



PATIENT RIGHTS POLICY	PC-33 HAM
Hospital Administration Manual	Effective Date: 5/1/2017

PURPOSE

At the Milton S. Hershey Medical Center (MSHMC), our goal is to provide excellent health care to every patient. Our patients have the rights and responsibilities referenced in this policy regardless of a patient's age, ancestry, color, culture, disability (physical or intellectual), ethnicity, gender, gender identity or expression, genetic information, language, military/veteran status, national origin, race, religion, sexual orientation, socioeconomic status, or source of payment for your care. The MSHMC board of directors, administration, providers and staff respect and address the rights of all patients to treatment, care and services within MSHMC's mission, and in compliance with applicable federal and state law and regulations. Patients are informed of their rights and responsibilities as early as possible upon arrival. The patient Welcome Guide, distributed upon admission, includes a copy of the Patient Rights and Responsibilities brochure. For outpatients, copies of the Patient Rights and Responsibilities brochure are available in waiting areas and/or upon request. In the event that a patient is unable to exercise his/her rights, these rights then become applicable to their designated/legal representative.

This policy discusses patient rights and patient responsibilities as required by the PA Department of Health, the Centers for Medicare and Medicaid Services and The Joint Commission. Specific processes and procedures related to patient rights can be found in additional MSHMC policies including but not limited to those referenced in this document.

SCOPE

All Milton S. Hershey Medical Center staff

POLICY AND/OR PROCEDURE STATEMENTS

PATIENT RIGHTS

All patients have the right to the following:

Access

The right to receive care without discrimination due to age, ancestry, color, culture, disability (physical or intellectual), ethnicity, gender, gender identity or expression, genetic information, language, military/veteran status, national origin, race, religion, sexual orientation, socioeconomic status, or source of payment.

Respect and Dignity

The right to considerate, respectful care given by competent personnel, which optimizes the patient's comfort and dignity while contributing to a positive patient self-image.

Communication

The right to:

- Be informed of Patient Rights and Responsibilities at the earliest possible time of the patient's hospitalization in a manner and form that the patient understands.
- The right to know what hospital rules and regulations apply to patient conduct.
- Know the name of the provider who has primary responsibility for the patient's care, and the identity and function of all individuals providing their care, treatment and services.
- Be communicated with in a manner that is clear, concise and understandable. Information provided will be appropriate to the age and cognition of the patient.
- Be provided with a qualified interpreter free of charge; either in person or on the phone as deemed appropriate if the patient has limited English proficiency.
- Be provided with a certified Deaf and Hard of Hearing interpreter for patients with speech, hearing and/or cognitive impairments.
- Be informed about unanticipated outcomes of care, treatment and services that relate to sentinel events considered reviewable by The Joint Commission. The provider responsible for the patient's care, or the patient's designee, informs the patient about the unanticipated outcome when the patient is not already aware of the occurrence or when further discussion is needed.
- Have a family member, representative, or physician of the patient's choice notified promptly of the patient's admission to the hospital.
- Have assistance in accessing and designating a support person or agency to act as needed to assert and protect the patient's rights.
- Delegate decision making to a specific person/s. The hospital will respect the patient's wishes to the maximum extent practicable, and to the degree permitted by law.
- Designate a lay caregiver, who is a person chosen by the patient to receive health information about the patient due to their unique role as the patient's primary caregiver if the patient is discharged home.

When a patient is unable to make decisions about care, treatment, and services, a surrogate decision maker will be involved in making those decisions. This includes the surrogate decision maker's right to refuse care, treatment and services on the patient's behalf, in accordance with law and regulation.

Quality Care Delivery

The right to:

- Receive care in a safe and secure environment which incorporates current standards of practice for patient environmental safety, infection control and security.

- Be free from all forms of mental, physical, sexual, and verbal abuse, neglect and exploitation.
- Expect good management techniques to be implemented to effectively use the patient's time and to avoid the personal discomfort of the patient.
- Receive high quality care based on professional standards that are continually maintained and reviewed.
- Expect emergency procedures to be implemented without unnecessary delay.
- Receive care free from restraints or seclusion unless it is necessary to provide medical, surgical or behavioral healthcare.

