PATIENT'S BILL OF RIGHTS

1. Patients have the right to considerate and respectful care.

2. Patients have the right to be treated with dignity.

3. Patients have the right to obtain from their physician complete current information concerning their diagnosis, treatment, and prognosis in terms that patients can be reasonably expected to understand. When it is not medically advisable to give such information to patients, the information should be made available to an appropriate person in their behalf. Patients have the right to know, by name, the physician responsible for coordinating their care. Patients have the right to know and identify and professional status of all healthcare workers.

4. Patients have the right to receive from their physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include but not necessarily be limited to the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when patients request information concerning medical alternatives, patients have the right to know the name of the person responsible for procedures and/or treatment.

5. Patients have the right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of their action.

6. Patients have the right to expect information about pain and pain relief measures.

7. Patients have the right to every consideration of their privacy concerning their own medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discretely. Those not directly involved in their care must have the permission of patients to be present.

8. Patients have the right to expect that all communications and records pertaining to their care should be treated as confidential.

9. Patients have the right to expect that within its capacity, a hospital must make reasonable response to the request of patients for services. The hospital must provide evaluation, service and/or referral as indicated by the urgency of the case. When medically permissible, patients may be transferred to another facility only after they have received complete information and explanation concerning the need for and alternatives to such a transfer. The institution to which patients are to be transferred must first have accepted such patients for transfer.

10. Patients have the right to access information contained in his or her clinical records within a reasonable amount of time. A patient, his or her authorized representative or attorney, is entitled to examine medical records while still an inpatient and/or following discharge, free of charge, provided that they submit the proper authorization to do so, i.e., a written request, using the hospital approved HIPAA Authorization form.

11. Patients have the right to obtain information as to any relationship of their hospital to other health care and educational institutions insofar as their care is concerned. Patients have the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating them.

12. Patients have the right to be advised if the hospital proposes to engage in or perform human experimentation affecting their care or treatment. Patients have the right to refuse to participate in such research projects.

13. Patients have the right to expect reasonable continuity of care. They have the right to know, in advance, what appointment times and physicians are available and where. Patients have the right to expect that the hospital will provide a mechanism whereby they are informed by their physician or his/her designee of their continuing health care requirements following discharge.

Recipient of Materials See Reverse side of Form
14. Patients have the right to examine and receive an explanation of their bill, regardless of source of payment.

15. All patients with the same health status and diagnosis have the right to a comparable level of care.

16. Patients have the right to know what hospital rules and regulations apply to their conduct as patients.

17. Patients have the right to be free from any device that restricts movement and isolation of any form when used as a means of coercion, discipline, convenience for staff or retaliation. Restraints or seclusion may be initiated by your caregiver to support patient safety measures.

18. Patients are given the Hospital’s policy regarding Patients’ Self-Determination Act:

   - Patients have the right to participate in their care and to discuss the course of their medical/surgical care with their attending physician.
   - Patients have the right to accept in full or part, or to reject, treatment offered to them.
   - Patients have the right to formulate Advance Directive
   - Patients will be provided information regarding their illness, injury or disease by their attending physician.
   - Patients who are terminally ill have the right to refuse all medical treatment. However, their physician has the responsibility to offer them comfort measures.
   - Patients have the right to appoint a competent person to make health care decisions for them, if they become incompetent.

19. Patients have the right to participate in discussions of ethical issues regarding their care.

20. Patients have the right to access protective services.

21. Patients have the right to express concerns about their care without recrimination; therefore, it is the policy of The Charlotte Hungerford Hospital to receive and respond to patient and/or family/caregiver complaints. Such issues may be directed to the Patient Relations Director, or Team Leader of any given unit or to the Corporate Compliance Officer or the Privacy Officer. If the patient or patient’s healthcare representatives are not satisfied with the resolution of the complaints through this process, they may appeal in writing directly to the President and Chief Operating Officer of the hospital, at The Charlotte Hungerford Hospital, 540 Litchfield Street, PO Box 988, Torrington, Connecticut 06790. If the patient or the patient’s healthcare representative feels their issues have not been adequately addressed at this level, they may appeal in writing to the Connecticut State Department of Health, 410 Capitol Avenue, Post Office Box 340308, Hartford, CT 06134-0308, Telephone number: 1-800-842-9940 or TTY: 1-860-509-7191. Joint Commission on Accreditation of Healthcare Organizations by going to their website: www.jointcommission.org; through e-mail: complaint@jointcommission.org by writing to: Office of Quality Monitoring, Joint Commission on Accreditation of Healthcare Organizations, One Renaissance Boulevard, Oakbrook Terrace, IL 60181 or by calling 1-800-994-6610. Medicare patients may also contact Qualidigm (the State Peer Review Organization) at 860-632-2008 if you need to file an appeal around your care.

22. Autopsies: The deceased patient’s authorized representative has the right to request that an autopsy be attended by, or performed by, a physician who is not affiliated with The Charlotte Hungerford Hospital. The person authorized to give consent will assume all responsibility for location of an independent viewer and/or alternate autopsy site within 48 hours of the patient’s death. The person authorized to give consent will be provided with a copy of the Hospital’s " Patients’ Rights and Responsibility".

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