

DEACONESS HOSPITAL – SPOKANE, WA					
Policy/Procedure Title	Americans with Disabilities Act Non-Discrimination Policy Procedure for Complaints	Manual Location	Administration Manual P & P Intranet-Administration		
Policy #	2.0010	<i>Original</i>	10/1993	Pages	Page 1 of 1
		<i>Current</i>	6/2012		
Department Generating Policy	Human Resources				
Affected Departments	Hospital Wide				
Author (if applicable)		<i>Dept/Title</i>			
Dept / Committee Review		<i>Date/Title</i>	4/94, 11/95		
Dept / Committee Revision	HIM Director	<i>Date/Title</i>	7/97, 2/00, 10/02, 11/05, 6/12		
Executive Approval		<i>Date/Title</i>			

POLICY: It is the policy of Deaconess Hospital that no person shall be subjected to discrimination based on ethnicity, culture, language, social economic status, sex, sexual orientation, and gender identity, age, religion, creed, marital status, disabled veteran status, Vietnam Era veteran status, or the presence or perceived presence of any physical, mental, or sensory handicap.

Deaconess Hospital has established a complaint procedure for persons wishing to file a complaint alleging discrimination on the basis of employment, programs, services and benefits offered within Deaconess.

PROCEDURE:

1. The complaint must be submitted in a form, i.e., letter or audio cassette that is accessible to the complainant and must be submitted within 30 days of the alleged discrimination/violation.
2. All discrimination complaints must be submitted to: Director of Human Resources, Deaconess Hospital. Located at W. 800 – 5th, Spokane, WA 99204, (509) 473-7110.
3. All discrimination complaints must state the type of discrimination, situation, the name of any person(s) involved, date it occurred, complainant's name, signature, address and telephone number.
4. A meeting may be requested by either complainant or the Director of Human Resources. Request for this meeting by either party must be within ten (10) working days of receipt of complaint.
5. If a meeting is not held or if either party requests, an investigation will be conducted to thoroughly review the complaint. The Director of Human Resources will evaluate all available information and submit a report to the Chief Executive Officer (CEO) within thirty (30) working days of receipt of complaint.
6. The CEO will review the report. A fair and prompt determination will be made based on fact finding.

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Policy/Procedure Title	Patient Rights and Responsibilities Policy	Manual Location	Housewide Nursing Manual P & P Intranet - MSCC		
Policy #	2.0100	Original	6/1997	Pages	Page 1 of 6
		Current	2/2014		

Department Generating Policy	Administration / Ethics Committee				
Affected Departments	All Nursing Care Units				
Author (if applicable)		Dept/Title			
Dept / Committee Review	Terri McDaniel	Date/Title	1/2014 / HIM Director		
Dept / Committee Revision		Date/Title			
Executive Approval	Patti Bennett	Date/Title	1/2014 / CNO		
	Kay Lewis		2/2014 / CQO		
Medical Staff Approval		Date/Title			

On behalf of the patients of Deaconess Hospital and their families, we have established the following as rights and responsibilities of the patient. The medical center presents these rights and responsibilities in the **Patient Information Guide** with the expectation that they will contribute to the well-being and healing process of the patient. In addition, these guidelines are relevant for the patient facing end of life.

PATIENT RIGHTS

Access to Care

Deaconess Hospital does not discriminate based on ethnicity, culture, language, physical or mental disabilities, social economic status, sex, sexual orientation, gender identity, age, religion or source of payment. The patient has the right to access treatment. This includes the patient's right to select his/her own physician.

Right to Treatment

The patient has the right to access care as long as that care is within the Hospital's capacity, mission, and policies. The patient has the right to be involved in post-discharge decisions and to be told of any services in which the Hospital has an interest, including educational institutions, home health agencies or insurers. When the Hospital cannot provide the care a patient needs, the staff will inform the patient of other choices for care. If it is necessary and medically advisable, the Hospital may transfer the patient to another facility as long as the transfer is accepted by the receiving facility.