Participation in Care

The right to:

- Participate with the providers in the development, implementation and revision of the patient plan of care—both inpatient and outpatient, including the discharge plan and pain management plan.
- Receive information about current health status, care needs, outcomes, recovery, ongoing healthcare needs and future health status.
- Be informed about proposed care options including the risks and benefits, other care options, what could happen without care, and the expected outcome(s) of any medical care provided, including any outcomes that were not expected.
- Be involved in all aspects of care and to take part in decisions about care.
- Request care. This right does not mean the patient can demand care or services that are not medically needed.
- Participate in the consideration of ethical issues surrounding his/her care.
- Receive information upon discharge of continuing healthcare requirements and follow-up care, the plans for meeting them, as well as participate in decisions about the ongoing plan of care. The patient has the right to choose from available Medicare or other payor participating providers such as hospice agencies, home health agencies, rehabilitation hospitals and nursing homes.
- Receive a prompt and safe transfer to the care of others when MSHMC is not able to meet the patient's request or need for care or service. Patients 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. MSHMC cannot transfer someone to another hospital unless that hospital has agreed to accept the patient.
- Receive assistance to obtain consultation with another provider at the patient's request and own expense.

Pain Management

The right to appropriate assessment, management and relief of pain, including providing feedback on pain control.

Consent

The right to:

- Give informed consent. Except for in cases of emergencies, the provider must obtain the necessary informed consent prior to the start of any procedure or treatment or both. This information shall include the name of the person performing the procedure or treatment, a description of the procedure or treatment, the medically significant risks involved, alternate courses of treatment or non-treatment and the risks involved in each.
- Refuse any care, therapy, drug, treatment or procedure that a provider is recommending. The provider will discuss the medical consequences of such refusal. There are times when care must be provided by law or regulation.
- Give consent prior to the start of any experimental, research, donor program or educational activities in which the patient may be asked to participate. The patient or the patient's legal representative may, at any time, refuse to continue in any such study/program to which informed consent has previously been given. Refusal to participate or discontinuation of participation will not compromise the patient's right to access care, treatment or services.
- Give consent for MSHMC providers and/or staff to take photos, make recordings, or film patients if the purpose is for something other than patient identification, care, diagnosis or treatment.

Advance Directive

The right to:

- Formulate an advance directive, revise an existing advance directive or to appoint a surrogate to make healthcare decisions on the patient's behalf. These decisions will be honored within the limits of the law and MSHMC's mission. The patient is not required to have or complete an advance directive in order to receive healthcare.
- Be provided with assistance in developing or revising an advance directive.
- Make decisions regarding the withholding of resuscitative services or the foregoing or withdrawing of life-sustaining treatment within the limits of the law, regulation and MSHMC policies.
- The right to make decisions concerning organ donation. MSHMC will honor the patient's wishes within the limits of the hospital's capability and in accordance with law and regulation.

Privacy

The right to:

- Be interviewed, examined, treated and have care discussed in places designed to protect privacy.
- Expect all communications and records related to care to be treated as confidential except as otherwise provided by law or third-party contractual arrangements.
- Receive written notice that explains how personal health information will be used and shared with other health care professionals involved in the patient's care.
- Request an accounting of circumstances in which information about the patient has been disclosed or reported due to law or regulation.

- Limit who can receive information about the patient, including demographic information, the patient's presence or location in the clinical area or information about the patient's medical condition.

Visitation

The right to:

- Make decisions regarding visitors and designate who can visit MSHMC.
- Visitors do not need to be legally related to the patient.
- Designate a support person who may determine who can visit if the patient becomes unable to make their own decisions.

Medical Record

The right to:

- Access all information contained in the patient's medical record other than psychotherapy notes, unless access is restricted by the attending provider for medical reasons.
- Request a copy of the patient's medical record (note: there may be a fee for the copying of the medical record). If the patient feels that the information is incorrect, they may request that the information be amended. MSHMC may deny the request to amend information under certain specific circumstances as permitted by law.

Financial Charges

The right to:

- Examine and receive a detailed explanation of the patient's bill.
- Full information and counseling on the availability of known financial resources to help the patient in payment of healthcare bills.

