

The Valley Hospital Patient Bill of Rights

AS A PATIENT OF THE VALLEY HOSPITAL, YOU HAVE THE FOLLOWING RIGHTS:

Medical Care

- To receive the care and health services that the hospital is required to provide under State law and regulations.
- To expect and receive appropriate assessment, management and treatment of pain as an integral component of your care.
- To receive from your physician(s) or clinical practitioner(s) an understandable explanation of your complete medical condition, recommended treatment, risk(s) of the treatment, expected results and reasonable medical alternatives. If this information would be detrimental to your health, or beyond your ability to understand, the explanation shall be provided to your authorized representative and documented in your medical record.
- To give informed, written consent prior to the start of specified non-emergency procedures or treatments only after a physician or clinical practitioner has explained – in understandable terms – specified details about the recommended procedure or treatment, the risks involved, the possible duration of incapacitation, and any reasonable medical alternatives for care and treatment. The procedures requiring informed, written consent shall be specified in the hospital's policies and procedures. If you are incapable of giving informed, written consent, consent shall be sought from your authorized representative or through an advance directive, to the extent authorized by law. If you do not give written consent, a physician or clinical practitioner shall enter an explanation in your medical record.
- To refuse medication and treatment to the extent permitted by law and to be informed of the medical consequences of this act.
- To be included in experimental research only when you give informed, written consent to such participation, or when an authorized representative provides such consent for an incompetent patient in accordance with law and regulation. You may refuse to participate in experimental research, including the investigations of new drugs and medical devices.
- To contract directly with a New Jersey licensed registered professional nurse of your choosing for private professional nursing care during your hospitalization. A registered professional nurse so contracted shall adhere to hospital policies and procedures in regard to treatment protocols, and policies and procedures so long as these requirements are the same for private duty and regularly employed nurses. You can request from the hospital a list of local non-profit professional nurses association registries that refer nurses for private professional nursing care.

Communication and Information

- To be informed of the names and functions of all physicians and other healthcare professionals who are providing you with direct care. These people shall identify themselves by introduction or by wearing a name tag.
- To receive, as soon as possible, the services of a translator or interpreter to facilitate communication between you and the hospital's healthcare personnel.
- To be informed if the hospital has authorized other healthcare and educational institutions to participate in your treatment. You also have a right to know the identity and function of these institutions, and may refuse to allow their participation in your treatment.
- To be informed of the hospital's policies and procedures regarding life-saving methods and the use or withdrawal of life-support mechanisms. Upon request, such policies and procedures shall be made available promptly in written format to the patient, his or her family or guardian, and to the public.

Discharge

- To be informed by the attending physician and other providers of healthcare services about any continuing healthcare requirements after your discharge from the hospital. You shall also have the right to receive assistance from the physician and appropriate hospital staff in arranging for required follow-up care after discharge.
- To receive sufficient time before discharge to have arrangements made for your healthcare needs after hospitalization.
- To be informed by the hospital about any discharge appeal process to which you are entitled by law.

Transfers

- To be transferred to another facility only for one of the following reasons, with the reason recorded in your medical record: (1) The transferring hospital is unable to provide the type or level of medical care appropriate for your needs. The hospital shall make an immediate effort to notify your primary care physician and next of kin, and document that the notifications were received; or (2) The transfer is requested by you, or by your authorized representative if you are mentally incapacitated or incompetent.
- To receive from a physician an explanation of the reasons for transfer to another facility, information about alternatives to the transfer, verification of acceptance from the receiving facility, and assurance that the movement associated with the transfer will not subject you to substantial, unnecessary risk of deterioration of your medical condition. This explanation shall be given in advance to you, and/or your authorized representative except in a life-threatening situation where immediate transfer is necessary.

Courtesy, Consideration, and Respect

- To be treated with courtesy, consideration, and respect for your dignity and individuality.
- To have access to individual storage space in your room for private use. If a patient is unable to assume responsibility for his or her personal items, the hospital shall have a system in place to safeguard the patient's personal property until the patient or next of kin is able to assume responsibility for these items.

Freedom from Abuse and Restraints

- To freedom from physical and mental abuse.
- To freedom from restraints, unless they are authorized by a physician for a limited period of time to protect your safety and/or the safety of others.

