CASCADE VALLEY HOSPITAL AND CLINICS
POLICY & PROCEDURE

NUMBER: 03-3-087		Date Effective: 3/14	
TITLE: Patient Nondiscrimination Policy	Review Date	Revise Date	Signature
DIVISION: CVH DEPARTMENT: Universal Patient Care			
ROUTE TO: All			
CROSS REFERENCE:			

SCOPE

This procedure applies to all members of the Cascade Valley Hospital workforce, including employees, medical staff members, contracted service providers, and volunteers, and to all vendors, representatives, and any other individuals providing services to or on behalf of Cascade Valley Hospital ("Hospital Personnel").

PURPOSE

To ensure that all patients and visitors of Cascade Valley Hospital are treated with equality, in a welcoming, nondiscriminatory manner, consistent with applicable state and federal law.

POLICY

Cascade Valley Hospital is dedicated to providing services to patients and welcoming visitors in a manner that respects, protects, and promotes patient rights.

1. Hospital Personnel will treat all patients and visitors receiving services from or participating in other programs of Cascade Valley Hospital and its affiliated clinics with equality in a welcoming manner that is free from discrimination based on age, race, color, 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.
2. Hospital Personnel will inform patients of the availability of and make reasonable accommodations for patients consistent with federal and state requirements. For example, language interpretation services will be made available for non-English speaking patients and sign language interpretation will be made available for hearing impaired patients.
3. Hospital Personnel will afford visitation rights to patients free from discrimination based on age, race, color, 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 and will ensure that visitors receive equal visitation privileges consistent with patient preferences.
4. Any person who believes that he, she, or another person has been subjected to discrimination which is not permitted by this Policy, may file a complaint using Cascade Valley Hospital's complaint and grievance procedure.
5. Hospital Personnel are prohibited from retaliating against any person who opposes, complains about, or reports discrimination, files a complaint, or cooperates in an investigation of discrimination or other proceeding under federal, state, or local anti-discrimination law.

PROCEDURE

1. Cascade Valley Hospital's Corporate Compliance Officer is responsible for coordinating compliance with this Policy.
2. Hospital Personnel will determine eligibility for and provide services, financial aid, and other benefits to all patients in a similar manner, without subjecting any individual to separate or different treatment on the basis of age, race, color, 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.

3. Hospital Personnel will inform each patient, or the patient's support person, including the patient's attorney in fact, when appropriate, of the patient's visitation rights, including any clinical restriction on those rights and the patient's right, subject to the patient's consent, to receive visitors whom the patient designates, free of discrimination based upon age, race, color, 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. Such visitors include a spouse, state registered domestic partner (including same-sex state registered domestic partner), another family member, friend, or a legal representative of the patient, such as an attorney-in-fact. Hospital Personnel will notify patients of their right to withdraw or deny such consent at any time. Hospital Personnel will afford such visitors equal visitation privileges consistent with the patient's preferences.
4. Any Hospital Personnel receiving a patient or visitor discrimination complaint will advise the complaining individual that he or she may report the problem to Cascade Valley Hospital's Patient Advocate and file a complaint without fear of retaliation.

CASCADE VALLEY HOSPITAL AND CLINICS
POLICY

NUMBER: 03-3-022		DATE EFFECTIVE: 3/94	
TITLE: Patient Rights	APPROVAL SIGNATURE:		
	REVIEW DATE	REVISE DATE	SIGNATURE
DIVISION: CVHC & CVASC DEPARTMENT: Universal Patient Care	02/12	02/12	
ROUTE TO: All Departments and Clinics, CVASC	03/12	03/12	
	6/12	6/12	
CROSS REFERENCE: 02-3-025	4/13	4/13	
Approved – CVH Board of Commissioners 2/15/12	3/14	3/14	

SCOPE This policy applies to all employees whose terms and conditions of employment are administered by Cascade Valley Hospital and Clinics.

STATEMENT Patients have a fundamental right to considerate care that safeguards their personal dignity and respects their cultural, psychosocial, and spiritual values. These values often influence patients' perception of care and illness. Understanding and respecting these values guide the provider in meeting patients' care needs and preferences.

