

Sibley Memorial Hospital

Patient Rights and Responsibilities

To promote patient safety, we encourage you to speak openly with your health care team, be well informed, and take part in care decisions and treatment choices. Join us as active members of your health care team by reviewing the rights and responsibilities listed below for patients and patient representatives.

You or your designee have the right to:

Respectful and Safe Care

- 1 Be given considerate, respectful and compassionate care.
- 2 Have a family member/friend and your doctor notified when you are admitted, transferred or discharged from the hospital or emergency department.
- 3 Be given care in a safe environment, free from abuse and neglect (verbal, mental, physical or sexual).
- 4 Have a medical screening exam and be provided stabilizing treatment for emergency medical conditions and labor.
- 5 Be free from restraints and seclusion unless needed for safety.
- 6 Know the names and jobs of the people who care for you.
- 7 Know when students, residents or other trainees are involved in your care.
- 8 Have your culture and personal values, beliefs and wishes respected.
- 9 Have access to spiritual services.
- 10 Have conversations with the Ethics Service about issues related to your care.
- 11 Be treated without discrimination based on race, color, national origin, age, gender, sexual orientation, gender identity or expression, physical or mental disability, religion, ethnicity, language or ability to pay.
- 12 Be given a list of protective and advocacy services, when needed. These services help certain patients (e.g., children, elderly, disabled) exercise their rights and protect them from abuse and neglect.
- 13 Ask for an estimate of hospital charges before care is provided.

Effective Communication and Participation in Your Care

- 14 Get information in a way you prefer and clearly understand (examples: sign language, vision assistance, language interpretation). These services will be provided free of charge.
- 15 Get information from your doctor/provider about:
 - your diagnosis
 - your test results
 - outcomes of care
 - unanticipated outcomes of care

- 16 Be involved in your plan of care and discharge plan or request a discharge plan evaluation at any time.
- 17 Involve your family in decisions about care.
- 18 Ask questions and get a timely response to your questions or requests.
- 19 Have your pain managed.
- 20 Refuse care.
- 21 Have someone with you for emotional support, unless that person interferes with your or others' rights, safety or health.
- 22 Ask for and be provided a chaperone during exams, tests or procedures.
- 23 Choose your support person and visitors and change your mind about who may visit.
- 24 Select someone to make health care decisions for you if at some point you are unable to make those decisions (and have all patient rights apply to that person).

End of Life Decisions

- 25 Create or change an advance directive (also known as a living will or durable power of attorney for health care).
- 26 Have your organ donation wishes known and honored, if possible.

Informed Consent

- 27 Give permission (informed consent) before any non-emergency care is provided, including:
 - risks and benefits of your treatment
 - alternatives to that treatment
 - risks and benefits of those alternatives
- 28 Agree or refuse to be part of a research study without affecting your care.
- 29 Agree or refuse to allow any types of pictures, videos, or voice recordings for any other reason than your personal care.

Privacy and Confidentiality

- 30 Have privacy and confidential treatment and communication about your care.
- 31 Be given a copy of the HIPAA Notice of Privacy Practices.



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Complaints and Grievances

- 32 Complain and have your complaint reviewed without affecting your care. If you have a problem or complaint, you may talk to your doctor, nurse manager or a department manager.
- 33 You may also contact patient relations at ext. 4267 between 7:30 a.m. and 4:30 p.m. After 4:30 p.m. or on weekends and holidays, you may reach the patient care services coordinator through the page operator at ext. 4111.
- 34 If your issue is not resolved to your satisfaction, other external groups you may contact include:
 - **Hospital's Quality Improvement Organization (QIO) for coverage decisions or to appeal a premature discharge:**
Livanta/BFCC-QIO
6830 W. Oquendo Rd., Ste 202
Las Vegas, NV 89118
Phone: (888) 396-4646
 - **State Agency:**
Washington D.C. Department of Health
899 North Capitol Street, NE
Washington DC 20002
202-442-5955
 - **Accreditation Agency:**
The Joint Commission Office of Quality and Patient Safety
One Renaissance Blvd.
Oakbrook Terrace, IL 60181
https://www.jointcommission.org/report_a_complaint.aspx
 - **To address discrimination concerns, you may also file a civil rights complaint with the U.S. Department of Health and Human Services:**
Office for Civil Rights
200 Independence Ave., SW
Room 509F, HHH Building
Washington, DC 20201
1-800-368-1019, 1-800-537-7697 (TDD)
OCRA@hhs.gov
Complaint forms are available at:
<http://www.hhs.gov/ocr/office/file/index.html>

You have the responsibility to:

- 1 Provide accurate and complete information about your health, address, telephone number, date of birth, insurance carrier and employer.
- 2 Call if you cannot keep your appointment.
- 3 Be respectful of your hospital team, from the doctors, nurses and technicians to the people who deliver your meals and the cleaning crews.
- 4 Be considerate in language and conduct of other people and property, including being mindful of noise levels, privacy and number of visitors.
- 5 Be in control of your behavior if feeling angry.
- 6 Give us a copy of your advance directive.
- 7 Ask questions if there is anything you do not understand.
- 8 Report unexpected changes in your health.
- 9 Follow hospital rules.
- 10 Take responsibility for the consequences of refusing care or not following instructions.
- 11 Leave valuables at home.
- 12 Keep all information about hospital staff or other patients private.
- 13 Do not take pictures, videos or recordings without permission from hospital staff.
- 14 Pay your bills or work with us to find funding to meet your financial obligations.

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