

Patient Rights & Responsibilities

THE BASIC RIGHTS of all patients within the Huntsville Hospital Health System are:

1. Care shall be provided impartially without regard to age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, creed, sexual orientation, national origin, gender identity or expression or source of payment.
2. Patients are entitled to considerate, respectful and dignified care at all times.
3. Patients have the right to receive care in a safe setting.
4. Patients are entitled to personal and informational privacy as required by law. This includes the right to:
 - a. Refuse to see or talk with anyone not officially affiliated with the hospital or involved directly with their care;
 - b. Wear appropriate personal clothing, religious or other symbolic items that do not interfere with prescribed treatment or procedures;
 - c. Examination in reasonably private surrounding, including the right to request a person of one's own gender present during certain physical examinations;
 - d. Have one's medical records read and discussed discreetly;
 - e. Confidentiality regarding one's individual care and/or payment sources;
 - f. Data Privacy Rights as described in the *Notice of Privacy Practices*.
5. Patients and/or patient's legally designated representatives have the right of access to information contained in the patient's medical record, within the limits of the law and in accordance with hospital policies.
6. Patients of the Health System have the right to know the identity and professional status of all persons participating in their care.
7. Patients are entitled to know the status of their condition including diagnosis, recommended treatment and prognosis for recovery.
8. Patients have a right to share in decisions about their health care to the extent permitted bylaw, including the acceptance or refusal of medical care, treatment or services. Patients have the right to be told what to expect from their treatment, its risks and benefits, other choices they may have, and to be informed of what may happen if they refuse. Information will be provided in a way that is tailored to the patient's age, language and in a manner they can understand.
9. Patients have the right to be free from physical restraints which are not medically indicated or necessary.
10. Patients have the right to be involved in making decisions about their care, treatment and services, including the right to have the patient's family and physician promptly notified of their admission to or discharge or transfer from the hospital.
11. Patients have the right to be informed, prior to the notification occurring, of any process to automatically notify the patient's established primary care practitioner, primary practice group/entity or any other group/entity, as well as all post-acute care service providers. The Health System has a process for documenting the patient's refusal to permit notifications of registration to the emergency department (ED), admission to the hospital, or the discharge or transfer from an ED or hospital. Notifications with primary care practitioners and entities are in accordance with all applicable federal and state laws and regulations.
12. Patients are entitled to formulate advance directives or power of attorney and appoint a surrogate decision maker to make health care decisions on their behalf to the extent permitted by law when a patient is unable to make decisions about their care.
 - a. When a surrogate decision maker is responsible for making care, treatment and services decisions, the Health System will respect the surrogate decision maker's right to refuse care, treatment and services on the patient's behalf.
 - b. The Health System will involve the patient's family in care, treatment, and services decisions to the extent permitted by the patient or surrogate decision maker.
 - c. The Health System will provide the patient or surrogate decision maker with the information about the outcomes of care, treatment and services that the patient needs in order to participate in current and future health care decisions.
 - d. Patient or surrogate decision maker will be informed about unanticipated outcomes of care, treatment and services that relate to sentinel events.
 - e. Advance Directives in Outpatient facilities: Outpatient departments of the hospital will initiate cardiopulmonary resuscitation (CPR) for patients within the department in the event of a cardiac and/or respiratory arrest. The organization will communicate our policy on outpatient Advance Directives upon request and when they are a patient in the Emergency Department, Same Day surgery, patient's in Observation status and in areas that the patient will be incapacitated.
13. Patients are entitled to receive an itemized, detailed explanation of charges related to services rendered on their behalf by the Health System.
14. Patients will not be transferred to another facility or location without explanation of the necessity for such action.
15. A patient's guardian, next of kin or legally authorized responsible person may exercise, to the extent permitted by law, the rights delineated on behalf of the patient if the patient has been judged incompetent in accordance with the law, or is found by their physician to be medically incapable of understanding the proposed treatment or procedure, or is unable to communicate their wishes regarding treatment, or is a minor.
16. Patients have the right to appropriate assessment and management of pain.
17. Patients have the right, subject to the patient's consent, to receive visitors whom they designate, including, but not limited to, a spouse, domestic partner (including same-sex domestic partner), another family member, or a friend. Patients have the right to withdraw or deny any such consent at any time.
18. Patients have a right to meet with the Ethics Committee, Chaplain or Patient Advocate to discuss any ethical issues and policies. The patient's rights to religious and other spiritual services will be respected.
19. Patients have the right to free language interpreting and translation services which may include hospital- employed or contract interpreting services or trained bilingual staff and may be provided in person, via telephone or video. The Health System provides information to patients who have vision, speech, hearing or cognitive impairments in a manner that meets the patient's needs.
20. Patients have a right to a service animal, as defined by the American with Disabilities Act (ADA), which has been trained to do work or perform a task for people with disabilities. Service animals may be restricted from certain sterile areas within the facility, such as operating rooms or intensive care units, due to infection control concerns or safety concerns.
21. Patients have a right to leave the hospital (as far as the law allows) even if advised against it. The Health System will not be responsible for any medical issues that may result.
22. Patients have a right to have their complaints handled fairly. Care will not be affected as a result of sharing any complaints with us. See below for process.
23. The Health System will never ask a patient to waive their privacy rights as a condition of treatment.