RESPECT FOR PATIENT RIGHTS

A. At CVHC, we respect the rights of our patients, their role in making decisions about medical treatment, and all aspects of their care.
B. Staff are committed to providing access to health care regardless of race, gender, sexual orientation, national origin, religion, or ability to pay for emergency medical services. Staff are sensitive to patients' cultural, linguistic, ethnic, and religious backgrounds, as well as to age and physical impairments.
C. We believe that we can best serve our patients by working with them as a team to build trust with them, their families and loved ones, doctors, nurses, and other caregivers.
D. CVHC staff will inform each patient, or when appropriate, the patient's representative (as allowed under State law), of the patient's rights, in advance of furnishing or discontinuing patient care. The patient and their designated representative, if known, will be furnished with the Patient Rights notice. CVHC affirms the following patient rights for all adults, adolescents, children, and infants, as well as for the families of patients, who come to CVHC for care.
   1. The patient has the right to considerate, respectful, and appropriate care.
   2. The patient has the right to an interpreter service if they need one.
   3. The patient has the right to obtain complete, current, and clear information about diagnosis, treatment, and the probable course and outcome of a condition, including unanticipated outcomes. The patient may request and discuss additional information about proposed procedures and/or treatments, including benefits, risks, and recovery time, as well as any medically reasonable alternatives and their benefits, risks, and recovery time. This right may be temporarily waived during a medical emergency when there is an urgent need for treatment and the patient is not able to make such decisions.
   4. The patient has the right to have a family member or representative of his or her choice and his or her physician notified promptly of his or her admission to the hospital.

5. The patient has the right to know the names of doctors, nurses, and caregivers who are coordinating their care, as well as when those involved are students, residents or other trainees. The patient has the right to know the immediate and long-term cost of treatment choices, when such information is available.
6. The patient has the right to make informed decisions about, and participate in, their ||treatment and plan of care. The patient has the right to have family input in care ||decisions in compliance with existing legal directives or existing court orders. Before and during that care, they have the right to give or withhold informed consent to any proposed medical procedure or treatment. The patient has the right to refuse a recommended treatment or plan of care to the extent that is permitted by law, and to be informed of any medical consequence of this decision. If the patient does refuse treatment, they are entitled to other appropriate care and services provided by the medical center or transfer to another hospital. The patient may delegate his/her right to make informed decisions to another person. CVHC will ensure that the patient's wishes are accommodated concerning a designation of a representative to exercise the patient's right to participate in the development and implementation of the plan of care.
7. The patient has a right to express their values and beliefs and to exercise spiritual and cultural beliefs that do not interfere with the well being of others or their planned course of treatment.
8. If the patient is an adult, defined as a person who is at least 18 years of age and has the capacity to make healthcare decisions, they have the right to make their wishes known about the extent of treatment they would desire if they became unable to communicate those wishes, or designating a surrogate decision maker with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy. This communication is called an advance directive. Two commonly used advance directives are:
   a. A health care directive (living will), in which they communicate orally or in writing the specific treatment desired if they later cannot communicate these wishes.
   b. A durable power of attorney for health care, in which they designate another person to make decisions about their health care if they become unable to do so.
   c. Upon Admission, CVHC will ask the patient if they have a designated representative. This person's name will be entered as the "Person to Notify" in the patient's medical record. Accordingly, any Advance Directive listing a representative will also be reviewed to ensure that the "Person to Notify" is accurately documented in the record.
   d. When a patient is not incapacitated but has designated a representative under the law, either through an advance directive or verbally upon admission, the Patient Rights will be furnished to both the patient and their designee(s). When the patient is incapacitated, the Patient Rights will be furnished immediately to their designated representative. Furthermore, CVHC will accept the assertion of representation by an individual without demanding supporting documentation unless it violates state law, more than one person is claiming to be the representative or when CVHC has reasonable cause to believe the claim is false. Any refusal by the hospital of an individual's request to be treated as the Patient's representative will be documented in the patient's medical record along with the basis of refusal. The medical record shall document whether the patients' rights were provided as required to the patients' representatives.
9. The patient has the right to information about policies that may limit CVHC's ability to fully implement a legally valid advance directive.

