



## **Your Rights and Responsibilities as a Patient**

### **Patient Rights:**

**Franciscan Children's complies with state and federal patient's rights and regulations. The patient's rights of minors and incompetent patients are exercised through the parent/legal guardian, except patients under 18 years of age who are legally classified as emancipated minors.**

- The right to receive considerate, respectful and compassionate care in a safe setting regardless of your age, gender, race, national origin, religion, sexual orientation, gender identity or disabilities.
- The right of each patient to a reasonable response to his/her requests and needs for treatment or services within the hospital's capacity, its stated mission and applicable laws and regulations.
- The right of each patient to obtain a copy of any rules and regulations of the Hospital which apply to a person's conduct as a patient.
- The right of each patient to considerate and respectful care, including consideration of the psychosocial, spiritual and cultural values that influence the perception of illness.
- The right of each patient to privacy during medical care, within the Hospital's capacity to provide it, and to receive care in a safe setting, free from any form of abuse, neglect or harassment.
- The right of the patient to receive the name and specialty of any individual responsible for care or the coordination of care upon request.
- The right of each patient to obtain an explanation as to the relationship, if any, of the Hospital and its physicians to any other health care facility or educational institution insofar as the relationship relates to the patient's care or treatment.
- The right of each patient to refuse to be examined, observed or treated by students or other Hospital staff without jeopardizing the patient's access to medical care.
- The right of each patient to receive prompt lifesaving treatment in an emergency without discrimination on account of economic status or source of payment and without delaying treatment for purposes of determining insurance information, unless such delay can be imposed without material risk to the patient's health.
- The right of each patient to the confidentiality of his or her medical information. The patient or the patient's legal representative will have access to the information contained within his or her medical record within the limits of the law.
- The right of each patient to refuse removal of clothing.
- The right of the patient to refuse to serve as a research subject, and to refuse any care or examination when the primary goal is educational or informational rather than therapeutic. No patient will participate as a research subject without his or her written consent.
- The right of each patient to receive effective management of pain.
- The right of each patient, or patient's representative, in collaboration with his or her physician, to participate in the development and implementation of the care plan, inpatient and outpatient, and including as applicable a discharge plan and pain management plan, and to make health care decisions to the extent permitted by law.

- The right of each patient to obtain information necessary, such as diagnosis, possible prognosis, benefits and risks to enable the patient to make treatment decisions that reflects the patient's wishes.
- The right of each patient to know in advance who will perform each treatment or procedure and to request another physician or health care provider for treatment or consultation.
- The right of the patient (or the patient-designated representative) to participate in the consideration of ethical issues that arise in the care of the patient.
- The right of the patient to formulate advanced directives and to appoint a surrogate or health care agent (proxy) to make health care decisions in the event that the patient becomes unable to do so.
- The provision of care is not conditioned on the existence of an advance directive.
- The right of the patient to accept or refuse treatment to the extent permitted by law and to be informed of the consequences of such refusal.
- The right of each patient to request and receive any information the Hospital has available relative to financial assistance and eligibility for free hospital care.
- The right for each patient to receive upon request an itemized bill or other statement of charges submitted to any third party by the Hospital, and to have a copy of the itemized bill or statement sent to your attending physician.
- The right of all patients and their families requiring language interpretation or translation, and those requiring assistance with listening devices or those with other special needs, to receive such services and materials in a timely manner at no additional cost to the patient.
- The right to be free from restraints or seclusion in any form that is not medically necessary.
- The right to have someone of your choice remain with you for emotional support during your hospital stay or outpatient visit, unless your visitor's presence compromise your or other's rights, safety or health. You have the right to deny visitation at any time.
- The right of the patient to have a family member or representative of his/her choice and his/her own private physician notified promptly of his/her admission to the hospital.
- The right to voice your concerns about the care you receive. If you have a problem or complaint, you may talk to your doctor, nurse manager or a department manager. You may also contact the Patient Advocate. You have the right to be informed of the process around complaint resolution.
- You have the right to give or refuse consent for recordings, photographs, films, or other images to be produced or used for internal or external purposes other than identification, diagnosis, or treatment. You have the right to withdraw consent up until a reasonable time before the item is used.

