

Patient Bill of Rights

Access to Care – Hillcrest Hospital Claremore (HHC) does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of race, color, or national origin, or on the basis of disability or age in admission to, participation in, or receipt of the services and benefits under any of its programs and activities, whether carried out by HHC directly or through a contractor or any other entity with which HHC arranges to carry out its programs and activities.

Respect and Dignity – The patient has the right to considerate, respectful care at all times and under all circumstances, with recognition of their personal dignity, values and beliefs.

Designated Patient Representative – The patient has the right to designate a person to make healthcare decisions for the patient. The patient is not required to designate a representative. The patient has the right to change who the designated representative is at any time. The Designated Patient Representative may be involved in the patient's plan of care, be involved in making informed health care decisions.

Notification – the patient has the right to consent to or refuse the notification of their family, a representative and their physician for an inpatient admission to the hospital.

Privacy and Confidentiality – The patient has the right, within the law, to personal and informational privacy, as manifested by the following:

1. To exclude or include any family/significant others of participating in their care decisions.
2. To refuse to talk with or see anyone not officially connected with the hospital.
3. To wear appropriate personal clothing and religious/other symbolic items, as long as they do not interfere with diagnostic procedures or treatment.
4. To be interviewed and examined in surroundings designed to assure reasonable visual and auditory privacy.
5. To expect that any discussion or consultation involving their case will be conducted discreetly and that individuals not directly involved in their care will not be present without their permission.
6. To have medical records read only by individuals directly involved in their treatment or in the monitoring of its quality and by other individuals only on his/her written authorization or that of their legally authorized representative.
7. To expect all communications and other records pertaining to care, including the source of payment for treatment, to be treated as confidential.
8. To request a room transfer if another patient or a visitor in the room is unreasonably disturbing them.

Personal Safety

1. The patient has the right to expect reasonable safety insofar as the hospital practices and environment are concerned.
2. The patient has the right to seek protective services. If the patient feels unsafe in the hospital, or has some situation that makes them feel unsafe, or otherwise affects their well being, notify a nurse or ask for Social Services.
3. The hospital has the obligation to request protective privacy when considered necessary for personal safety.
4. The patient has the right to be free from mental/physical abuse and from chemical/physical restraint, except in emergencies or as authorized in writing by a physician for a specified and limited period of time, and when necessary to protect him/her from injury to self or others.
5. The patient and, their representative(s) are informed about the outcomes of care, including unanticipated outcomes.

Identity

1. The patient has the right to know the identity and professional status of individuals providing service to them and to know which physician or other practitioner is primarily responsible for their care.
2. The patient has the right to know if this hospital has relationships with outside parties that may influence their treatment and care. These relationships may be with educational institutions, other healthcare providers or insurers.

Information

1. The patient or patient representative has the right to obtain, from the practitioner responsible for coordinating their care, complete and current information concerning their diagnosis (to the degree known), treatment, and any known prognosis.
2. The patient has the right to be an active participant in their care.

Communication - The patient has the right of access to people outside the hospital by means of visitors and by verbal and written communication.

Information will be provided in a manner or language that the patient or patient representative can understand. The hospital is responsible for providing alternative means of communication.

Pastoral Care - The patient has the right to request that we notify a pastor of their choice or spiritual counsel on call.

Consent - The patient has the right to reasonably informed participation in decisions involving their healthcare; to the degree possible, this should be based on a clear, concise explanation of their condition and of all proposed technical procedures, including the possibilities of any risk of mortality or serious side effects, problems related to recuperation, and probability of success.

The patient or patient representative has the right to participate in the development and implementation of the treatment/care plan and plan for discharge.

Refusal of Treatment - The patient has the right to refuse treatment to the extent permitted by law.

Transfer and Continuity of Care

1. A patient may not be transferred to another facility unless they have received a complete explanation of the need for transfer, alternatives to such a transfer and the transfer is acceptable to the other facility.
2. The patient has the right to be told of realistic care alternatives when hospital care is no longer appropriate.

Hospital Charges - The patient has the right to know about hospital rules that affect their treatment and about charges and payment methods.

Hospital Rules and Regulations - The patient has the right to be informed of hospital rules and regulations applicable to their conduct as a patient.

Advance Directives

1. The patient has the right to make healthcare choices in advance, such as decisions on end of life care, living wills, and healthcare proxy or organ donation.
2. The patient may request information about ways to express their choices about future care, or name someone to make medical decisions if they become unable to speak for self (designated patient representative) .
3. If the patient already has a written advance directive, they should provide a copy to the hospital. For more information, notify a nurse or ask for Social Services.

Complaints or Unresolved Issues

1. The patient and/or family/significant other may request access to the Bioethics Committee regarding bioethical concerns, including issues of conflict resolution, withholding resuscitative services, and forgoing or withdrawal of life sustaining treatment.
2. The patient has the right, without recrimination, to voice complaints regarding care received, to have those complaints reviewed, and when possible, resolved. The complaint will be followed up in writing with the patient within 30 business days of the hospital receiving notification of the complaint.
3. The patient has the right to request addresses of advocacy resources, if complaints are not addressed to their satisfaction.
4. The patient has the right to file a complaint with the Oklahoma State Department of Health as well as or instead of utilizing the hospital grievance process. To contact the OSDH please call: 405-271-5600. Or by mail: Oklahoma State Department of Health
1000 NE 10th, Oklahoma City, OK 73117

Pain - The patient or patient representative has the right to request information about pain management and to expect timely pain relief measures to be provided by concerned staff committed to pain prevention, as guided by physician instruction.

Research - If you are involved in a research investigation or clinical trial, you are entitled to additional rights including the right to refuse to participate, which will not compromise access to hospital services.

Visitors – The patient has the right to receive or refuse visitors. Specific visiting guidelines may be enforced related to infection control, safety of the patient or visitors, patient needs and procedures / requests may on occasion preclude visiting rights.