

CHCRR: PATIENT RIGHTS AND RESPONSIBILITIES

CHCRR adopts the goal of improving the well-being of our patients and community. We strive to meet and exceed the expectations of those we serve. At all times, our patient rights to access, equity, quality, and safety will be respected. To that end, CHCRR honors our Patient Bill of Rights. In order to exceed expectations of care, our patients are expected to work collaboratively, and responsibly, with their providers.

As a Patient of CHCRR You Have the Following Rights

General Rights

- To be treated in a respectful, private and nondiscriminatory manner.
- To be treated with consideration of your emotional, spiritual and cultural needs.
- You have the right of full disclosure of accurate and understandable information regarding diagnosis, treatment and possible outcomes. Family members, civil union partners, guardians and other beneficiaries may share in this information, with your permission.
- If you need advanced accommodations during your visit, CHCRR will try to meet this need.
- Except in emergencies, to receive information necessary to make informed decisions regarding your health care.
- To a prompt response to reasonable requests.
- To speak in confidence with your provider. Also to review your medical record and to request records change if information is not accurate, relevant or complete.
- To fully participate in the decision making process regarding your care. Parents, guardians, family members, reciprocal beneficiaries, civil union partners or other individuals that you designate will be involved in the decision making process regarding your health care.
- You have a right of choice of health care providers sufficient to provide you with appropriate care.
- To a fair, timely and objective review of any complaint or concern regarding your treatment and care.
- The right to disclose, or not disclose, your presence to callers or visitors.

Pain

- To have your reports of pain acknowledged and appropriately managed.
- Offered analgesia prior to procedures known to cause pain.

Advanced Directives

- To complete an advanced directive regarding your health care, should you become unable to communicate your wishes. Your wishes for organ and tissue donation can be included in your advanced directive.
- Unless otherwise directed by you, to have your family participate in your treatment planning.
- To participate in discussing ethical issues of your care.

Financial

- To receive a confidential and detailed explanation of your bill of services.

Conditions of Treatment

- You have the right to refuse a recommended treatment, to the extent permitted by law, and to be informed of potential consequences of your decision.
- To expect reasonable continuity of care.
- To refuse participation in an experimental or research treatment.
- To refuse to be photographed or audiotaped without your consent.

Staff Identity

- To know the identity and professional status of individuals involved in your care.

Safety

- You have the right to personal safety.
- To participate in measures ensuring patient safety.

As a Patient of CHCRR, You Have the Following Responsibilities

Provide Information

- To provide complete and accurate information regarding your health status, past medical history and medication use.
- To report uncontrolled pain, unanticipated symptoms, or unexpected changes in your condition.
- Inform the staff of existing advanced directives.
- To understand and comply with the prescribed, and agreed upon, health management plan.
- To communicate with your provider or CHCRR manager any complaints or suggestions regarding your health care.
- To ask questions if you do not feel fully informed.

Accountability

- Accept health consequences if you choose to not participate in a recommended treatment plan.
- Recognize the impact of lifestyle on your personal health.
- Accept consequences of not following the rules and regulations of CHCRR.

Respect

- Keep scheduled appointments.
- Be considerate of the rights of other patients and staff.
- Respect the confidentiality and privacy of other patients.
- Turn off cell phone in clinical areas.
- Respect the smoke-free environment of CHCRR.
- Respect the weapon-free environment of CHCRR.

Financial Commitment

- Provide the center with accurate information regarding insurance coverage and ability to meet financial obligations. In certain circumstances, this will require proof of identification and income.