presentation for services or as soon thereafter as practical. If the patient's condition does not allow or patient is a minor, all rights and responsibilities are applicable to the surrogate decision-maker.

#### **IV. PROCEDURE:**

#### A. <u>Patient Rights</u>

The rights and responsibilities of patients/surrogates receiving services from our facilities include but are not limited to:

#### Considerate and Respectful Care

- 1. To receive ethical, high-quality, safe and professional care without discrimination to age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, or gender identity or expression.
- 2. To be free from all forms of abuse and harassment.
- 3. To be treated with consideration, respect and recognition of their individuality, including the need for privacy in treatment.

#### Spiritual Beliefs

1. To express spiritual beliefs and cultural practices that does not harm others or interfere with the planned course of medical therapy for the patient.

#### Information Regarding Health Status and Care

1. To be informed of his/her health status in terms that patient can reasonably be expected to understand, and to participate in the development and the implementation of his/her plan of care and treatment.

- 2. The right to be informed of the names and functions of all physicians and other healthcare professionals who are providing direct care to the patient.
- 3. The right to be informed about any continuing health care requirements after his/her discharges from the hospital. The patient shall also have the right to receive assistance from the physician and appropriate hospital staff in arranging for required follow-up care after discharge.
- 4. To be informed of risks, benefits and side effects of all medications and treatment procedures, particularly those considered innovative or experimental.
- 5. To be informed of all appropriate alternative treatment procedures.
- 6. To be informed of the outcomes of care, treatment and services.
- 7. To appropriate assessment and management of pain.
- 8. To be informed if the hospital has authorized other health care and/or education institutions to participate in the patient's treatment. The patient shall also have a right to know the identity and function of these institutions, and may refuse to allow their participation in his/her treatment

## Decision Making and Notification

- To designate a person to be his/her healthcare representative and/or decision maker. If a caregiver has not been designated in an advance directive the patient or surrogate decision-maker will be given the opportunity to designate one or more caregivers (18 years or older) following admission and before discharge home. The patient may also exercise his/her right to exclude any family members from participating in his/her healthcare decisions.
- 2. To have a family member, chosen representative and/or his or her own physician notified promptly of admission to the hospital.
- 3. To request or refuse treatment. This right must not be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary or inappropriate.
- 4. To be included in experimental research only when he or she gives informed, written consent to such participation. The patient may refuse to participate in experimental research, including the investigations of new drugs and medical devices.
- 5. To formulate advance directives and have hospital staff and practitioners who provide care in the hospital comply with these directives.
- 6. To leave the healthcare facility against your physician's advice to the extent permitted by law.

# ? Research/Educational Projects

1. If asked to participate in a research project, investigational study, or clinical trial, the right to- i. A description of the expected benefits. potential discomforts and risks alternative services that might also prove advantageous to them.

iv. A full explanation of the procedures to be followed, especially those that are experimental in nature. v. Be told that they may refuse to participate, and that their refusal will not compromise their access to services

• The patient shall be informed if the hospital proposes to engage in or perform human experimentation or other research/educational projects affecting their care or treatment, and the patient has the right to refuse to participate in any such activity.

## Access to Services

- 1. To receive, as soon as possible, the services of a translator and/or interpreter, telecommunications devices, and any other necessary services or devices to facilitate communication between the patient and the hospitals' health care personnel.
- 2. To bring a service animal into the facility, except where service animals are specifically prohibited pursuant to facility policy (e.g., operating rooms, patient units where a patient is immunosuppressed or in isolation).
- 3. To pastoral counseling and to take part in religious and/or social activities while in the hospital, unless your doctor thinks these activities are not medically advised.
- 4. To safe, secure and sanitary accommodation and a nourishing, well balanced and varied diet.
- 5. To access people outside the facility by means of verbal and written communication.
- 6. To have accessibility to facility buildings and grounds. The VHS hospitals recognize the Americans with Disabilities Act, a wide-ranging piece of legislation intended to make American society more accessible to people with disabilities.
- 7. To a prompt and reasonable response to questions and requests for service

# Access to Medical Records

- 1. To have his/her medical records, including all computerized medical information, kept confidential and to access information within a reasonable time frame. The patient may decide who may receive copies of the records except as required by law.
- 2. Upon leaving the healthcare facility, patients have the right to obtain copies of their medical records

# Ethical Decisions

- 1. To participate in ethical decisions that may arise in the course of care including issues of conflict resolution, withholding resuscitative services, foregoing or withdrawal of life sustaining treatment, and participation in investigational studies or clinical trials.
- 2. If the healthcare facility or its team decides that the patient's refusal of treatment prevents him/her from receiving appropriate care according to ethical and professional standards, the relationship with the patient may be terminated.

# Protective Services

- 1. To access protective and advocacy services.
- 2. To be free from restraints of any form that are not medically necessary or are used as a means of coercion, discipline, convenience, or retaliation by staff.
- 3. The patient who receives treatment for mental illness or developmental disability, in addition to the rights listed herein, has the rights provided by any applicable state law.
- 4. To all legal and civil rights as a citizen unless otherwise prescribed by law.
- 5. To have upon request an impartial review of hazardous treatments or irreversible surgical treatments prior to implementation except in emergency procedures necessary to preserve your life.
- 6. To an impartial review of alleged violations of patient rights.

