

Patients' Rights & Responsibilities

Your Right to Considerate and Respectful Care

You have the right to:

- Access care that is available and medically necessary. If it is necessary to transfer you to another facility, the need for the transfer and
 the alternatives to transfer will be explained to you.
- · Receive considerate and respectful care within the scope of our mission that recognizes your personal dignity, values and beliefs.
- · Wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with diagnostic procedures or treatment.
- · Receive cultural comforts and maintain spiritual identity during hospitalization.
- · Request and receive an itemized and detailed explanation of your total bill for services rendered in the hospital, regardless of the source of payment.
- · Receive timely and competent clinical care.
- · Receive prompt pain assessment, treatment and information concerning the origin of your pain, and pain prevention/relief measures.
- · Be informed of and participate in decisions regarding your care.
- · Express concerns about any aspect of your hospitalization without fear of retaliation, and/or to utilize the hospital's grievance process for unresolved concerns/issues.
- File a grievance with the Banner Health Board of Directors by contacting in writing the System Vice President Business Health/Risk Management at 1441 N. 12th St, Phoenix, AZ 85006. Whether or not you choose to utilize the hospital's grievance process, you may file your grievance with the Arizona Department of Health Services, (602) 364-3030, 150 N. 18th Ave. Phoenix, AZ 85007; the State Attorney General's Office, 1275 W. Washington, Phoenix, AZ 85007; and/or Office of Quality Monitoring, Joint Commission on Accreditation of Healthcare Organizations, One Renaissance Boulevard, Oakbrook Terrace, IL 60181 and/or Health Services Advisory Group, Inc., 1600 E. Northern Avenue, Phoenix, AZ 85020.

Your Right to Information and Participation in Care

You or your Surrogate Decision Maker have the right to:

- Be well informed about your illness and care and to make informed health care decisions. To the degree possible, information will be based on a clear, concise explanation of your condition and all proposed procedures, including likely outcomes, alternatives for care and problems related to recuperation/recovery.
- · Receive clear and prompt answers to your health care questions.
- \cdot Participate in the development and implementation of your plan of care and treatment, including pain management.
- · Consent or refuse treatment, as permitted by law, throughout your hospital stay. If you refuse a recommended treatment, you will receive other needed and available care consistent with your wishes.
- · Consent or decline to take part in available research affecting your care. If you choose not to participate, you will receive the most effective care the hospital otherwise provides.
- · Know the names and roles of the people treating you.
- · Review and obtain a copy of your medical records within a reasonable time frame, except when restricted by law.
- · Request a consult with a specialist.
- · Have access to visitors and to communicate with persons outside the hospital, except where restrictions are necessary because of patient safety/health concerns. If restrictions are necessary, they will be explained to you and your family.
- $\cdot \ \ \text{Notification of family members, representatives and/or your own physician of your admission to the hospital.}$
- · Request an interpreter in your preferred language, or other reasonable means of communication in order to communicate effectively with health care providers.
- Be informed of relationships the hospital has with outside parties that may influence your treatment and care. These relationships may be with educational institutions, other health care providers or insurers.
- Be advised of hospital rules that affect you and your treatment and about charges and payment methods.

Your Right to Privacy and Confidentiality

You have the right to:

- · Verbal and physical privacy as much as is reasonably possible.
- Refuse to see anyone not officially connected with the hospital, including visitors or persons officially connected with the hospital but not directly involved in your care.
- Request to have a person of your own sex present during certain parts of an examination, procedure or treatment performed by a health professional of the opposite sex.
- Expect that your medical records will be reviewed only by those individuals directly involved in your care unless you have given permission to release information or the release of information is required or permitted by law.
- Expect that your medical information will only be available to those persons involved in your care and to those authorized in the Condition of Admission or otherwise authorized by you.

· Refuse care by a student or to have such individuals present during your care.

Your Right to Ethical Decisions

You have the right to:

- · Participate in ethical questions that arise in the course of care, including issues of conflict resolution, withholding resuscitative services, forgoing or withdrawal of life-sustaining treatment and participation in investigational studies or clinical trials.
- Have an advance directive, such as a living will, health care power of attorney, and/or mental health care power of attorney, and receive care that is consistent with these directives. These documents express your choices about your future care and/or name someone to make decisions for you if you cannot make or communicate your own health care decisions. If you have a written advance directive, you should provide a copy to the hospital, your family and your doctor.
- Receive written information on your rights under state law to make decisions about medical care, [including the right to accept or refuse medical or surgical treatment and the right to prepare a durable power of attorney for health care or living will].
- · Designate a decision maker in the event you are incapable of understanding a proposed treatment or procedure or are unable to communicate your wishes regarding care.
- · Access the Ethics Committee when you or your family have conflicts with your treatment and personal values.
- · Consent/refuse to participate in any research study.
- · Know you will not be discriminated against or your treatment limited based upon whether or not you decide to prepare a living will or durable power of attorney for health care.

Your Right to Safety and Security

You have the right to:

- · Expect reasonable safety and security in the hospital practices and environment.
- Be protected from any form of physical abuse, physical punishment, sexual abuse, verbal abuse and psychological abuse including humiliating, threatening and exploitative actions.
- · Seek advocacy services to investigate and/or protect you from abuse, neglect and/or fraud.
- · Be free from chemical or physical restraints and seclusion unless clinically necessary.

Your Responsibility to Information and Participation in Care

You are responsible to:

- · Provide accurate and complete information about your health, including present complaints, past illnesses, hospitalizations and medication use.
- · Participate in your plan of care and report unexpected changes in your condition to your caregivers, as you are able.
- · Follow your doctor's orders and instructions and the hospital staff's instructions for your treatment and care.
- Tell your doctor if you feel you cannot follow through with your treatment and accept responsibility for refusing treatment. Ask your doctor about the risks and consequences for refusal prior to making decisions.
- Work with your health team to develop a pain management plan which includes assisting your doctors and nurses to assess your pain, asking for pain relief when pain first begins, discussing pain relief options, and informing your doctors and nurses when pain is not relieved.
- · Ask questions when you do not understand information or instructions.
- · Keep appointments and, when unable to do so for any reason, notify the responsible practitioner or the hospital.
- · Communicate to your health care provider your spiritual, emotional and cultural needs.
- · Recognize the effect of lifestyle on your personal health. Your health depends not just on your hospital care, but in the long term on the decisions you make in your daily life.
- · Periodically review your Living Will or Durable Power of Attorney for Health Care, if you have one, with family, physician and the person you have selected to represent you.
- · Bring an updated copy of your Living Will or Durable Power of Attorney for Health Care to be placed in your medical record at the time of each admission.

Your Responsibility to Hospital Rules and Regulations

You are responsible to:

- · Assure that the financial obligations of your health care are fulfilled as promptly as possible. Provide insurance information and pay your bill promptly so we can continue to serve you and the community effectively.
- · Be considerate of the needs and rights of other patients, staff and hospital and follow the rules and regulations of the hospital.
- · Respect the need of other patients for privacy and quiet. Consider other patients when using your television, radio or telephone.
- · Place all valuables (jewelry, money, etc.) in the hospital safe or send them home with family.
- Tell staff what personal items (dentures, glasses, hearing aids, etc.) you are keeping with you in the hospital. You will be responsible for taking care of these items during your stay.
- · Be respectful of the healing environment.
- · Observe the non-smoking policy.
- · Observe visiting hours and discharge times.
- Refrain from initiation or participation in fraudulent health care practices and report illegal or unethical behavior by providers to the appropriate medical societies, licensing boards or law enforcement authorities.