PATIENTS ARE RESPONSIBLE for:

1. Providing the Health System and its practitioners with complete and accurate information regarding present and past illnesses and operations, hospitalizations, medications, insurance and other health-related issues, including any unanticipated changes in their condition.
2. Following recommended treatment plans prescribed and/or administered by their primary practitioner or those assisting them, including keeping appointments relative to their care.
3. Asking questions they may have about their treatment and what they need to do to take care of themselves. Patients should inform Health System clinicians if they are concerned or notice any changes in their condition.
4. Ensuring prompt and complete payment of their hospital bills.
5. Following hospital rules and regulations relative to patient care and conduct. This includes consideration and respect for the rights and property of other patients and hospital personnel, no smoking policy, as well as responsibility for the actions of their visitors and guests.
6. Providing any living will, power of attorney, or donor forms they may have.
7. Contacting the Health System Compliance and Privacy Department if they are concerned about their privacy.
8. Assuming responsibility for the consequences of their actions, if the patient refuses prescribed treatments or does not follow their practitioner's instructions.

PATIENT QUESTIONS OR CONCERNS:

Our goal is that you have an excellent experience during your stay at this Health System location. If at any time you have a question or concern, you may submit a verbal complaint following these steps:

1. Press the call button and ask to speak with your nurse.
2. Ask to speak to the Charge Nurse or Department Director on your nursing unit.
3. If your needs remain unmet, contact hospital Administration at (256) 997-2145 (or extension 2145 if calling inside the hospital).
4. After 6:00 p.m., and on weekends and holidays, please dial 0 and ask the operator to connect you to the House Supervisor.
5. You may also submit a formal written complaint to: DeKalb Regional Medical Center, Administration Office, 200 Medical Center Drive, Fort Payne, AL 35968

Excellence is our goal! To report concerns about patient safety and quality of care, you may submit your complaint to one of the agencies listed below:

Alabama Department of Public Health

The RSA Tower · 201 Monroe Street
Montgomery, AL 36104
(800) 356-9596

Centers for Medicare and Medicaid

Acentra Health (Formerly Kepro)
Quality Improvement Organization
(888) 317-0751

Joint Commission · Report concerns in any of the following ways:

1. At jointcommission.org
Using the "Report a Patient Safety Event" link on the home page of the website
2. By phone: (800) 994-6610
3. By mail:
The Office of Quality and Patient Safety, Joint Commission
One Renaissance Boulevard
Oakbrook Terrace, IL 60181