a. After a discussion between surgeon, anesthesia, and patient or representative, advanced directives may be suspended during the surgical period for surgical patient of Cascade Valley Hospital and Cascade Valley Arlington Surgery Center. According to a statement by the American College of Surgeons some patients with DNR status become candidates for surgical procedures that may provide them with significant benefit even though the procedure may not change the natural history of the underlying disease. (Examples include procedures to treat intestinal obstruction in individuals with advanced malignancy and surgical procedures to alleviate pain.) When such patients undergo surgical procedures and the accompanying sedation or anesthesia, they are subjected to new and potentially correctable risks of cardiopulmonary arrest. Furthermore, many of the therapeutic actions employed in resuscitation (for example, intubation, mechanical ventilation, and administration of vasoactive drugs) are also an integral part of anesthetic management, and it is appropriate that the patient be so informed. The DNR status of such patients during the operative procedure and during the immediate postoperative period may need to be modified prior to operation. Bulletin of the American College of Surgeons, Vol. 79, No. 9, Page 29, September 1994.

10. The patient has the right to privacy. Case discussion, consultation, examination and treatment should be conducted so as to protect each patient's privacy.
11. The patient has the right to be free from all forms of abuse, mistreatment, neglect or ||harassment. The patient has the right to have access to protective services.
12. The patient has the right to expect that all communications and records about their care will be treated as confidential by CVHC, as required by law, such as in suspected abuse and public health hazards. The patient has the right to expect that the hospital will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.
13. The patient has the right to review the records pertaining to his/her medical care and have the information explained or interpreted as necessary except when restricted by law. The patient has a right to an accounting of disclosures of their health care information. The patient has the right to request restrictions on use and/or disclosure of their health care information. Further, the patient has a right to request a correction if they believe that information in their record is incorrect or missing. Further questions or concerns may be directed to the CVHC Privacy Officer at (360) 435-2133, Ext. 7812.
14. The patient has the right to expect that, within its limits, CVHC will make a reasonable response to any patient request for services. CVHC will provide evaluation, service, and/or referral as indicated by the urgency of the case.
15. The patient may be transferred to another facility when medically appropriate and legally permissible only after they are provided complete information about the need for and the risks, benefits, and alternatives to such a transfer. CVHC must obtain approval from the other facility before the patient can be transferred.
16. The patient has the right to ask and be informed of the existence of business relationships among the hospital, educational institutions, other health care providers, or payers that may influence the patient's treatment and care.
17. The patient has the right to consent to or refuse to participate in proposed research studies that affect their care and treatment or which require direct patient involvement. They have the right to have such studies fully explained prior to making a decision. They are entitled to the most effective care the medical center can provide, whether they participate in research studies or not.
18. The patient has the right to expect reasonable continuity of care and to be informed by caregivers of available and realistic options when care at CVHC is no longer appropriate.

19. The patient has the right to describe their pain experience and to expect that their caregivers will respond quickly and respectfully to their reports of pain. Their pain care will be monitored and evaluated on a regular basis; however, they have the right to request alternative pain care approaches.
20. The patient has the right to be informed of CVHC policies, practices, and facilities which relate to patient care and responsibilities. They have the right to be informed of the cost for procedures and treatments, how to pay, and how to resolve disputes, complaints, and conflicts.
21. The patient has the right to a safe environment and to be informed of the results of treatments or procedures whenever those results differ significantly from anticipated results.
22. The patient has the right to be free from seclusion and restraints of any form imposed as a means of coercion, discipline, convenience, or retaliation by staff.
23. The patient has the right to notify their caregivers if they have concerns or complaints about any aspect of their care. They should report concerns to their doctor, nurse, or any other member of their health care team. The patient may file a concern or complaint, which will in no way compromise their care, to:
    Patient Advocate for Customer Satisfaction
    Cascade Valley Hospital and Clinics
    330 S. Stillaguamish
    Arlington, WA 98223
    (360) 618-7619
24. The patient will receive a written or verbal response to their concern. Resolution can be expected within 14 days.
25. Complainant has the option of complaining directly to the Washington State Department of Health Complaint Intake by calling 1-800-633-6828 or emailing HSQAComplaintIntake@doh.wa.gov, regardless of whether they complained to us. They may also contact the Office of the Medicare Beneficiary Ombudsman at 1-800-MEDICARE, website http://www.medicare.gov/navigation/help-and-||support/ombudsman.aspx.
26. The CVHC Ethics Committee is available to any care provider, patient, patient's family or loved one to assist when an ethical concern arises in patient care, including decisions about end-of-life, organ/tissue donation, or direction by family or surrogate decision makers. Their doctor, primary nurse, or other staff can help them contact this service.

