

	POLICY TITLE: Patient Rights/Admissions Policy
MANUAL NAME: Administrative	POLICY NUMBER: <input type="checkbox"/> Addendum to Corporate Policy <input type="checkbox"/> Form Available In I-REPP System
SECTION (as applicable):	POLICY OWNER: Compliance
ORIGINATION DATE: August 2012	FINAL APPROVAL DATE: March 2013

Purpose: To inform each patient, or when appropriate, the patient’s representative as allowed under Arkansas State law, of the patient’s rights, in advance of admitting or discontinuing patient care whenever possible.

Policy

Patients will be admitted and treated without discrimination as regards to race, color, national origin, religion, sex or handicap. Patients have the right to efficient, effective care and courtesy; a safe and desirable environment; respectful consideration of their own religious beliefs; protection of dignity, privacy and sense of security; considerate treatment of their visitors; and fair charges related to the cost of services which they receive.

It is the policy of Wadley Regional Medical Center at Hope to not deny or restrict access to services based on an individual’s age (unless age is a factor necessary to normal operation or achievement of any statutory objective).

In accordance with the mission of Wadley Regional Medical Center at Hope, the Patient Self-Determination Act and Arkansas State Law, Wadley Regional Medical Center At Hope will provide written notice of the patient’s rights and the grievance process upon registration for inpatient or outpatient medical treatment. Information will address an individual’s right to make decisions in all areas as described in detail below.

All patients have the following rights:

1. Considerate and respectful care in a setting providing personal privacy.
2. Be treated in a dignified and respectful manner.
3. The hospital’s reasonable response to requests and needs for treatment or service, within the hospital’s capacity, its stated mission, and applicable law and regulation.
4. Effective communication, including interpretation and translation services, as necessary.
5. Care that is considerate and supportive of personal values and beliefs.
6. A clean, safe, secure and pleasant environment that preserves dignity and contributes to a positive self- image.
7. Consideration of psychosocial, spiritual and cultural issues that influence opinions of illness.
8. Respect to cultural and personal values, beliefs and preferences.
9. Access to community religious and spiritual leaders.

10. Optimization of comfort and dignity of the dying patient, including treatment of primary and secondary symptoms that respond to treatment as directed by patient or surrogate decision maker, and effective pain management.
11. Acknowledgment of psychosocial and spiritual concerns of the patient and family regarding dying and expression of grief.
12. Have knowledge of the name of the physician who has primary responsibility for coordinating care and the names and professional relationships of other physicians and healthcare providers who will see the patient.
13. Have a family member or representative and patient's own physician notified promptly upon admission to the hospital.
14. Receive information from the physician about illness, course of treatment and prospects for recovery in terms that patient can understand.
15. Receive as much information about any proposed treatment or procedure as needed in order to give informed consent or to refuse the course of treatment, and to make treatment decisions that reflect patient wishes. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved in the treatment, alternate course of treatment or non-treatment and the benefits involved in each and to know the name of the person who will carry out the procedure or treatment.
16. Participate actively in decisions regarding medical care. To collaborate with physicians and other health care providers in the decision making process involving health care. To the extent permitted by law, this includes the right to refuse care, treatment and services.
17. Accept medical care or to refuse treatment to the extent permitted by law and to be informed on the medical consequences of such refusal.
18. Personal privacy and confidentiality of information, within the limits of the law.
19. Full consideration of privacy concerning your medical care. Case discussions, consultation, examination and treatment are confidential and should be conducted discreetly. The right to be advised as to the reason for the presence of any individual.
20. Confidential treatment of all communications and records pertaining to care and stay in the hospital. Patient's written permission will be obtained before medical records can be made available to anyone not directly concerned with the patient's care.
21. Access, request amendment to, and obtain information on disclosures of health information, in accordance with law and regulation.
22. Have the level of pain assessed and interventions provided if necessary.
23. Leave the hospital against the advice of physician.
24. Reasonable continuity of care and to know in advance the time and location of appointment as well as the physician providing care.
25. Be advised if the hospital or personal physician proposes to engage in or perform human experimentation affecting patient's care and treatment. The right to refuse to participate in such projects, and to be informed of any human experimentation or other research or educational projects affecting patient's care and treatment.
26. Be informed by physician or a delegate of physician of the continuing healthcare requirements following discharge from the hospital.
27. Know which hospital rules and policies apply to patient's conduct while a patient.
28. Receive, at the time of admission, information about the hospital's patient rights policy and the mechanism for the initiation, review and when possible, resolution of patient complaints concerning the quality of care received.