- 7. To expect emergency procedures to be carried out without unnecessary delay.
- 8. To give consent to a procedure or treatment and to access the information necessary to provide such consent.
- 9. To not be required to perform work for the facility unless the work is part of the patient's treatment and is done by choice of the patient.
- 10. To file a complaint with the Bureau of Health Care Quality and Compliance (BHCQC) or other quality improvement, accreditation or other certifying bodies if he /she has a concern about patient abuse, neglect, about misappropriation of a patient's property in the facility or other unresolved complaint, patient safety or quality concern.

## Hospital Charges and Payment

- 1. To examine and receive an explanation of the patient's healthcare facility's bill regardless of source of payment, and may receive upon request, information relating to the availability of known financial resources.
- 2. A patient who is eligible for Medicare has the right to know, upon request and in advance of treatment; whether the health care provider or health care facility accepts the Medicare assignment rate.
- 3. Regardless of the source of payment for care, the patient has the right, upon request, to receive a detailed explanation of the total bill for services rendered in the hospital.
- 4. To timely notice prior to termination of his eligibility for reimbursement by third party payer for the cost of his care.
- 5. To receive, upon request, prior to treatment, a reasonable estimate of charges for medical care.
- 6. To be informed in writing about the facility policies and procedures for initiation, review and resolution of patient complaints, including the address and telephone number of where complaints may be filed.

#### Patient Visitation Rights

The hospital recognizes the importance of family, spouses, partners, friends and other visitors in the care process of patients. We adopt and affirm as policy the following visitation rights of patients/clients who receive services from our facilities:

- 1. To be informed of their visitation rights, including any clinical restriction or limitation of their visitation rights.
- 2. To designate visitors, including but not limited to a spouse, a domestic partner (including same sex), family members, and friends. These visitors will not be restricted or otherwise denied visitation privileges on the basis of age, race, color, national origin, religion, gender, gender identity, gender expression, sexual orientation or disability. All visitors will enjoy full and equal visitation privileges consistent with any clinically necessary or other reasonable restriction or limitation that facilities may need to place on such rights.
- 3. To receive visits from your attorney, physician or clergyman at any reasonable time.
- 4. To speak privately with anyone he/she wishes (subject to hospital visiting regulations) unless a doctor does not think it is medically advised.
- 5. To refuse visitors.
- 6. Media representatives and photographers must contact the hospital spokesperson for access to the hospital.

## Additional Patient Rights

- 1. The patient has a right to reasonable access to care. When the organization cannot meet the request or need for care because of a conflict with its mission or philosophy or an incapacity to meet the patient's needs or requests, the patient may be transferred to another facility when medically permissible and accepted by the receiving institution.
- 2. To choose to terminate the relationship with the attending or consulting physician after the patient has found another physician to accept him/her as a patient.
- 3. Wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with diagnostic procedures or treatment.
- 4. To request a transfer to another room if another patient or a visitor in the room is unreasonably disturbing him/her.
- 5. To request pet visitation except where animals are specifically prohibited pursuant to the facility's policies (e.g., operating rooms, patient units where a patient is immunosuppressed or in isolation).

# B. Patient Responsibilities:

The care a patient receives depends partially on the patient him/herself. Therefore, in addition to the above rights, a patient has certain responsibilities. These should be presented to the patient in the spirit of mutual trust and respect.

- 1. To provide accurate and complete information concerning his/her health status, medical history, hospitalizations, medications and other matters related to his/her health.
- 2. To report perceived risks in his/her care and unexpected changes in his/her condition to the responsible practitioner.
- 3. To report comprehension of a contemplated course of action and what is expected of the patient, and to ask questions when there is a lack of understanding.
- 4. To follow the plan of care established by his/her physician, including the instructions of nurses and other health professionals as they carry out the physician's orders.
- 5. To keep appointments or notifying the facility or physician when he/she is unable to do so
- 6. To be responsible for his/her actions should he/she refuse treatment or not follow his/her physician's orders.
- To assure that the financial obligations of his/her healthcare care are fulfilled or for informing the hospital if they cannot pay the bill so that other arrangements can be made. Patients are responsible for being familiar with the nature and extent of their insurance coverage including referral and authorization requirements.
- 8. To follow facility policies, procedures, rules and regulations as they are explained or as described in printed material.
- 9. To be considerate of the rights of other patients and facility personnel.
- 10. To be respectful of his/her personal property and that of other persons in the facility.
- 11. To help staff to assess pain, request relief promptly, discuss relief options and expectations with caregivers, work with caregivers to develop a pain management plan, tell staff when pain is not relieved, and communicate worries regarding pain medication.
- 12. To inform the facility of a violation of patient rights or any safety concerns, including perceived risk in his/her care and unexpected changes in their condition.

# **REFERENCES:**

- 1. The Joint Commission Comprehensive Accreditation Manual, 2015, Rights and Responsibilities Chapter.
- 2. CMS Conditions of Participation, Section 482.13, Patient Rights. 42 Code of Federal Regulations.
- 3. Nevada Legislature,https://www.leg.state.nv.us/Session/.../SB/SB177.pd