Patient Rights & Responsibilities

COMPLAINTS, CONCERNS, AND QUESTIONS
You and your family/guardian have the right to:
• Tell hospital staff about your concerns or complaints regarding your care. This will not affect your future care.
• Seek review of quality of care concerns, coverage decisions and concerns about your discharge.
• Expect a timely response to your complaint or grievance from the hospital. Complaints or grievances may be made in writing, by phone or in person. The hospital has a duty to respond to these complaints or grievances in a manner that you can understand. To share your concerns with the hospital, please contact a Patient Representative at 814.362.8280 or 814.362.8287.
• The Pennsylvania Department of Health is also available to assist you with any questions or concerns about your hospital care. You can reach the Department of Health by calling (800) 234-5616 or writing: Acute and Ambulatory Care Services Pennsylvania Department of Health Room 532 Health and Welfare Building 623 First Street Harrisburg, PA 17110
You may also contact The Joint Commission, a hospital accreditation organization at: The Joint Commission/Office of Quality Monitoring One Renaissance Boulevard Oakbrook Terrace, IL 60181 (800) 994-6610 or complaint@jointcommission

Your Responsibilities
As a patient, family member or guardian, you have the right to know all hospital rules and what we expect of you during your hospital stay.

PROVIDE INFORMATION
As a patient, family member or guardian, we ask that you:
• Provide accurate and complete information about current health care issues, past illnesses, hospitalizations, medications and other matters relating to your health.
• Report any condition that puts you at risk (for example, allergies or hearing problems).
• Report unexpected changes in your condition to the health care professionals taking care of you.
• Provide a copy of your Advance Directive, Living Will, Durable Power of Attorney for health care and any organ/tissue donation permissions to the health care professionals taking care of you.
• Tell us who, if any, visitors you want during your stay.

Your Rights
As a patient, you or your legally responsible party have the right to receive care without discrimination due to age, sex, race, color, religion, sexual orientation, income, education, national origin, ancestry, marital status, culture, language, disability, gender identity, or who will pay your bill. As our patient, you have the right to be safe, respectful and dignified care at all times. You will receive service and care that is medically suggested and within the hospital’s services, its stated mission and required law and regulation.

COMMUNICATION
You have the right to:
• Have a family member, another person that you choose, or your doctor notified when you are admitted to the hospital.
• Receive information in a way that you understand. This includes interpretation and translation, free of charge, in the language you prefer for talking about your health care. This also includes providing you with needed help if you have vision, speech, hearing, or cognitive impairments.
• Designate a support person, if needed, to act on your behalf to assert and protect your patient rights.

INFORMED DECISIONS
You have the right to:
• Receive information about your current health, care, outcomes, recovery, ongoing health care needs and future health status in terms that you understand.
• Be informed about proposed care options including the risks and benefits, other care options, what could happen without care and the outcome(s) of any medical care provided, including any outcomes that were not expected. You may need to sign your name before the start of any procedure and/or care. “Informed consent” is not required in the case of an emergency.
• Be involved in all aspects of your care and take part in decisions about your care.
• Make choices about your care based on your own spiritual and personal values.
• Request care. This right does not mean you can demand care or services that are not medically needed.

ADVANCE DIRECTIVES
You have the right to:
• Create advance directives, which are legal papers that allow you to decide now what you want to happen if you are no longer healthy enough to make decisions about your care. You have the right to hospital staff comply with these directives.
• Ask about and discuss the ethics of your care, including resolving any conflicts that might arise such as, deciding against, withholding or withdrawing life-sustaining care.

CARE PLANNING
You have the right to:
• Receive a medical screening exam to determine treatment.
• Participate in the care that you receive in the hospital.
• Receive instructions on follow-up care and participate in decisions about your plan of care after you are out of the hospital.
• Receive a prompt and safe transfer to the care of others when this hospital is not able to meet your request or need for care or service. You have the right to know why a transfer to another health care facility might be required, as well as learning about other options for care. The hospital cannot transfer you to another hospital unless that hospital has agreed to accept you.

CARE DELIVERY
You have the right to:
• Expect emergency procedures to be implemented without unnecessary delay.
• Receive care in a safe setting free from any form of abuse, harassment and neglect.
• Receive kind, respectful, safe, quality care delivered by skilled staff.
• Know the names of doctors and nurses providing care to you and the names and roles of other health care workers and staff that are caring for you.
• Request a consultation by another health care provider.
• Request proper assessment and management of pain, including the use of opioids or other request any of all options to relieve pain.
• Receive care free from restraints or seclusion unless necessary to provide medical, surgical or behavioral health care.
• Receive efficient and quality care with high professional standards that are continually maintained and reviewed.

PRIVACY AND CONFIDENTIALITY
You have the right to:
• Limit who knows about your being in the hospital.
• Be interviewed, examined and discuss your care in places designed to protect your privacy.
• Be advised why certain people are present and to ask others to leave during sensitive talks or procedures.
• Expect all communications and records related to care, including electronic records, to be treated as private.
• Receive written notice that explains how your personal health information will be used and shared with other health care providers in your care.
• Review and request copies of your medical record unless restricted for medical or legal reasons.

HOSPITAL BILLS
You have the right to:
• Review, obtain, request and receive a detailed explanation of your hospital charges and bills.
• Receive information and counseling on ways to help pay for the hospital bill.
• Request information about any business or financial arrangements that may impact your care.

Please feel free to ask questions about any of these rights that you do not understand. If you have questions about these rights, discuss them with your doctor, nurse or a Patient Representative. Call 814.362.8280 or 814.362.8287, and you will receive a personal response.

As a patient, family member or guardian, we ask that you:
• Recognize and respect the rights of other patients, families and staff. Threats, violence, or harassment of other patients and hospital staff will not be tolerated.
• Comply with the hospital’s no smoking policy.
• Refrain from conducting any illegal activity on hospital property.
• If such activity occurs, the hospital will report it to the police.

SAFETY
As a patient, family member or guardian, we ask that you:
• Promote your own safety by becoming an active, involved and informed member of your health care team.
• Ask questions if you are concerned about your health or safety.
• Make sure your doctor knows the site/size of the body that will be operated on before a procedure.
• Remain staff to check your identification before medications are given, blood/blood products are administered, blood samples are taken, or before any procedure.
• Remind caregivers to wash their hands before taking care of you.
• Be informed about which medications you are taking and why you are taking them.
• Ask all hospital staff to identify themselves.

REFUSING CARE
As a patient:
• You are responsible for your actions if you refuse care or do not follow care instructions.

CHARGES
As a patient:
• You are responsible for paying for the health care that you received as promptly as possible.

COOPERATION
As a patient:
• You are expected to follow the care plans suggested by the health care professionals caring for you while in the hospital. You should work with your health care professionals to develop a plan that you will be able to follow while in the hospital and after you leave the hospital.

RESPPECT AND CONSIDERATION
As a patient, family member or guardian, we ask that you:
• Treat hospital staff with respect and courtesy.
• Respect the rights of other patients, families and hospital staff.
• Comply with hospital policies and procedures.
• Support hospital policies and procedures.
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