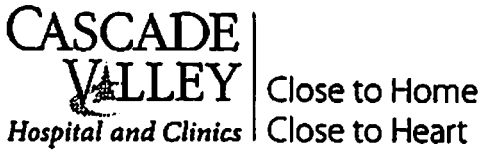
E. Patient Responsibilities

. CVHC believes the patient shares in the responsibility for their own care. The patient is responsible for:

1. Being on time for scheduled appointments, or to notify CVHC when they cannot keep their appointment.
2. Providing complete and accurate information (such as information about past illnesses, medications, advance directives, and other health-related matters). The patient should report any changes in their condition to their healthcare team.
3. Participating in discussions and asking questions about their care.
4. Letting caregivers know whether they understand a proposed care plan and what is expected of them.
5. Following the treatment plan to which they agreed. Accept any consequences for their choices.
6. For participating in discussions about their pain management and to ask questions about pain relief options. They are responsible for asking for pain relief when pain first begins and to tell their caregivers if their pain is not relieved.

7. Any behavior that disrupts, interferes with, intimidates, harasses, threatens or harms any staff member or other person in the medical center is prohibited and may result in the patient's removal from the medical center, termination of care, and possible civil or criminal charges. Weapons are prohibited on CVHC property. This excludes pocket knives (see Policy/Procedure 13-3-132 titled "No Weapons Policy").
   a. The patient must respect the rights of others. They may not disturb other patients and may not disrupt or interfere with care provided to other patients or the operations of the medical center.
   b. Following all hospital rules and regulations.
   c. Meeting all financial commitments or requesting financial assistance.
8. If the patient has any questions about these rights and responsibilities, the caregiver will be happy to talk to them.

CVHC Mission:	To provide excellent, friendly health care close to home.
CVHC Vision:	We strive to be the health care system of choice for our community.
CVHC Values:	Driven by quality customer service.



Patients' Rights & Responsibilities

Patients Are Our Partners in Care

Patients' Rights

Access to Care and Communication - Patients are admitted to Cascade Valley Hospital and Clinic facilities without regard to race, religion, gender, sexual orientation, national origin, disability, or source of payment for care. Patients have the right to access protective services with support from the hospital. Patients have a right to an interpreter if they need one. The patient has the right to have a family member or representative of his/her choice and his/her own physician notified promptly of his/her admission to the hospital. The patient has the right to expect reasonable continuity of care and to be advised of other care providers available and realistic patient care options when hospital care is no longer appropriate. The patient has the right to be informed of the existence of business relationships among the hospital, education institutions and other care providers or payers that may influence the patient's treatment and care.

Respect and Dignity - All patients have the right to care that is respectful and considerate of personal values and beliefs, paying attention to psychosocial, spiritual, and cultural needs as they related to individualized patient care. Patients may designate their visitors by deciding who may and who may not visit them while in our care. Cascade Valley Hospital and Clinics does not deny visitation on a patient's or visitor's sexual orientation, race, color, national origin, religion, sex, gender identity or disability. Patients have the right to refuse to be observed or cared for by any person or group other than those directly responsible for their care. Patients have the right to expect treatments and procedures to be explained to them using the language or method of communication they best understand. They have a right to pastoral counseling. Patients have the right to be free of restraints of any form that are not medically or behaviorally necessary.