Privacy and Confidentiality

- To have physical privacy during medical treatment and hygiene functions, such as bathing and using the toilet, unless you need assistance. The patient's privacy shall also be respected during other healthcare procedures and when hospital personnel are discussing the patient.
- To have information about you kept confidential. Information in your record shall not be released to anyone outside the hospital without your approval, unless another healthcare facility to which you are transferred requires the information, or unless the release of the information is required and permitted by law, a third-party payment contract, a medical peer review, or the New Jersey State Department of Health. The hospital may release data about you for studies containing aggregated statistics when your identity is masked.

Cost of Care

- ▶ To receive a copy of the hospital payment rates, regardless of source of payment. Upon request, you or the responsible party shall be provided with an itemized bill and an explanation of the charges if there are further questions. You or the responsible party has a right to appeal the charges. The hospital shall provide you or the responsible party with an explanation of procedures to follow in making such an appeal.
- ▶ To be assisted in obtaining public assistance and the private healthcare benefits to which you may be entitled. This includes being advised that you are indigent or lack the ability to pay and that you may be eligible for coverage, and receiving the information and other assistance needed to qualify and file for benefits or reimbursement.

Visitors

- ▶ To be advised in writing of the hospital rules and regulations that apply to the conduct of patients and visitors.
- ▶ Visitation privileges shall not be denied or abridged on the basis of race; creed; color; national origin; nationality; ethnicity; culture; ancestry; language; age; sex; pregnancy; familial status; marital, domestic partnership or civil union status; affectional or sexual orientation; gender identity or expression; religion; military service; veteran's status; mental, physical or perceived disability or handicap; AIDS and HIV status; socioeconomic status; source of lawful income; or any other basis deemed protected under federal, state or local law.
- ▶ You shall have the right to receive the family/guests you designate including, but not limited to, a spouse, domestic partner (including a same sex partner), partner in a civil union, family member, or friend. A patient's partner in a civil union and/or domestic partner shall have the same visitation privileges as if the visitor were the patient's spouse.
- ▶ The hospital shall not require a patient or the patient's civil union partner or domestic partner to produce proof of that partnership status as a condition of affording visitation privileges, unless the hospital in similar situations requires married patients or their spouses to produce proof of marital status.
- ▶ Visitation may be restricted in medically appropriate circumstances or based on the clinical decision of a healthcare professional charged with the patient's care.

Medical Records

- ▶ To have prompt access to the information contained in your medical record, unless a physician prohibits such access as detrimental to your health, and explains the reason in your medical record. In that instance, your authorized representative shall have a right to see the record. This right continues after you are discharged from the hospital for as long as the hospital has a copy of the record.
- ▶ To obtain a copy of your medical record, at a reasonable fee, within 30 days of a written request to the hospital. If access by the patient is medically contraindicated (as documented by a physician in the patient's medical record), the medical record shall be made available to a legally authorized representative of the patient or the patient's physician.

Civil Rights

- ▶ To treatment and medical services without discrimination based on race; creed; color; national origin; nationality; ethnicity; culture; ancestry; language; age; sex; pregnancy; familial status; marital, domestic partnership or civil union status; affectional or sexual orientation;

gender identity or expression; religion; diagnosis; atypical hereditary cellular or blood trait; genetic information (including refusal to submit to genetic testing or make available the results of a genetic test); liability for military service; veteran's status; mental, physical or perceived disability or handicap; AIDS and HIV status; socioeconomic status; ability to pay; source of lawful income; or any other basis deemed protected under federal, state or local law.

- ▶ To retain and exercise to the fullest extent possible all the constitutional, civil, and/or legal rights to which you are entitled by law.

Questions and Complaints

- ▶ If you have a question or grievance about patient rights, you can contact the hospital's Patient and Family Relations Department via the below contact information. You have the right to present such grievances and receive an answer to your questions and/or grievances within a reasonable period of time.
- ▶ You can also contact the New Jersey Department of Health and The Joint Commission about complaints or questions via the below contact information.

Patient and Family Relations Department The Valley Hospital

223 North Van Dien Avenue
Ridgewood, NJ 07450-2726
201-447-8169

The Office of Quality and Patient Safety (OQPS) The Joint Commission

One Renaissance Boulevard
Oakbrook Terrace, IL 60181
Fax: 630-792-5636
www.jointcommission.org/report_a_complaint.aspx

The New Jersey Department of Health Division of Health Facility Survey and Field Operations

P.O. Box 367
Trenton, NJ 08625-0367
Complaint Hotline: 1-800-792-9770

This document includes a summary of New Jersey hospital patients' rights, which are set forth in N.J.A.C. 8:43G-4.1, and it shall be posted conspicuously in patient rooms and in public places throughout the hospital. A complete copy of N.J.A.C. 8:43G-4 is available at nurse stations and other patient care registration areas in the hospital for review by patients and their families or guardians. This summary shall be provided in a patient's native language if 10 percent or more of the population in the hospital service area speak that language. You also have a right to be given a copy of this summary and any additional policies and procedures established by the hospital involving patient rights and responsibilities.

