PATIENT RIGHTS AND RESPONSIBILITIES

Respect and Nondiscrimination – You have the right to considerate, respectful and nondiscriminatory care from physicians, nurses, health care professionals and other hospital employees. Skiff Medical Center complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability. Skiff does not exclude people or treat them differently because of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability. You have the right to:
- Receive care in a safe setting.
- Receive kind and respectful treatment from all hospital personnel.
- Exercise cultural and spiritual beliefs that do not interfere with the well-being of others or the planned course of your medical therapy.
- Be free from all forms of abuse, harassment, retaliation, humiliation, neglect, and financial or other exploitation.
- Be free from restraint or seclusion of any form that is not medically necessary or that is used as a means of coercion, discipline, convenience or retaliation by staff.
- Be informed at the time of admission of your right to decline being listed in the patient information registry, which is referred to as “Confidential status.”
- Confidential status prevents the release of a patient’s protected health information (PHI) – including a condition report – to anyone. Anyone seeking information on a patient with Confidential status – whether by phone or in person – will be told, “We have no information on a patient by that name in our directory.”

In addition to patient/surrogate decision maker request, there are two circumstances in which a patient may be placed on Confidential status – by court order or if the patient is in custody of law enforcement, who directs Skiff Medical Center to classify the patient as Confidential status.

Additionally, patients who are minors or who are unable to communicate or understand HIPAA consent forms are placed on Confidential status upon arrival at the hospital’s Emergency Department. The patient will remain on this status until he/she, a parent, guardian or designee makes the decision to change the status and signs the Confidential revocation. You have the right to:
- Know the name, identity and professional status of any person providing health care services to you, and to know who is primarily responsible for your care.
- Receive complete and current information concerning your diagnosis in terms you can understand. If it is not medically advisable for you to receive such information, it will only be shared with an appropriate person on your behalf.
- Receive an explanation of any proposed procedure or treatment, including a description of the nature and purpose of the procedure, known risks, serious side effects and treatment alternatives, including the option of no treatment.
- Have access or referral to appropriate legal representation and self-help and advocacy support services.
- Know if your care involves any experimental methods of treatment and have the right to consent or refuse.
- Be informed about the type of pain to anticipate and pain relief measures.
- Be informed by your practitioners of any health-related concerns or instructions for you to follow upon discharge from the hospital.
- Examine your bill and receive an explanation of the charges regardless of the source of payment for your care.

Participation in Treatment Decisions – You have the right to:
- Know all of your treatment options and to participate in decisions about your care. Your spouse, partner, parents, agent or other individuals you have designated may represent you if you cannot make your own decisions. You also have the right to appoint a representative to make health care decisions on your behalf, even when you are capable of doing so.
- Participate in the development and implementation of your plan of care.
- Make informed decisions about your care.
- Access information regarding your condition, unless medically contradicted.
- Consult a specialist at your request and expense.
- Accept or refuse medical care or treatment to the extent permitted by law, and to be informed of the medical consequences of such refusal.
- Have advance directives, such as a living will or a durable power of attorney for health care, and have a health care team that complies with these directives (see section, “Advance Directives” for additional information).
- Have your family and physician notified promptly of your admission to the hospital.

Access to Emergency Services – You have the right to receive screening and stabilizing emergency services whenever and wherever needed if you have severe pain, symptoms or an injury that convinces you your health is in serious jeopardy. This includes the right to:
- Receive evaluation, service and/or referral as indicated by the urgency of your situation.
• Be given complete information regarding any decision to transfer you to another facility – if such a transfer is medically permissible – and understand the need for and alternatives to a transfer (the facility to which you will be transferred must first accept the transfer).

Pain Management Services – You have the right to pain prevention, relief and management services. You have the right to:
• Discuss pain relief options with your physician and nurses and work with your health care team to develop a pain management plan.
• Discuss any worries you have about taking pain medications with your physician and nurses.
• Report pain at any time and have your pain assessed by health care professionals who respond quickly with pain management.
• Notify your physician or nurses if your pain is not relieved and request to have your pain relief medication monitored and adjusted, if needed.

Confidentiality and Disclosure of Health Information – Your privacy is as important to us as it is to you. Skiff is required by federal law to maintain the privacy of your medical information and give you our Notice of Privacy Practices. This Notice is available at skiffmed.com and in a booklet that will be offered to you at the time you are admitted or prior to receiving outpatient care. You have the right to:
• Review your health care record with a health care professional;
• Request and receive a copy of your medical records; and
• Request amendments to your medical records.
• Have personal privacy concerning your own medical care program. Any discussions or consultations among health care professionals about your care, condition, examination and treatment is confidential and should be conducted discreetly. Persons not directly involved in your care must have your permission to be present.
• Expect all communications and clinical records pertaining to your care will be treated confidentially.