**Patient Responsibilities:**

- To provide, to the best of your knowledge, accurate and complete information about present symptoms, past illnesses, hospitalizations, medications, and other matters relating to your health.
- To report unexpected changes in your condition to those responsible for your care.
- To understand your health care. If you are unclear about either your condition or medical treatment, please ask your physician or other staff member to discuss them with you.
- To follow the treatment plan recommended by the practitioner primarily responsible for your care.
- To accept full responsibility for your decision and your health care if you refuse treatment.

- To pay your Hospital bill promptly and to supply us with necessary health insurance information.
- To follow the Hospital's rules and regulations affecting patient care and conduct, including the "smoking" policy.
- To be considerate of the rights of other patients and the Hospital personnel by assisting in the control of the noise and the number of your visitors and allowing your roommates and other patients privacy and quiet.
- To respect the property of others and of the Hospital.
- To respect the individuality of others including racial, ethnic and cultural differences.
- To report your pain and to discuss with the doctors/nurses any concerns you may have about pain.
- To take reasonable care of your own valuables and other possessions.

### **Health Care Proxy (agent)**

The Health Care Proxy (agent) is a simple legal document that allows you to name someone you know and trust to make health care decisions for you if, for any reason and at any time, you become unable to make or communicate those decisions. For more information or assistance in completing the Health Care Proxy form, call the Hospital's Patient Advocate or a member of Care Management.

### **Anatomical Donations**

State and Federal regulation require all acute care hospitals to offer patients and families the opportunity for organ and tissue donation.

### **Concerns**

You, your family, your significant other or your guardian have the right to tell us when something is wrong. This is called presenting a complaint. If you present a complaint, your care will not be affected in any way. If you have a problem that you cannot solve with your doctor, nurse or other caregiver, please call the Patient Advocate's Office. If you send a complaint by fax, e-mail or written letter, the Patient Advocate will acknowledge your communication within two business days.

The Patient Advocate will contact you, review your complaint, and make every effort to resolve your concerns at that time. The patient advocate will work with other members of the Hospital to review and resolve your complaint in a timely manner. Usually this is completed within seven days but if it is not resolved, the Patient Advocate will contact you directly to discuss current status of your complaint. A letter will be sent to you that will include the name of the hospital contact, steps taken for the review, results of the review, and the completion date.

**Amanda Voysey  
Patient Advocate  
Franciscan Children's  
617-254-3800 X7723**

In addition, you have the right to discuss your concerns with any of the following agencies:

Massachusetts Department of Public Health  
99 Chauncy Street, 2nd Floor  
Boston, MA 02111  
617-753-8000

Massachusetts Board of Registration in Medicine  
200 Harvard Mill Square, Suite 330  
Wakefield, MA 01880  
800-377-0550

The Joint Commission  
Office of Quality Monitoring  
One Renaissance Boulevard  
Oakbrook Terrace, IL 60181  
800-994-6610 or [complaint@jointcommission.org](mailto:complaint@jointcommission.org)

Massachusetts Department of Mental Health  
Clinical and Professional Services of Licensing  
25 Staniford Street  
Boston, MA 02114-2575  
617-626-8000

In addition, each Medicare beneficiary who is an inpatient will be provided a standardized notice, "An Important Message from Medicare" upon admission and within two days of discharge. This document should be reviewed, signed and dated by the Medicare beneficiary. As a Medicare recipient, you have the right to discuss any concerns around quality of care of services to the patient representative. Additionally, if you are not satisfied, you have the right to contact the Medicare Quality Improvement Organization: Livanta (866)-815-5440, TTY: 1-866-868-2289