Information and Participation in Decision Making - Patients are encouraged to become involved in all aspects of their care and have family input in care decisions. They have the right to know the names of all persons responsible for the delivery of their diagnosis and course of treatment. Patients have the right to effective communication, to receive information in a manner they understand and to ask their providers for clarification. Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation and medically reasonable alternatives and their risks and benefits. Patients have the right to refuse any prescribed course of treatment - including life-sustaining treatment - after they have been informed of the possible consequences of that decision and their refusal will not affect access to care.

When the patient is not the legally responsible representative, the authorized representative has the right to refuse care, treatment and services. Patients and families are educated about their role in helping to facilitate the safe delivery of care. Patients, and when appropriate their families, are informed about the outcomes of care, including unanticipated outcomes. The patient has the right to be informed of hospital policies and practices that relate to patient care, treatment and responsibilities. The patient may expect the provider to make reasonable response to the request of a patient for appropriate and medically indicated care and the provider will provide evaluation, service and/or referral as indicated by the urgency of the case. The patient has a right to request transfer to another facility, including information about the need for and the risks, benefits and alternatives to a transfer. The institution to which the patient is to be transferred must first accept the transfer. Patients have the right to access information in their medical record in a reasonable time frame and to have the information explained or interpreted as necessary, except when restricted by law. Patients have the right to request a correction if they believe that information in their record is missing or incorrect. Patients are informed of the immediate and long-term financial implications of treatment choices if they are known.

Informed Consent - Patients (legally-responsible adult, parent/guardian of minor) have a right to have proposed treatments or procedures explained to them in a manner they can understand. Only after they give their voluntary consent will the procedure or treatment for routine, non-emergent care be provided. Patients asked to participate in a research project are given information on expected benefits, risks, alternatives, the procedure itself, and/or the right to refuse to participate without compromising their access to services.

Conflict Resolution and Ethical Decision Making - Patients have the right to voice complaints about their care, which will in no way compromise their care, and to have the complaint reviewed, and when possible, resolved timely. Patients have a right to expect assistance in resolution of dilemmas regarding their care and treatment, including grievances about mistreatment, abuse or neglect. Patients having a conflict or complaint should express their concern to the staff delivering care, the department manager, or Patient Advocate at (360)618-7619. Patients can expect a written response to their grievance within 7 days of filing the grievance. Resolution can be expected either verbally or in writing, within 14 days. Patients with concerns about bills should call (360)618-7620. They also have the right to file a complaint with the Washington State Department of Health and Human Services at (800)633-6828. In addition, Medicare patients having grievances related to quality of care, coverage decisions, or premature discharge, have the right to request review by the QIO (Qualis) by calling (800)MEDICARE..

Patients' Rights & Responsibilities (cont.)

Ethical Decision Making (cont.) - Patients have a right to access Cascade Valley Hospital and Clinics Ethics Committee to assist when concerns arise in their care, including decisions about end-of-life, organ/tissue donation, or direction by family or surrogate decision makers.

Security, Privacy and Confidentiality - Patients have the right to expect to be cared for in a secure environment free from all forms of abuse (mental, physical, sexual, verbal, neglect, mistreatment, exploitation) and harassment as well as have access to protective services. Patients have a right to a safe error-free experience. Personal privacy will be respected in care delivery. Patients have the right to privacy and confidentiality regarding their treatment, care and medical record. Personal health information will not be shared in front of visitors without your permission. The patient has a right to expect that all communications pertaining to his/her care will be treated as confidential, except in cases such as suspected abuse and public health hazards when reporting is permitting or required by law. Patients have the right to understand the possible uses and disclosures of their protected health information. Patients have a right to an accounting of disclosures of their health care information and the right to requested restrictions on use and/or disclosure of their information.

