POLICY:

Willapa Harbor Hospital will not deny admission to any patient due to race, color, religion, age, disability, national origin, sexual orientation or ability to pay or source of payment.

Patients admitted to the hospital will go through the admission process that is coordinated by the Admitting Department.

The Admitting Department is staffed 24 hours a day, seven days a week.

Admission takes place in the general Admitting Department area.

The Admitting Department Clerk will admit each patient in a professional, empathetic and time efficient manner.

PROCEDURE:

The following procedure is intended for those patients whose medical condition allows time for normal processing:

The patient's physician will notify the Nurse or Ward Clerk of the admission of the Observation or Inpatient.

Nurse or Ward Clerk will notify Admitting Department of Patient name, Patient type, attending physician, room number and admitting diagnosis.

If the patient is in acute distress or if any delay in transporting him/her to the patient care unit would be hazardous, have him/her transported to the assigned patient care unit immediately or the Emergency Department if the bed is not ready. The admissions process will then be completed in the patient's room when it is appropriate or by a family member in the Admitting Department.

The Admitting Department Clerk will:

Introduce herself to the patient.

If patient is an Emergency Room admit, get name and DOB, put patient in Triage and inform Nurse of the Triage.

If patient is having Chest Pain, bleeding profusely, or shortness of breath, take directly back to the Emergency Room.

Advise the patient that information will need to be obtained to produce the patient's hospital record.

Enter the patient's demographic and insurance information, the admitting physician and the diagnosis completely and accurately in the computer system.

If the patient's demographic and insurance information is present in the computer system, verify all information and update if needed. Follow the appropriate form on the computer screen.

Add any notes in note entry if applicable.

Obtain employment information.

Obtain the patient's insurance information and the patient spouse's insurance if applicable. Obtain Photo identification, scan insurance information, Photo ID and any other information applicable.
Enter any other information requested on the computer screen.

Follow each insurance carrier's policies and procedures, Medicare, Medicaid or Worker's Compensation as it applies to the patient.

If patient has Medicare or a Medicare HMO and patient is being admitted as an Inpatient, print 2 copies of the Important Message from Medicare and make sure patient or family member signs and receives copy.

If the patient becomes agitated answering the interview questions, try to explain that the information is for his/her benefit as well as the hospital's and it will avoid inaccurate billing for the patient.

Review the Consent for Treatment with the patient.

Have the patient or patient's legal representative sign the Consent for Treatment. Legal guardians must produce legal documentation. A minor under the age of 18 must have a parent sign for treatment. There are exceptions to this. Please follow the state law.

Ask all patients 18 years or older if they have an advance directive. If they have one, put it in the patients chart.

The Admitting Clerk will give the patient a HIPPA Notice of Privacy Practice.

Reiterate to the patient than any valuable should be sent home with the family members.

The computer will generate the Admission face sheet and consent for Treatment.

If the patient is Medicare, make sure an MSP is completed.

The Admitting Clerk will print out a face sheet and stickers with a wristband to take to the nurses station.

The Admitting Clerk will take an Admission packet to the patients room and have the patient sign the appropriate paperwork. The Clerk will leave the packet and information with the patient.

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**Referenced Documents**

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Policy:

It is the policy of Willapa Harbor Hospital to identify conditions which require services not available to Willapa Harbor Hospital Patients and thus require transfer to another health care facility.

Procedure:

A. Patients presenting with the following conditions will be assessed, evaluated and stabilized in this Emergency Department then referred to another facility appropriate to the Patient’s condition for definitive treatment.
   1. Psychiatric conditions requiring In-Patient psychiatric treatment.
   2. Conditions requiring immediate surgery if the scope of surgery is beyond what the Staff Surgeon can perform under his allowed privileges and if the surgeon is unavailable.
   3. Neonates or pediatric Patients requiring extensive or intensive services which are not provided at Willapa Harbor Hospital.
   4. Conditions requiring immediate neurologic work-up or neurosurgery.
   5. Patients who are determined to be in a high risk pregnancy and/or less than 20 weeks gestation and are not in an imminent stage of labor.
   6. Patient with emergent spinal cord injuries.
   7. Woman in active labor less than 5cm cervical dilation.
   8. Patients requiring surgery when a surgeon and/or anesthetist are not available.
   9. Patients requiring a higher level of care that WHH is not able to provide safely.

After stabilizing treatment is rendered, the Physician will make appropriate arrangements with the receiving Physician. Nursing staff will make arrangement for bed placement and transportation. Documentation of the arrangements made will be noted on the Patient’s Emergency Room medical record.

The potential benefits and potential problems associated with transfer must be explained to the Patient or Patient’s guardian or next of kin and the COBRA Transfer Consent Form completed and signed. The original stays with the Patient’s ER record and a copy goes with the Patient. A report on the Patient’s status should be called to the receiving facility Nursing Staff by the Nurse caring for the Patient to facilitate continuity of care.

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POLICY:

It is the policy of Willapa Harbor Hospital to ensure that the patient has the right to considerate and respectful care.

MISSION STATEMENT
Willapa Harbor Hospital, in partnership with our physicians, provides state of the art, personalized diagnostic and medical treatment as well as health education to individuals who seek or need quality health care services.

