

Patient Bill of Rights and Responsibilities

Summit Healthcare Association supports the following Patient Bill of Rights and Responsibilities.

YOU HAVE THE RIGHT TO:

Protection from Discrimination

- You can expect to receive healthcare services and information that is free from discrimination regardless of your national origin, race, religion, color, age, marital status, diagnosis, disability, or sex including pregnancy, gender identity or sex stereotyping. We will make every effort to accommodate your preferences.
- You can expect considerate care that respects your unique cultural needs and individual beliefs.
- We will take reasonable steps to make healthcare services and information equally available to all individuals, including the provision of auxiliary aids and services for those with disabilities.
- We will take reasonable steps to provide language assistance to individuals with limited English proficiency, including interpretive services.

Expectations Regarding Your Care

- You can expect to be treated with dignity, respect and consideration which supports your individuality, choices, strengths and abilities.
- You can expect care for your personal needs.
- You may request your choice of spiritual care.
- You can expect the healthcare facility to be a safe environment. You will not be subjected to abuse, neglect, exploitation, coercion, manipulation, sexual abuse, sexual assault or the misappropriation of your personal property.
- Except in an emergency, you have the right to participate in the development of treatment decisions and to consent or refuse treatment. You may also refuse examination or withdraw consent for treatment before treatment is initiated. If you refuse care or treatment, you will be informed of the medical consequences of your refusal and be informed of other services that the healthcare facility provides, or arrange transfer to another healthcare facility.
- You can expect to know the names and titles of those caring for you, including those in “supervised training.”
- You can expect your doctor to give you complete and current information about your diagnosis, treatment, and prognosis in terms you can understand. You can expect to be informed of the outcome of care, including unexpected outcomes.
- Except in an emergency, you can expect to be informed of your options related to healthcare Advance Directives.

- Except in an emergency, you can expect complete explanations, including associated risks, possible complications and alternatives regarding any proposed procedures, care, and treatments so that you may give informed consent (permission for care, treatment, and procedures). This includes psychotropic medications and surgical procedures.
- You may designate a substitute decision maker (your representative) in the event that you may not be capable of making decisions or giving an informed consent. You may also ask a support person to help understand, protect, or exercise your rights.
- You can expect privacy during discussions regarding your situation, examination and treatment. Those not directly involved in your care must have your permission to be present.
- You can expect the healthcare facility will provide care within its capability. If your medical needs exceed its capability, the healthcare facility will provide a referral or coordinate the transfer of your care to a medical care provider who has the capability to manage your care.
- You can communicate with family members and significant others. You have the right to use of a telephone and receive visitors and telephone calls unless otherwise prohibited by policy.
- You will not be subjected to restraints unless required to protect your personal safety or the safety of others, or to seclusion unless permitted by law.
- You can expect to have your pain assessed and managed.
- You can expect to be informed of a plan for follow-up and ongoing care needs after discharge, including knowledge of any follow-up appointments and alternative doctors or providers who are available to provide the service.
- You can participate in discussions about any ethical issues that may affect your care. This includes issues of conflict resolution, withholding of life saving services, and forgoing or withdrawing of life saving procedures.
- You may request a copy of the procedures we use to protect your property from theft or loss.
- You may give or refuse consent for photographs, films or other images to be used for internal or external purposes other than for identification, diagnosis or treatment.
- You may agree or refuse to take part in research, education or experimental treatment unless authorized by HIPAA (Health Insurance Portability and Accountability Act).

Know the Complaint Process

- You may voice complaints about the care you receive without fear of retaliation and have those complaints reviewed and resolved when possible. Please speak with your doctor, healthcare staff or a manager if you have a concern. You may also contact any of the following:
Summit Healthcare Administration..... (928) 537-6556
Summit Patient Advocate..... (928) 537-6746
Summit Compliance Hotline.....(888) 826-8433
- If your concern is not resolved to your liking, you may access any federal or state regulatory agency about your care. You have the right to file a complaint regarding your care and to be informed of the complaint process. The name and address of the agency is as follows:
AZ Department of Health Services..... (602) 364-3030
Bureau of Medical Facilities Licensing
150 North 18th Avenue, Ste 450
Phoenix, Arizona 85007-3242
- You will not be subjected to retaliation for submitting a complaint to the Department or another entity.

Billing and Payment Explanations

- You may request information regarding the rates and charges for health care services.
- You may request an itemized copy of your bill and receive an explanation regarding your charges. An itemized copy of your bill will only be sent if requested.
- You may request an explanation regarding payment made by your insurance company.

Patient Visitation Rights

Summit Healthcare supports patient visitation and considers this to be an important component of your patient-centered care. Whenever feasible, you may have your support person(s) visit you in the healthcare facility. Visitors may be limited or restricted only when visitation would interfere with your care and/or safety. You may discuss the reasons for the limitations or restrictions with your healthcare professional and/or ask for a copy of the visitation policy.

Confidential Medical Treatment

- Unless permitted by law, your medical and financial records will not be released without your written consent.
- Upon written request, you may review your own medical record.
- For a complete description, you may request a copy of the healthcare facility's Notice of Privacy Practices. All communications initiated by the healthcare facility are considered confidential.

PATIENT RESPONSIBILITIES:

- Give your physician and the staff complete and accurate information about your condition and care, including past illness and hospitalization, medications (including vitamins and herbal products) and other matters related to your health status. Request additional information or additional explanation(s) about your health status or treatment when you do not fully understand information and instructions.
- Follow your physician's orders and instructions as well as the staff's instructions for your care. Inform your physician and the staff if you anticipate any difficulties in following the prescribed treatment.
- Accept responsibility for refusing treatment or not following your physician's recommendations. Ask your physician about the risks and consequences for refusal prior to making decisions.
- Review your Living Will or Durable Power of Attorney for Health Care, if you have one, with your physician and the person you have selected to represent you. If you change either document, you have the responsibility to bring an updated copy to be placed in your medical record. If you do not bring a copy or your copy is unavailable, you may consider making a new one.
- Be considerate of other patients' needs for privacy and a quiet environment. Consider other patients when using the telephone, radio, or television.
- Observe the non-smoking policy.
- So that we can provide optimal care for you, communicate your personal, physical, emotional, and spiritual needs to the staff. Additionally, let the staff know when you have pain so they can provide pain management for you.
- Supply insurance information and pay your bill promptly so that we may continue to serve you and the community effectively.
- Follow the healthcare facility's rules and regulations.
- Speak up and inform a health care worker about anything you feel is unsafe. Speak up if you feel you are about to be given the wrong medication or treatment. Speak up if the environment is not safe. For example, if there is a spill on the floor, tell someone.

928-537-4375 www.summithealthcare.net