Advance Directives - Patients of legal age have the right to express their wishes regarding treatment at any point in the care provided with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy. The patient has the right to timely information about hospital policy that may limit its ability to implement fully a legally valid advance directive. Advance Directives (such as a living will, health care proxy, or durable power of attorney for health care) can include end-of-life care decisions and self-directed anatomical gift donations. The patient can expect the institution to ask if the patient has an advance directive and include that information in the medical record. In the absence of advanced directives, the hospital will offer information and education and will offer assistance in completing a written advance directive. A surgical patient may expect their directives to be suspended during the surgical period after a discussion between the surgeon, anesthesia and patient or representative.

Pain Management - Patients have the right to have their pain recognized and address appropriately. This includes information about pain and pain relief measures, a concerned staff committed to effective pain prevention and management, health care professionals who believe and respond quickly to reports of pain, and state-of-the art pain management and treatment. Patients also have the right to requested alternative pain care approaches.

Special Notes
These Patient Rights also reflect the rights of any designated representative of the patient. The patient may delegate his/her rights to make informed decisions to another person. CVHC will ensure that the patient's wishes are accommodated concerning the designation of a representative to exercise the patient's right to participate in the development and implementation of the plan of care. When there is a designated representative known, these Patient Rights shall also be offered to that representative.

Patients' Responsibilities

Respect and Dignity - All patients have the responsibility to follow all rules and regulations established by the hospital system concerning patient care and conduct. If they have questions related to these rules, they should ask their care provider for clarification. All patients have the responsibility to respect the rights of other patients as well as hospital staff in both their conduct and the behavior of their visitors.

Protecting Others from the Spread of Communicable Illness and Infection - Patients should not permit family or friends to visit if they are sick or if they have been exposed recently to a communicable disease such as TB, chicken pox, influenza, etc. Visitors should be asked to wash their hands before visiting. Patients are also encouraged to wash their hands frequently.

Information and Participation in Decision Making - All patients have the responsibility to provide complete and accurate information with respect to their medical history, all medication use, present complaint, and any other health-related issues that may have an effect on their course of treatment. They are expected to become partners in the development and implementation of their plan of care.

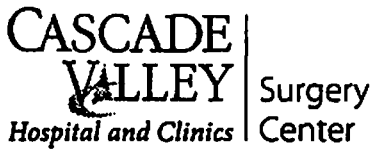
Patients are responsible for reporting unexpected changes in their condition and perceived risks in their care to the appropriate practitioner. They should notify the health care provider if they have concerns about their ability to follow the treatment plan so the hospital or clinic can make every effort to adapt to the patient's specific needs and limitations. Where such adaptations are not recommended, the patient and family should understand the consequences of failing to follow the recommended course of treatment, or of using other treatments.

All patients have the responsibility to ask questions when they do not understand what they have been told or what they are expected to do. If a patient or family refuses treatment or fails to follow instructions, they are responsible for the consequences of that decision.

Pain Management - Patients have the responsibility to participate in their pain management. This includes information about pain and pain relief measures, staff committed to effective pain prevention, a quick response to reports of pain and state-of-the-art pain management. Patients should ask for pain relief when pain first begins, and tell the doctor or nurse if the pain is not relieved.

Smoking Policy - Because of health risks to you and others from second-hand smoke, patients and their visitors are not permitted to smoke in any Cascade Valley Hospital and Clinics facility or on any Cascade Valley Hospital and Clinic property.

Meeting Financial Obligations - Patients are responsible for promptly meeting any financial obligations for care, treatment and services provided by the hospital and clinics. Cascade Valley Hospital and Clinics has financial counselors available to assist patients in meeting these obligations.



Patients' Rights & Responsibilities

Patients Are Our Partners in Care

Patients' Rights

Access to Care and Communication - Patients are admitted to Cascade Valley Arlington Surgery Center without regard to race, religion, gender, sexual orientation, national origin, disability, or source of payment for care. Patients have the right to access protective services with support from the hospital. Patients have a right to an interpreter if they need one. The patient has the right to have a family member or representative of his/her choice and his/her own physician notified promptly of his/her admission to the hospital. The patient has the right to expect reasonable continuity of care and to be advised of other care providers available and realistic patient care options when hospital care is no longer appropriate. The patient has the right to be informed of the existence of business relationships among the hospital, education institutions and other care providers or payers that may influence the patient's treatment and care.

