



Patient Rights & Responsibilities

POLICY:

St. Francis Hospital respects the rights of patients. With this concept, patients have the right to: 1) receive care focused on their individual needs consistent with Catholic and Christian teaching on human dignity; 2) be involved in decisions about care, treatment and services provided whenever possible; 3) have their wishes addressed related to end of life decisions; and 4) be informed about outcomes of care, including unanticipated outcomes. The Hospital will use its best reasonable efforts to communicate with the patient in a way that can be understood. Patients also have the responsibility to work with the Hospital staff and the physicians who care for them to help facilitate a healing environment at the Hospital. These rights and responsibilities are articulated in more detail in the Special Instructions and will be communicated in writing on admission (and verbally if necessary).

PURPOSE:

To affirm the patient's right to make decisions regarding his/her medical care, treatment and services.

To assist the patient in the exercise of his/her rights and inform the patient of any responsibilities incumbent on him/her, in the exercise of those rights.

SPECIAL INSTRUCTIONS:

A. Patient rights include the following concepts:

1. The Hospital will respect the needs of patients for confidentiality, privacy, and security.
 - a. Each patient will be asked about his/her confidentiality, privacy and security needs upon admission.
 - b. Each patient will be asked to designate a spokesperson to help communicate his/her needs during the hospitalization.
2. The Hospital will provide access to protective and/or advocacy services through the Case Management staff.

3. The Hospital will respect and honor, to the extent of the law, the patient's wishes related to end of life decisions.
 - a. Each patient will be asked about his or her end of life decisions upon admission.
 - b. Upon admission as an inpatient, the patient and/or family/spokesperson will be asked to provide the Hospital staff with a copy of the patient's advance directive, if applicable.
 - c. As indicated, comfort and dignity are optimized during end of life care.
4. The Hospital respects the patient's right to pain management.
 - a. Pain will be assessed when a patient is admitted to a clinical unit.
 - b. The Hospital staff will work with the physician to assess and provide care and treatment related to pain management.
5. The Hospital respects the patient's right to and need for effective communication.
 - a. Communication needs are assessed when a patient is admitted to a clinical unit.
 - b. Communication tools (i.e., picture boards, interpreters, etc.) are available to the clinical unit.
 - c. The patient will be informed of the name of the physician responsible for coordinating his/her care.
 - d. The patient will be informed by his/her physician or delegate of the physician about the continuity of care and continued healthcare needs following discharge.
6. The patient may obtain from the physician complete, current information, concerning his/her diagnosis, treatment, outcomes and prognosis in terms that can be understood and that can also lead to the patient giving appropriate legal consent prior to any treatment or procedure. When it is not medically advisable to give such information to the patient, the information will be made available to an appropriate person on the patient's behalf.
7. A copy of "Patient Rights and Responsibilities" is available to every patient upon registration. Inpatients receive a copy in the admissions packet.
8. As applicable, patients are informed about organ donation. Hospital policies and procedures are in place to assist in meeting the wishes of the patient as outlined by the laws of the State of Illinois.
9. All care, treatment and services provided the patient is based on identified health care needs of the patient.
10. When care, treatment or services are subject to internal or external review that results in the denial of care, treatment or services, or payment, the Hospital makes decisions regarding the provision of ongoing care, treatment and services or discharge based on the assessed needs of the patient.
11. Consent is obtained for recording or filming made for the purpose other than the

identification, diagnosis, or treatment of the patient.

12. The patient will receive an evaluation, services and/or referral, as indicated by the urgency of the case. When medically permissible, he/she may be transferred to another facility, only after he/she has received complete information and explanation concerning the need and the alternative to such a transfer. The institution to which he/she is to be transferred, will first accept the patient for transfer.
13. The patient has the right to refuse care, treatment or services in accordance with applicable laws and regulations. The patient will be informed of the medical consequences of this action.
14. The patient has a right to an environment that preserves dignity and contributes to a positive self-image.
 - a. The environment will be free of hazards that may affect the safety of the patient.
 - b. The environment will be free from mental, physical, sexual, and verbal abuse, neglect, and exploitation.
15. The Hospital will respect and protect those patients involved in research studies, maintaining open communication to the extent of the Hospital's involvement in the research project. Information related to the research study may become part of the patient's medical record. Such information will be maintained in a confidential manner as required or as requested by the patient.
16. The patient has the right to examine and receive an explanation of his/her Hospital bill, regardless of the source of payment.

B. Patient responsibilities include the following concepts:

1. The patient is expected to bring to the attention of the appropriate person in the Hospital, those occasions when in his/her opinion, his/her rights have not been respected.
2. The patient is responsible to follow Hospital rules and regulations, affecting his/her care and conduct.
3. The patient is expected to cooperate in the treatment program specified by his/her physician, by answering questions honestly and completely and to tell those who are caring for him/her how he/she feels about the treatment and the effects of the treatment on him/her, including pain management.
4. The patient will provide a complete and accurate medical history.
5. The patient will provide the Hospital with accurate and timely information concerning his/her source of payment and ability to meet financial obligations.
6. The patient will comply with instructions of his/her physician and others caring for him/her, to assure the continuity of his/her care after being released from the Hospital.

7. The patient will be considerate of the rights and concerns of the other patients, Hospital property and personnel.
- C. In the case of the minor or incompetent patient, all patient rights and responsibilities, will be forwarded to the parent(s), guardian or surrogate decision maker.

REFERENCES:

JCAHO Standards: Ethics, Rights and Responsibilities
HIPAA Standards: 164.502, 164.508, 164.512, 164.520, 164.522, 164.530
G-Policy - Pain Control
G-Policy - Complaint Resolution
G-Policy - Communicating Unanticipated Patient Outcomes

DATE

EXECUTIVE VICE PRESIDENT

Replaces Policy G-01-71, dated September 2001.