Respectful Care

The patient has the right to considerate and respectful care that is consistent with his/her personal values and beliefs to the extent that they can be accommodated within the mission, vision, values and policies of this hospital.

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Informed Consents/Decision Making

The patient has the right to make informed decisions regarding medical care without undue influence and to expect from physicians disclosure of medical findings, alternative treatments and associated risks and benefits. The patient has the right to receive from his/her physician the information necessary to give informed consent prior to the start of any procedure or treatment. Except in emergencies, such information should include, but not necessarily be limited to, the specific procedure or treatment, the medically significant risks involved and the probable duration of incapacitation. Patients, and when appropriate, their families, are informed about the outcomes of care, including unanticipated outcomes.

Research

The patient has the right to consent or refuse to participate in proposed research studies or clinical trials affecting care and treatment and to have those studies fully explained prior to consent. Any refusal to participate will not compromise a patient's access to other Hospital services.

Advanced Medical Directives

The patient has the right to make an Advance Medical Directive (such as a living will for health care, health care proxy or durable power of attorney for health care) concerning treatment to designate a surrogate decision-maker within legal parameters.

Ethical Concerns/Care at the End of Life

There are times when ethical questions about medical care and treatment options pose dilemmas for patients, families, physician and staff. Ethical issues that could arise in the course of care include conflict resolution, withholding resuscitative services, foregoing or withdrawing of life- sustaining treatment. Deaconess Hospital has established an Ethics Committee to provide consults/advice upon request regarding issues mentioned above.

Ethics Committee

A multidisciplinary group of physicians, chaplains, hospital staff and community members are available for consultation. Patients and families may access the Committee by calling 473-7156 or by dialing "0" for Operator and asking for the Administrative Supervisor.

Notice of Privacy Practices

The patient has a right to our Notice of Privacy Practices that explains how we may use and disclose health information. It also discusses the patient's health information rights and provides contact information to communicate questions or concerns.

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Treatment Privacy

The patient has the right to every consideration of privacy and may exclude family members from his/her health care decisions. Care discussions, consultations, examinations and treatments shall be conducted in a way to respect each patient's privacy.

Personal Privacy

The patient has the right to wear his/her own clothing, to manage his/her own personal finances, to receive and send mail unopened, and to associate with persons of his/her own choice as appropriate to the patient's medical condition.

Confidentiality

The patient has the right to confidentiality of all communications and records about his/her care. The patient has the right to be informed of the hospital's confidentiality practices as required by law. Medical records and all other information will be kept confidential unless disclosure is required by law, written consent, or allowed within the limits of the law.

Communication

The patient has the right to be informed of any restrictions of communications, (i.e., phones, visitors, etc.) Restrictions will be determined with the patient's participation. Hearing, speech-impaired patients and patients that require interpreters have the right to effective communication assistance. We also provide immediate interpreter services via a specialized telephone service.

Participation in Care Planning

The patient has the right to:

- Make informed decisions regarding his/her care
- Be told of his/her health status
- Be a part of care planning and treatment
- Decide if family members will participate in his/her care
- Be involved in ethical questions that arise regarding his/her care and to refuse treatment, including withholding resuscitative services and foregoing or withdrawal of life-sustaining treatment to the extent permitted by law
- Choose a decision-maker in the event that the patient is incapable of understanding a proposed treatment or procedure or is unable to communicate his/her wishes regarding care
- Obtain the form Physician Order for Life-sustaining Treatment (POLST) that will outline end-of-life directions
- Donate organs and other tissue (RCW 68.50.500 and 68.50.560)

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Managing Pain Effectively

The patient has the right to be involved in pain management decisions and to receive aggressive and appropriate pain management when indicated. As a patient, you can expect information about pain and pain relief measures. The pain management should optimize the comfort of the patient throughout his/her treatment.

Protective Services

The patient has the right to be free from all forms of abuse or harassment. The patient has a right to protective services, especially when evidence of neglect, abuse, exploitation or hazardous living conditions is found and appropriate intervention is taken.