THE VALLEY HOSPITAL AND ALL OF ITS OFF-SITE LOCATIONS

Ambulatory Patient Bill of Rights

EACH PATIENT RECEIVING SERVICES IN AN AMBULATORY CARE FACILITY SHALL HAVE THE FOLLOWING RIGHTS:

1. To be informed of these rights, as evidenced by the patient's written acknowledgement, or by documentation by staff in the medical record, that the patient was offered a written copy of these rights and given a written or verbal explanation of these rights, in terms the patient could understand. The facility shall have a means to notify patients of any rules and regulations it has adopted governing patient conduct in the facility.
2. To be informed of services available in the facility, of the names and professional status of the personnel providing and/or responsible for the patient's care, and of fees and related charges, including the payment, fee, deposit, and refund policy of the facility and any charges for services not covered by sources of third-party payment or not covered by the facility's basic rate.
3. To be informed if the facility has authorized other healthcare and educational institutions to participate in the patient's treatment. The patient also shall have a right to know the identity and function of these institutions, and to refuse to allow their participation in the patient's treatment.
4. To receive from the patient's physician(s) or clinical practitioner(s), in terms that the patient understands, an explanation of his or her complete medical/health condition or diagnosis, recommended treatment, treatment options, including the option of no treatment, risk(s) of treatment, and expected result(s). If this information would be detrimental to the patient's health, or if the patient is not capable of understanding the information, the explanation shall be provided to the patient's authorized representative. This release of information to the patient's authorized representative, along with the reason for not informing the patient directly, shall be documented in the patient's medical record.
5. To participate in the planning of the patient's care and treatment, and to refuse medication and treatment. Such refusal shall be documented in the patient's medical record.
6. To be included in experimental research only when the patient gives informed, written consent to such participation, or when an authorized representative gives such consent for an incompetent patient in accordance with law, rule, and regulation. The patient may refuse to participate in experimental research, including the investigation of new drugs and medical devices.
7. To voice grievances or recommend changes in policies and services to facility personnel, the governing authority, and/or outside representatives of the patient's choice either individually or as a group, and free from restraint, interference, coercion, discrimination, or reprisal.
8. To be free from mental and physical abuse, free from exploitation, and free from use of restraints unless they are authorized by a physician for a limited period of time to protect the patient or others from injury. Drugs and other medications shall not be used for discipline of patients or for convenience of facility personnel.
9. To confidential treatment of information about the patient. Information in the patient's medical record shall not be released to anyone outside the facility without the patient's approval, unless another healthcare facility to which the patient was transferred requires the information, or unless the release of the information is required and permitted by law, a third-party payment contract, or a peer review, or unless the information is needed by the New Jersey State Department of Health for statutorily authorized purposes. The facility may release data about the patient for studies containing aggregated statistics when the patient's identity is masked.
10. To be treated with courtesy, consideration, respect, and recognition of the patient's dignity, individuality, and right to privacy, including, but not limited to, auditory and visual privacy. The patient's privacy shall also be respected when facility personnel are discussing the patient.
11. To not be required to perform work for the facility unless the work is part of the patient's treatment and is performed voluntarily by the patient. Such work shall be in accordance with local, state and federal laws and rules.
12. To exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, or any attendance at religious services, shall be imposed on any patient.
13. To treatment and medical services without discrimination based on race; creed; color; national origin; nationality; ethnicity; culture; ancestry; language; age; sex; pregnancy; familial status; marital, domestic partnership or civil union status; affectional or sexual orientation; gender identity or expression; religion; diagnosis; atypical hereditary cellular or blood trait; genetic information (including refusal to submit to genetic testing or make available the results of a genetic test); liability for military service; veteran's status; mental, physical or perceived disability or handicap; AIDS and HIV status; socioeconomic status; ability to pay; source of lawful income; or any other basis deemed protected under federal, state or local law.
14. To expect and receive appropriate assessment, management and treatment of pain as an integral component of the patient's care in accordance with N.J.A.C. 8:43E-6.
15. To receive the family/guests a patient designates, including but not limited to a spouse, domestic partner (including a same sex partner), partner in a civil union, family member or friend. Visitation privileges shall not be denied or abridged on the basis of race; creed; color; national origin; nationality; ethnicity; culture; ancestry; language; age; sex; pregnancy; familial status; marital, domestic partnership or civil union status; affectional or sexual orientation; gender identity or expression; religion; military service; veteran's status; mental, physical or perceived disability or handicap; AIDS and HIV status; socioeconomic status; source of lawful income; or any other basis deemed protected under federal, state or local law. Visitation may be limited, if necessary to ensure quality of care, safety, and/or confidentiality.