Complaint/Grievance

The right to:

- Receive information about how to get assistance with concerns, problems, or complaints about the quality of care and services you receive, and to initiate a formal grievance process with MSHMC or with state regulatory agencies without being subject to coercion, discrimination, reprisal or unreasonable interruption of care, treatment or services.
- Speak to providers directly involved in your care. If the issue is not resolved to the patient's satisfaction, or if they would like the help of someone not immediately involved, Patient Relations staff is available to help resolve the problem by calling 531-6311. For PA Department of Health or Civil Rights complaints/grievances directly to:

The Pennsylvania Department of Health

Division of Acute & Ambulatory Care
Room 532 Health & Welfare Building
625 Forster Street
Harrisburg, PA 17120-0701
Phone: (717) 783-8980
Fax: (717) 705-6663
Complaint Hotline: 1-800-254-5164
http://www.health.pa.gov/facilities/Consumers/Complaints/Pages/default.aspx#.V8gcOKDD_1I

The Joint Commission, a hospital accreditation organization:

The Joint Commission
Office of Quality Monitoring and Patient Safety
One Renaissance Boulevard
Oakbrook Terrace, IL 60181
Fax: 1 630-792-5636 or patientsafetyreport@jointcommission.org

Patients enrolled in Medicare or Medicare insurance products may contact

Livanta, 1 866-815-5440

PATIENT RESPONSIBILITIES

The following patient responsibilities are presented to the patient and family in the spirit of mutual trust and respect.

Demonstrate Respect and Consideration

Patients, as well as their family members, representatives and visitors, are expected to recognize and respect the rights of our other patients, visitors, and staff. Threats, violence, disrespectful communication or harassment of other patients or of any medical center staff member, for any reason, including because of an individual's age, ancestry, color, culture, disability (physical or intellectual), ethnicity, gender, gender identity or expression, genetic information, language, military/veteran status, national origin, race, religion, sexual orientation, or other aspect of difference will not be tolerated. This prohibition applies to the patient as well as their family members, representatives, and visitors.

In addition, requests for changes of provider or other medical staff based on the provider's race, ethnicity, religion, sexual orientation or gender identity will not be honored. Requests for provider or medical staff changes based on gender will be considered on a case by case basis and only based on extenuating circumstances.

Patients and their families, representatives and visitors are expected to respect the property of other persons and that of MSHMC.

Provision of Information

Patients and their families must provide, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, advance directives and other matters relating to the patient's health. Patients and their families must report perceived risks in the patient's care and unexpected changes in the patient's condition.

Asking Questions

Patients and their families must ask questions when they do not understand their care, treatment and service or what they are expected to do. The patients and families are responsible for reporting whether they clearly comprehend a contemplated course of action.

Refusing or Not Following Care Instructions

The patient and their families are responsible for the outcomes if they refuse care or do not follow the care, treatment and service plan.

Following MSHMC Rules and Regulations

- Patients and their families must follow MSHMC rules and regulations affecting the patient care and conduct.
- Patients are expected not to take drugs that have not been prescribed by their provider and administered by hospital staff. In addition, it is expected that patients will not complicate or endanger the healing process by consuming alcoholic beverages or toxic substances during their stay.

Following Safety Policies

Patients and their families or visitors are expected to:

- Observe the no smoking policy of the organization.
- Refrain from conducting any illegal activity on the MSHMC's property. If such activity occurs, it will be reported to the police.
- Refrain from recording your experiences in the hospital without the consent of everyone involved including Medical Center physicians, nurses, and other staff. Please Note that unauthorized recording violates Pennsylvania state law.

Paying for Care

The patient is responsible for assuming financial responsibility of payment for all services rendered through third party payors (insurance companies), as applicable, and being personally responsible for payment of any services that are not covered by his/her insurance.

RELATED DOCUMENTS AND REFERENCES

CMS Conditions of Participation, State Operations Manual Appendix A (Revision 151, 11-20-15)
PA Department of Health Rules and Regulations
The Joint Commission Standards

MSHMC Hospital Administration Manual Policies:

- PC-25 Resolution of Patient Complaints and Grievances
- L-07 Informed Consent
- PC-13 Guide to Advance Directive
- PC-75 Visitation Guidelines for Families and Visitors
- PC-77 Restraint and Seclusion: Medical and Behavioral Reasons

APPROVALS

	Name	Title	Date
Authorized:	Alan L. Brechbill	Executive Director	April 2017
Approved:	Thomas Tracy, MD, MS, MD	Chief Medical Officer	April 2017
	Judy Himes, MSN, RN, NE-BC	Chief Nursing Officer	April 2017

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CONTENT REVIEWERS AND CONTRIBUTORS

- Manager, Regulatory and Accreditation
- Manager, Patient Relations
- Manager, Associate Dean of Diversity
- MSHMC Associate General Counsel