Restraints

The patient has the right to be free from restraints of any form that are not medically necessary. They are not used as a means of coercion, discipline, convenience or retaliation by staff.

Secure Environment

The patient has the right to a safe environment. This includes reasonable measures for the management of infection, emergency preparedness, safe medical equipment, facility security and reasonable care to promote a safe and violence-free environment.

Transfers

The patient has the right to expect that the hospital will provide health services within the standard of care. Treatment, referral or transfer may be recommended. If transfer is recommended or requested, the patient will be informed of risks, benefits and alternatives. The patient will not be transferred to another institution unless that institution agrees to accept the patient.

Discharge Planning

The patient or his/her designated representative has the right to be told of realistic care alternatives when hospital care is no longer appropriate.

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Billing Explanation

The patient has the right:

1. To be informed of services and related charges available in or through the facility,
2. To receive an itemized bill, regardless of source of payment, and
3. To a detailed billing explanation. The patient may question charges associated with procedures and with billing and will be advised of the availability of financial assistance if appropriate.

Complaints and Grievances

The patient has the right to be informed of available resources for resolving disputes, grievances and conflicts within the institution.

To help ensure that your stay with us is as pleasant and comfortable as possible, we want to hear about any concerns or complaints you may have. Please let us know how we can better serve you by following these simple steps:

- First, share your concerns with your nurse or his/her immediate supervisor. Hopefully we can resolve the problem at that time.
- If you are not satisfied with the outcome, please call our patient care administrator at ext. 7156. If there is no answer or it is after 5 p.m., please press "0" and ask the operator to page the administrative supervisor.
- We will address your concern in a timely manner and attempt to resolve your concern efficiently. If you are not satisfied, you may submit a grievance in writing that will be referred to Risk Management. You may also submit your grievance directly with a state agency. For instance, in filing a grievance or for State agency numbers, please contact Washington State Department of Health; toll free at 1-800-633-6828 or Medicare patients may call Qualis (Washington/Idaho) 1-800-445-6941.

PATIENT RESPONSIBILITIES

Health care delivery is enhanced by the involvement of the patient as appropriate to his/her condition as a partner in the health care process. In addition, the health care providers are entitled to reasonable and responsible behaviors on the part of patients and their families.

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Patient Responsibilities include at least the following:

- Providing information. The patient is responsible for providing, to the best of his or her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his or her health. The patient and family are responsible for reporting perceived risks in their care and unexpected changes in the patient's condition. The patient and family help the organization improve its understanding of the patient's environment by providing feedback about service needs and expectations.
- Participation in Health Care Decisions. The patient has the responsibility to participate in decisions about his/her health care and to participate in the development and implementation of their plan of care. Patients are also responsible for asking questions when you do not understand what you have been told about your care or what you are expected to do.
- Following instructions. The patient and family are responsible for following the care, service, or treatment plan developed. They should express any concerns they have about their ability to follow and comply with the proposed care plan or course of treatment. Effort is made to adapt the plan to the patient's specific needs and limitations. When such adaptations to the treatment plan are not recommended, the patient and family are responsible for understanding the consequences of the treatment alternatives and not following the proposed course.
- Accepting Consequences. The patient and family are responsible for the outcomes if they do not follow the care, service, or treatment plan.
- Showing Respect and Consideration. Patients are responsible for being considerate of other patients, helping to control noise and disturbances and following smoking policies. Patients are also responsible for being considerate of the organizations rules concerning patient care including respect for personnel and property.
- Meeting Financial Commitments. The patient and family are responsible for promptly meeting any financial obligation agreed to with the organization.

Orig: 6/97

APPROVED: Ethics Committee

REVIEWED: Administration 3/00; Executive Committee 2/00; Governing Board 3/00

REVISED: Ethics Committee, 5/02, 4/03, 6/05; HIM Director 6/12, 1/14; CNO 1/14, CQO 2/14