Complaints and Appeals – You have the right to a fair, fast and objective review of any complaint you have against Skiff or your physician, nurse or other health care professional. This includes complaints about patient care and safety, wait times, operating hours, the conduct of Skiff personnel and the adequacy of health care facilities.
You have the right to:
• Use Skiff’s complaint process to submit a written complaint/grievance to: Patient Advocate, 204 North 4th Ave East, Newton, IA 50208. Deliver a verbal complaint/grievance to the Patient Advocate by phone at (641) 791-4345. You may also submit your complaint/grievance to your health care practitioner. If necessary, your complaint/grievance will be forwarded to the Patient Grievance Committee for review. You will receive a written or oral response from Skiff regarding your grievance within seven days.
• Refer quality of care concerns, premature discharge grievances or beneficiary complaints to KEPRO, the external peer review organization for hospitals in Iowa. You may send your concern by mail to KEPRO Area 4, 5201 West Kennedy Blvd, Suite 900, Tampa, FL, 33609, by phone at (855) 408-8557 or by fax at (844) 834-7130.
• Register complaints with the Health Facilities Division of the Iowa Department of Inspections and Appeals. You may submit your complaint in writing to the Iowa Department of Inspections and Appeals, Health Facilities Division/Complaint Unit, Lucas State Office Building, 321 E. 12th Street, Des Moines, IA 50319-0083. You may also fax your complaint to (515) 281-7106 or call (877) 686-0027.

 PATIENT RESPONSIBILITIES
As a patient at Skiff, or as the parent or legal guardian of a minor or adult patient at Skiff, it is your responsibility to:
• Provide accurate and complete information about the patient’s present complaints, past illnesses, hospitalizations, medications and other matters relating to your health – including advance directives – and report whether or not you clearly understand the contemplated course of action and its anticipated effects.
• Follow the treatment plan recommended by the practitioner primarily responsible for your care. This may include following the instructions of nurses and other health care professionals as they implement your practitioner’s orders and enforce the applicable hospital rules and regulations.
• Accept the medical consequences if you refuse treatment or if you do not follow your practitioner’s instructions. In the unlikely event you choose to leave the hospital against medical/physician advice, please inform your nurse, who will provide you with a release to sign.
• Follow hospital rules and regulations regarding patient care and conduct.
• Be considerate of the rights of other patients and staff, and assist in the control of noise and the number of visitors in your room.
• Photos, videos and audiotapes of staff are not permitted without consent.
• Assure the financial obligations of your care are fulfilled as promptly as possible.

Information Disclosure – You have the right to receive accurate and easily understood information about your
You have the right to:

- Be informed of your rights before patient care is provided or discontinued, whenever possible.
- Receive information about your rights as a Medicare beneficiary upon admission.
- Be informed of the hospital rules and regulations regarding your conduct as a patient.
- Expect a family member or representative (with your permission) and your physician will be notified promptly upon your admission to the hospital.

VISITING PATIENTS

Visitation privileges will not be restricted, limited or otherwise denied on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation or disability. Skiff will ensure all visitors enjoy full and equal visitation privileges consistent with patient preference and medical safety.

It is our responsibility to maintain a healing environment that encourages recovery. Visitors are reminded disruptive behavior can impact patient’s care and recovery. Visitors will be asked to leave the patient’s room and/or hospital if they are disturbing this healing environment.

Visitation privileges include the following:

- Receive visitors whom you choose, including, but not limited to, your spouse or domestic partner (including a same-sex domestic partner), another family member or a friend. You have the right to withdraw or deny consent at any time for any visitor.
- Identify a person who may be present for emotional support during your stay, unless the individual’s presence interferes with others’ rights or safety or is not in your best interest medically, therapeutically or legally. Your support person can make visitation decisions in the event you are unable to do so. (This support person may or may not be your surrogate decision maker or legally authorized representative. Unless you indicate otherwise, the person you identified for emergency notification during admission will be your designated support person.)
- You will not be required to prove the relationship between yourself and a visitor, nor to have visitors prove their relationship to you, unless you are unable to communicate your wishes and a disagreement occurs between two or more people over whether a particular individual should be allowed to visit.

The hospital may develop clinically appropriate visitation restrictions under the following conditions:

- The patient is undergoing care interventions.
- There are infection control issues and/or isolation limitations.
- Visiting interferes with the care of other patients.
- The patient needs or rest or privacy.
- Limitations on the number of visitors are required for clinical reasons or during a specific period of time.
- The patient is in an inpatient substance abuse treatment program that has a protocol that limits visitation.

Other non-clinical circumstances which may affect visiting include:

- Court orders restricting contact with a patient
- Patient incarceration
- Disruptive, threatening or violent behavior of any kind
- Unit specific age requirements for child visitors
- Public Safety procedures

Individual departments at Skiff Medical Center may have unit specific guidelines and/or restrictions specific to their patient population and services provided. These unit specific guidelines will address:

- Age of visitors permitted
- Number of visitors at a given time
- Visitors staying in patient rooms overnight (Children are not allowed to stay in a patient’s room overnight unless accompanied by an adult other than the patient or the patient is able to assume total responsibility for care of the child.)

QUESTIONS/CONCERNS

If you have questions or concerns about your care, please speak to your nurse, the unit charge nurse or the unit nursing director. If you feel the need to discuss your concern further, you may contact Skiff’s Patient Advocate at (641) 791-4345.

To access or release information in your medical record, please call Medical Records at (641) 791-4370 (for hospital records) or contact your specific clinic for medical information related to care provided.

A copy of this Patient Rights & Responsibilities guide is also available at www.skiffmed.com.