Respect and Dignity - All patients have the right to care that is respectful and considerate of personal values and beliefs, paying attention to psychosocial, spiritual, and cultural needs as they related to individualized patient care. Patients may designate their visitors by deciding who may and who may not visit them while in our care. Cascade Valley Arlington Surgery Center does not deny visitation on a patient's or visitor's sexual orientation, race, color, national origin, religion, sex, gender identity or disability. Patients have the right to refuse to be observed or cared for by any person or group other than those directly responsible for their care. Patients have the right to expect treatments and procedures to be explained to them using the language or method of communication they best understand. They have a right to pastoral counseling. Patients have the right to be free of restraints of any form that are not medically or behaviorally necessary.

Information and Participation in Decision Making - Patients are encouraged to become involved in all aspects of their care and have family input in care decisions. They have the right to know the names of all persons responsible for the delivery of their diagnosis and course of treatment. Patients have the right to effective communication, to receive information in a manner they understand and to ask their providers for clarification. Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation and medically reasonable alternatives and their risks and benefits. Patients have the right to refuse any prescribed course of treatment - including life-sustaining treatment - after they have been informed of the possible consequences of that decision and their refusal will not affect access to care.

When the patient is not the legally responsible representative, the authorized representative has the right to refuse care, treatment and services. Patients and families are educated about their role in helping to facilitate the safe delivery of care. Patients, and when appropriate their families, are informed about the outcomes of care, including unanticipated outcomes. The patient has the right to be informed of hospital policies and practices that relate to patient care, treatment and responsibilities. The patient may expect the provider to make reasonable response to the request of a patient for appropriate and medically indicated care and the provider will provide evaluation, service and/or referral as indicated by the urgency of the case. The patient has a right to request transfer to another facility, including information about the need for and the risks, benefits and alternatives to a transfer. The institution to which the patient is to be transferred must first accept the transfer. Patients have the right to access information in their medical record in a reasonable time frame and to have the information explained or interpreted as necessary, except when restricted by law. Patients have the right to request a correction if they believe that information in their record is missing or incorrect. Patients are informed of the immediate and long-term financial implications of treatment choices if they are known.

Informed Consent - Patients (legally-responsible adult, parent/guardian of minor) have a right to have proposed treatments or procedures explained to them in a manner they can understand. Only after they give their voluntary consent will the procedure or treatment for routine, non-emergent care be provided. Patients asked to participate in a research project are given information on expected benefits, risks, alternatives, the procedure itself, and/or the right to refuse to participate without compromising their access to services.

Conflict Resolution and Ethical Decision Making - Patients have the right to voice complaints about their care, which will in no way compromise their care, and to have the complaint reviewed, and when possible, resolved timely. Patients have a right to expect assistance in resolution of dilemmas regarding their care and treatment, including grievances about mistreatment, abuse or neglect. Patients having a conflict or complaint should express their concern to the staff delivering care, the department manager, or Patient Advocate at (360)618-7619. Patients can expect a written response to their grievance within 7 days of filing the grievance. Resolution can be expected either verbally or in writing, within 14 days. Patients with concerns about bills should call (360)618-7620. They also have the right to file a complaint with the Washington State Department of Health and Human Services at (800)633-6828. In addition, Medicare patients having grievances related to quality of care, coverage decisions, or premature discharge, have the right to request review by the by calling (800)MEDICARE.

Patients' Rights & Responsibilities (cont.)

Ethical Decision Making (cont.) - Patients have a right to access Cascade Valley Arlington Surgery Center Ethics Committee to assist when concerns arise in their care, including decisions about end-of-life, organ/tissue donation, or direction by family or surrogate decision makers.