AMBULATORY PATIENT BILL OF RIGHTS (CONTINUED)

Patients and/or their families may contact the following offices regarding complaints or grievances:

**Patient and Family Relations Department
The Valley Hospital**
223 North Van Dien Avenue
Ridgewood, NJ 07450-2726
201-447-8169

**The Office of Quality and Patient Safety (OQPS)
The Joint Commission**
One Renaissance Boulevard
Oakbrook Terrace, IL 60181
Fax: 630-792-5636
www.jointcommission.org/report_a_complaint.aspx

**The New Jersey Department of Health
Division of Health Facility Survey
and Field Operations**
P.O. Box 367
Trenton, NJ 08625-0367
Complaint Hotline: 1-800-792-9770

**State of New Jersey
Office of the Ombudsman
for the Institutionalized Elderly**
P.O. Box 852
Trenton, NJ 08625
1-877-582-6995

Information concerning Medicare and Medicaid coverage may be obtained from the following offices:

Medicare
U.S. Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244
1-800-633-4227
www.medicare.gov

Medicaid
New Jersey Department of Human Services,
Division of Medical Assistance & Health Services
P.O. Box 712
Trenton, NJ 08625
1-800-356-1561

The safety of healthcare delivery is enhanced by the involvement of the patient, as appropriate to his/her condition, as a partner in the healthcare process. Patients and families have the following responsibilities:

- To provide to the best of your ability, accurate and complete information about your present condition, past illnesses or hospitalizations, medications you are now taking or have with you, and other matters relating to your health.
- To tell your doctor or others responsible for your care if you experience any change in your condition or if problems arise in your treatment.
- To tell your doctor or nurse if you do not clearly understand your treatment or if you do not clearly understand what you are expected to do.
- To follow the advice and instructions of the doctors, nurses, and other hospital personnel concerning your care.
- To keep appointments and give the hospital prompt notice when you are unable to do so.
- For your actions if you refuse treatment or do not follow instructions.
- To ensure that your healthcare bills are paid for as promptly as possible.
- To advise the hospital who will be paying your bill, if you are unable to pay your own bill. To tell the hospital if you cannot pay your bill.
- To follow the hospital's rules and regulations concerning patient care and conduct.
- To be considerate of other patients and hospital personnel.
- To keep noise to a reasonable level and to comply with the hospital's no smoking policy.
- To keep the number of visitors to the level allowed by your hospital accommodations.
- To be respectful of hospital property and the property of patients.

The Valley Hospital's Pain Management Bill of Rights

■ As a patient, you have the right to respectful and considerate care. In addition, there are specific rights and responsibilities you have during your hospital stay.

The Valley Hospital's Pain Management Bill of Rights

As a patient at The Valley Hospital, you have the right to receive appropriate pain management. The person in pain is the only one who knows how much pain he or she has. Knowledge, good communication, caring and participation by all are needed to ensure the best pain relief available to you.

Patient Rights

As a patient at this hospital, you can expect:

- to be asked about your pain and informed about pain relief measures available.
- to be cared for by committed staff concerned with preventing and controlling your pain.
- our healthcare professionals to respond quickly to your pain by supporting, coordinating and addressing all your needs appropriate to your clinical condition.
- your reports of pain will be believed by the doctors, nurses and others around you.
- our hospital to be dedicated to maintaining and keeping abreast of the latest programs and technology.

Patient Responsibilities

As a patient at this hospital, we expect you will:

- ask your doctor or nurse what to expect with procedures.
- help your doctor and nurse measure your pain by using the pain scale.
- ask for pain relief when your pain first begins.
- tell your doctor or nurse if your pain is not relieved to your expectations.
- cooperate and participate in the discussion and planning of your pain relief options.
- tell your doctor or nurse about any worries you have about taking pain medication.
- realize that no method of pain relief can “completely” eliminate pain.

*Approved by the Pain Care Committee—
September 2005*