29. Notice of non-coverage to be provided, if indicated, upon determination of eligible benefits coverage.
30. Full participation by patient or representative in the consideration of ethical issues that arise during care. Ethical issues in health care will be resolved by the hospital.
31. Access to the information contained in patient's medical record, within the limits of the law.
32. The right of patient's guardian, or next of kin, or legally authorized responsible person to exercise, to the extent permitted by law, the rights delineated on patient's behalf if patient has been adjudicated incompetent or found by physician to be medically incapable of understanding the proposed treatment or procedure, or are unable to communicate wishes regarding treatment, or is a minor, in accordance with the law.
33. Have practitioners and staff provide care that is consistent with the patient's advanced directives if a valid copy is supplied to the hospital.
34. Voice grievances with respect to the treatment or care that is furnished (or fails to be furnished) without fear of discrimination or reprisal for voicing grievances.
35. Receive care in a safe setting, free from all forms of abuse or harassment.
36. Receive a notice of beneficiary discharge rights and to appeal premature discharge.
37. Receive information in a manner and form that can be understood.
38. Have or obtain an advanced directive that authorizes an agent or surrogate to make decisions on patient's behalf to the extent permitted by law. Advanced directives are written instructions recognized under state law relating to the provision of health care when individuals are unable to communicate their wishes regarding medical treatment. This includes the following documents: medical power of attorney for health care, a written or verbal statement (a living will), or some other form of instruction recognized under state law specifically addressing the provisions of health care.
39. Have the advanced directive in the patient's medical record and be reviewed periodically with the patient or surrogate decision maker if the patient has executed an advanced directive.
40. Provision of care not conditioned on the existence of an advanced directive.
41. Visitation not restricted, limited, or otherwise denied based on: race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.
42. Be informed of any clinically necessary or reasonable restrictions or limitations that the hospital may need to place on visitation rights and the reasons for the clinical restrictions or limitations.
 - a. Patient or support person be informed of his or her visitation rights, including any clinical restriction or limitation on such rights, when he or she is informed of his or her other rights under this section.
 - b. Patient or support person be informed of the right, subject to his or her consent, to receive the visitors whom he or she designates, including, but not limited to, a spouse, a domestic partner (including a same sex domestic partner), another family member, or a friend, and his or her right to withdraw or deny such consent at any time.
 - c. Not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.
 - d. Expect visitors to enjoy full and equal visitation privileges consistent with patient preferences.

PATIENT RESPONSIBILITIES

Every patient admitted to, or who receives care, treatment, and/or services at Wadley Regional Medical Center shall have the responsibility to:

1. Provide, to the best of their knowledge, accurate and complete information concerning present complaints, past illnesses and hospitalizations, and other matters relating to their health.
2. Make it known whether they clearly comprehend the course of medical treatment and what is expected of them. Patients are encouraged to ask questions necessary for a clear understanding of any course of action and what to expect. If nursing staff is unable to answer questions to the patients' satisfaction, the personal physician will be notified to explain any questions patient may have.
3. Report unexpected changes in condition to the physician or nurse.
4. Follow both the treatment plan recommended by the physician and the hospital's rules and regulations affecting patient care and conduct, including the instructions of nurses and other health professionals as they carry out physician's orders.
5. Accept responsibility for their actions should they refuse treatment or should they choose not to follow physician's orders.
6. Show consideration of the rights of other patients and hospital personnel and for their behavior in the control of noise, smoking and number of visitors.
7. Show respect for their own personal property, as well as the property of others and that of the organization.
8. Assure that the financial obligations for their healthcare are fulfilled as promptly as possible.
9. Follow the established policies and procedures of Wadley Regional Medical Center.

The patient may file a concern with any of the following entities regardless of whether he/she has first used the hospital grievance process:

Administration
Wadley Regional Medical Center at Hope
2001 South Main
Hope, Arkansas 71801
870-722-2400

House Supervisor
870-722-2400 and ask for House Supervisor
or call Extension 444 from any phone inside the hospital (24 hours a day, 7 days a week) by making a request to any staff member.

Risk/ Compliance Officer
Section 504 Coordinator
Wadley Regional Medical Center at Hope
903-798-8086

Arkansas State Department of Health
4815 West Markham, Little Rock, AR, 72205-3867)
501-661-2201

- Detailed patient rights pertaining to behavioral health patients will also be provided via the specific inpatient unit upon admission to said program.

REFERENCES:

Review/Revised Date:	Title:	Description of Change or Location of Change in Document:
March 2013	Compliance	Added Section 504 Coordinator