Security, Privacy and Confidentiality - Patients have the right to expect to be cared for in a secure environment free from all forms of abuse (mental, physical, sexual, verbal, neglect, mistreatment, exploitation) and harassment, as well as have access to protective services. Patients have a right to a safe error-free experience. Personal privacy will be respected in care delivery. Patients have the right to privacy and confidentiality regarding their treatment, care and medical record. Personal health information will not be shared in front of visitors without your permission. The patient has a right to expect that all communications pertaining to his/her care will be treated as confidential, except in cases such as suspected abuse and public health hazards when reporting is permitting or required by law. Patients have the right to understand the possible uses and disclosures of their protected health information. Patients have a right to an accounting of disclosures of their health care information and the right to requested restrictions on use and/or disclosure of their information.

Advance Directives - Patients of legal age have the right to express their wishes regarding treatment at any point in the care provided with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy. The patient has the right to timely information about hospital policy that may limit its ability to implement fully a legally valid advance directive. Advance Directives (such as a living will, health care proxy, or durable power of attorney for health care) can include end-of-life care decisions and self-directed anatomical gift donations. The patient can expect the institution to ask if the patient has an advance directive and include that information in the medical record. In the absence of advanced directives, the hospital will offer information and education and will offer assistance in completing a written advance directive. A surgical patient may expect their directives to be suspended during the surgical period after a discussion between the surgeon, anesthesia and patient or representative.

Pain Management - Patients have the right to have their pain recognized and address appropriately. This includes information about pain and pain relief measures, a concerned staff committed to effective pain prevention and management, health care professionals who believe and respond quickly to reports of pain, and state-of-the art pain management and treatment. Patients also have the right to requested alternative pain care approaches.

Special Notes
These Patient Rights also reflect the rights of any designated representative of the patient. The patient may delegate his/her rights to make informed decisions to another person. CVASC will ensure that the patient's wishes are accommodated concerning the designation of a representative to exercise the patient's right to participate in the development and implementation of the plan of care. When there is a designated representative known, these Patient Rights shall also be offered to that representative.

Patients' Responsibilities

Respect and Dignity - All patients have the responsibility to follow all rules and regulations established by the hospital system concerning patient care and conduct. If they have questions related to these rules, they should ask their care provider for clarification. All patients have the responsibility to respect the rights of other patients as well as surgery center staff in both their conduct and the behavior of their visitors.

Protecting Others from the Spread of Communicable Illness and Infection - Patients should not permit family or friends to visit if they are sick or if they have been exposed recently to a communicable disease such as TB, chicken pox, influenza, etc. Visitors should be asked to wash their hands before visiting. Patients are also encouraged to wash their hands frequently.

Information and Participation in Decision Making - All patients have the responsibility to provide complete and accurate information with respect to their medical history, all medication use, present complaint, and any other health-related issues that may have an effect on their course of treatment. They are expected to become partners in the development and implementation of their plan of care.

Patients are responsible for reporting unexpected changes in their condition and perceived risks in their care to the appropriate practitioner. They should notify the health care provider if they have concerns about their ability to follow the treatment plan so the hospital or clinic can make every effort to adapt to the patient's specific needs and limitations. Where such adaptations are not recommended, the patient and family should understand the consequences of failing to follow the recommended course of treatment, or of using other treatments.

All patients have the responsibility to ask questions when they do not understand what they have been told or what they are expected to do. If a patient or family refuses treatment or fails to follow instructions, they are responsible for the consequences of that decision.

Pain Management - Patients have the responsibility to participate in their pain management. This includes information about pain and pain relief measures, staff committed to effective pain prevention, a quick response to reports of pain and state-of-the-art pain management. Patients should ask for pain relief when pain first begins, and tell the doctor or nurse if the pain is not relieved.

Smoking Policy - Because of health risks to you and others from second-hand smoke, patients and their visitors are not permitted to smoke on Cascade Valley Arlington Surgery Center property.

Meeting Financial Obligations - Patients are responsible for promptly meeting any financial obligations for care, treatment and services provided by the hospital and clinics. Cascade Valley Arlington Surgery Center has financial counselors available to assist patients in meeting these obligations.