

PATIENT RIGHTS & RESPONSIBILITIES

As a WhidbeyHealth patient, you have many rights to ensure you receive the best care possible in a safe setting. You also have responsibilities that help both you and your caregivers make informed decisions about your treatment while you are in our care. Each patient has the right to personal privacy and rights to complete information about your medical bill.

As our patient of WhidbeyHealth Medical Center or any WhidbeyHealth location, you have the right to:

Communication

- 1) To know the names of the health care professionals caring for you.
- 2) To have your questions or concerns addressed to the best of our ability.
- 3) To have a family member (or representative of your choice) and your Provider notified promptly of your admission to the hospital.
- 4) To receive information in a way 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.
- 5) To receive from your provider information concerning your illness or injury, possible treatments, and the likely outcome of these treatments in terms you can understand. You may include or exclude family members from hearing this information.
- 6) To receive from your provider your diagnosis(es), the treatment you and your provider identified, information about your medication (including the purpose, use, or side effects), the potential outcome of the illness and any instructions required for follow-up care.
- 7) To know why various tests and treatments and the risks associated with any procedure or treatment.
- 8) To be informed of unanticipated outcomes.
- 9) To have advance directives and for the hospital to respect and follow those directives. You also have the right to request no resuscitation or life-sustaining treatment and end-of-life care.
- 10) To be told of reasonable alternatives for your care when acute inpatient hospital care is no longer appropriate.
- 11) To be informed of hospital or clinic rules which may affect you and your treatment.
- 12) To know if the hospital or clinic has outside relationships that may influence your treatment and care. Such relationships may be with educational institutions, healthcare providers or insurers.
- 13) To timely complaint resolution without fear of retribution or denial of care. You may register a complaint by contacting Patient Experience or if requiring immediate attention then contact the manager/supervisor of the department where care was received.

Treatment

- 1) To be treated and cared for with dignity, respect, and compassion in person, over the telephone and in written communication.
- 2) To receive care in a safe setting, free from abuse or harassment.
- 3) To have impartial access to treatment or accommodations available or medically indicated regardless of culture, creed, ethnicity, religion, national origin, marital status, sex, sexual orientation, gender identity or expression, disability, veteran or military status, source of payment or any other basis prohibited by federal, state, or local law.
- 4) To refuse or change your mind about any treatment, medications, or procedure, within the restraints of the law, and to be informed of the medical consequences of such action.
- 5) To refuse to see or talk with anyone who is not directly involved in your care.
- 6) To be shown consideration for your personal privacy. The hospital, clinics, your provider, and others caring for you will protect your privacy as much as possible.
- 7) To be involved in care planning and treatment.
- 8) To appoint a surrogate to make health care decisions, as permitted by law.
- 9) To have your pain addressed and appropriately managed.
- 10) To follow your spiritual and religious beliefs and customs as much as possible.
- 11) To access protective and advocacy services.
- 12) To have a person of the same gender with you during certain exams and treatments.
- 13) To be free from any form of restraint, whether physical or pharmaceutical, that is not medically required.

Visitation

- 1) To designate a support person or representative.
- 2) To choose who may and may not visit you, including but not limited to a spouse, civil union partner, domestic partner (including same sex partner), another family member or a friend.

- 3) To have individuals designated by the patient as a visitor, support person or representative not be restricted, limited, or denied visitation privileges based on age, race, color, culture, creed, ethnicity, religion, national origin, marital status, sex, sexual orientation, gender identity or expression, disability, veteran or military status or any other basis prohibited by federal, state, or local law.

Compliance

To be seen in a timely manner when you arrive for your appointment.

Billing Information

To receive a detailed explanation of your medical bill, regardless of the source of payment and to receive information or to be advised of the availability of counseling to obtain financial assistance if needed.

Medical Records

To access the information contained in your medical record and receive, on request and at a fee established by the State of Washington, a copy of your medical record except as limited by the law.

Confidentiality

- 1) To have all records pertaining to treatment be confidential, except as provided by law or third party contractual agreements.
- 2) To request information not be shared with health care plan/insurance when visit is paid in full out of pocket.

For Complaints or Feedback, Patients May Contact:

WhidbeyHealth Quality Department
360.678.5151, Patient Experience Coordinator
101 N. Main St., Coupeville, WA 98239
myhospital@whidbeyhealth.org

Additional Contact:

Washington Department of Health
360.236.4700 / 800.633.6828
HSQA Complaint Intake
PO Box 47857, Olympia, WA 98045-7857
complaintintake@doh.wa.gov

Additional Contact:

ATTN: DNV Healthcare Complaints
DVN Healthcare USA Inc
1400 Ravello Dr
Katy, TX 77449
Voice Mail: 866.496.9647 Fax: 281.870.4818
Hospitalcomplaint.@dnv.com
An online complaint form can be found at
www.dnv.healthcare.com

Patient Responsibilities

As our patient, you have the responsibility:

Treatment

To provide accurate, complete, and truthful information to the best of your knowledge concerning your present symptoms, past medical history, hospitalizations, medications, advance directives, and other matters relating to your health.

Communication

- 1) To fully participate in decisions involving your own health and accept the consequences of these decisions.
- 2) To ask questions when you do not fully understand your health problems and the plan of care.
- 3) To make it known if you do or do not understand the planned course of medical treatment and what is expected of you.
- 4) To tell your provider if you believe you cannot follow through with your treatment.
- 5) To discuss end of life decisions including donation, other tissues, life support systems, and make your wishes clearly known in advance.
- 6) To provide a copy of your advance directive, if applicable.
- 7) Personal Valuables: To send all valuable personal property home and understand that WhidbeyHealth System is not liable for the loss or damage of any personal property that is not sent home. Valuables may be temporarily stored in a secure location, if necessary.

Compliance

- 1) To follow the treatment plan agreed upon with your provider.
- 2) To be on time for appointments.
- 3) To keep appointments and to notify the appropriate department or provider's office at least 24 hours prior to your appointment when able to do so.
- 4) To treat other patients, staff, and providers with respect in person, over the telephone and in written communication.
- 5) To be considerate of the rights and property of other patients and facility personnel.
- 6) To comply with WhidbeyHealth's no smoking policy.

Payment

- 1) To present your health insurance identification card whenever you need medical care.
- 2) To understand your insurance coverage and to resolve issues that may arise with your insurance company.
- 3) To make all co-payments when due at the time of service.
- 4) To pay your bill or make arrangements for payment.