Vision:
Working together for a healthier community

PROCEDURE:

YOUR HEALTH CARE TEAM
WHH’s health care team consists of physicians, nurses, other health care professionals, and students of the health sciences, all of whom provide needed diagnostic treatment and patient care services of the highest standards. Each patient has an attending physician who has primary responsibility for the patient’s medical care.

PATIENT RIGHTS

At WHH we are committed to respecting the rights of patients. We respect your role in making decisions about medical treatment and other aspects of your care.

Staff is committed to providing access to health care regardless of race, gender, sexual orientation, national origin, religion, or ability to pay for medical care. Staff is sensitive to patients’ cultural, linguistic, ethnic, and religious backgrounds, as well as to age and physical impairments.

We believe that we can best serve you by working together as a team to build trust among patients, their families and loved ones, doctors, nurses and other caregivers. WHH affirms the following patient rights for all adults, adolescents, children and infants, as well as for the parents or legal guardians of patients, who come to us for care.

- You have the right to considerate, respectful, and appropriate care.
- You have the right to obtain from caregivers complete, current, and clear information concerning diagnosis, treatment, and the probable course and outcome of a condition.
- You should have the opportunity to request and discuss additional information related to the proposed procedures and/or treatments.
- You should also be informed of the benefits, risks, and recovery time. (This right may be temporarily waived during a medical emergency when there is an urgent need for treatment and you are incapable of making such decisions.)
- You have the right to know the names of caregivers, particularly the physicians and nurses who are coordinating your care.
- You have the right to make decisions about your treatment before and during that care, and to give or withhold informed consent to any proposed medical procedure or treatment.
- You have 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 consequences of this decision.
- You have the right to receive an itemized explanation of the bill for the services rendered in the hospital.
- If you are an adult, which WHH policy defines as one who is at least 18 and has the capacity to make health care decisions, you have the right to make your wishes known about the extent of treatment you would desire if you became unable to communicate those wishes. This communication is called an advance directive.

Two commonly used advance directives are:

1. A health care directive (living will), in which you communicate orally or in writing the specific treatment desired if you later cannot communicate these wishes.
2. A durable power of attorney for health care, in which you designate another person to make decisions about your health care if you become unable to do so.

You have a right to expect WHH to honor the intent of the directive to the extent permitted by law and WHH policy.
• You have the right to privacy. WHH staff will make every effort to protect your privacy during case discussion, consultation, examination, and treatment.

• You have the right to expect that all communications and records relating to your care will be treated as confidential by WHH as required by law. You have the right to expect that WHH will emphasize the importance of confidentiality of patient information when it allows entitled parties to review your records.

• You have the right to have access to your medical records and to have this information explained as necessary, except when doing so is restricted by law.

• You have the right to expect that within its capacity, WHH will make a reasonable response to any patient request for services. WHH must provide evaluation, service, and/or referral as indicated by the urgency of the case.

• You may be transferred to an other facility when medically appropriate and legally permissible only after you are provided complete information about the need for and the risks, benefits, and alternatives to such a transfer. WHH must obtain approval from the other facility before you can be transferred.

• You have the right to expect reasonable continuity of care and to be informed by caregivers of available and realistic options when care at WHH is no longer appropriate.

• You have the right to be free from restraint and seclusion in any form when used as a means of coercion, discipline, convenience, or retaliation.

• You have the right to safety and freedom from all forms of abuse or harassment.

PATIENTS RESPONSIBILITIES

We believe you share in the responsibility for your own care.

• You have the responsibility to provide complete and accurate information (e.g., information about past illnesses, medications, advance directives, and other health-related matters). You should report any changes in your condition to those caring for you.

• You have the responsibility to participate in discussions and ask questions about your care.

• You are responsible for letting caregivers know whether you understand a proposed care plan and what is expected of you.

• You are responsible for following the treatment plan to which you agreed.

• You have the responsibility to be on time for scheduled appointments, or to notify WHH when you cannot.

• You are responsible for following WHH procedures regarding your care and conduct. You may not disturb other patients and may not disrupt or interfere with care provided to other patients and the operations of the hospital.

• You must respect the rights of others.

• You have the responsibility to let your caregivers know if you have concerns or complaints about any aspect of your care. You should report concerns to your doctor, nurse, or any other member of your health care team. At WHH, everyone is your advocate.

GRIEVANCE PROCESS

Patients, families or visitors have the right to express complaints or concerns about any aspect of their care or experience at WHH.

Complaints or concerns may be made to any staff member or by contacting the Risk Manager at 360-875-4513.

You may also call the State Department of Health Hot Line at 1-800-633-6828.

Please be assured that expressing a complaint or concern will not compromise your care at WHH.

ORGAN DONATION

Organ donation programs let you give someone else the opportunity for a better life. State law lets you make the decision about being an organ donor while you are still living, and permits caregivers to ask your family for permission to donate your organs after death. One way to make known you desire to be an organ donor is when you renew your Washington state driver’s license. You may also do this in a Durable Power of Attorney for Health Care or in a Living Will.

Notice to Patients

Physicians may not be in the hospital 24 hours per day, seven days per week. However, when physicians are not in the hospital, we do have physicians on-call and available to respond to any medical emergencies within a short period of time. If a medical emergency occurs while physicians are not in the hospital, well trained registered nurses and other healthcare professionals are always available in the hospital and can provide immediate medical attention to anyone in need.
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