



## **PATIENT’S BILL OF RIGHTS AND RESPONSIBILITIES**

Allied Services Rehabilitation Hospital is a freestanding, not-for-profit rehabilitation hospital committed to providing the highest quality, safe, compassionate, and cost-effective care to those in need, from pediatric to geriatric populations. We are dedicated to promoting the physical, psychological, social and vocational independence of those served through the use of an interdisciplinary team approach.

Service to our patients is our top priority. We are committed to making your stay as pleasant as possible. We have adopted the following Patient Bill of Rights to protect the interests and promote the well-being of our patients.

If you would like further clarification of the “Patient Rights and Responsibilities” as they pertain to you, please contact the individuals listed below.

If you wish to designate a representative for your stay, please advise the staff so we may provide notice of these rights.

Inpatient: Social Work Department..... (570) 348-1390  
Allied Services Rehabilitation Hospital  
475 Morgan Highway  
Scranton, PA 18508

Outpatient: AVP/Outpatient Operations..... (570) 341-4628 or (570) 348-1305  
Allied Services Rehabilitation Hospital  
475 Morgan Highway  
Scranton, PA 18508

## **PATIENT RIGHTS**

### **CODE OF CONDUCT**

The Allied Rehab Hospital operates according to a code of ethical behavior which addresses:

- marketing, admission, transfer, discharge and billing practices
- the relationship of the hospital and its staff members to other health care providers, educational institutions, and payers and
- a patient’s right to perform or refuse to perform tasks for the hospital.

The hospital follows ethical behavior in its care, treatment and services as well as business practices. The hospital’s code of ethical business and professional behavior protects the integrity of clinical decision making, regardless of how the hospital compensates or shares financial risk with its leaders, managers, clinical staff, and licensed independent practitioners.

The integrity of hospital decisions is based on identified care, treatment, and service needs of the patients.

The hospital makes decisions regarding the provision of ongoing care, treatment, services or discharge based on the care treatment and services required by the patient. The patient and/or family is involved in these decisions.

## **COMPLAINTS AND GREIVANCES**

The hospital addresses conflicts of interest as well as the resolution of complaints from Patients and/or their designee. Patients can freely voice complaints and recommend changes without being subject to coercion, discrimination, reprisal or unreasonable interruption of care, treatment, and services.

Patients and/or their representative have the right:

- to tell hospital staff about concerns, complaints, or an unmet need regarding care.
- to voice concerns directly. Voicing a concern or complaint to your physician, nurse, therapist, or the nurse manager of your floor, in most cases, resolves the issue quickly and effectively. Voicing concerns will not affect current or future care.
- to voice complaints regarding care, to have those complaints reviewed, and, when possible, resolved.
- to seek review of quality of care concerns, coverage decisions, and concerns about discharge.
- to file complaints or grievances in writing, by phone, or in-person.
- to expect timely response to complaints or grievances from the hospital. We work to resolve complaints at the time they are shared.
- to receive a written response to a formal grievance within seven days from the day we receive your grievance.

To voice a complaint or grievance with the hospital, please contact:

Inpatient: AVP Nursing-Clinical .....(570) 348-1221  
Allied Services Rehabilitation Hospital  
475 Morgan Highway  
Scranton, PA 18508

Outpatient: AVP/Outpatient Operations..... (570) 341-4628 or (570) 348-1305  
Allied Services Rehabilitation Hospital  
475 Morgan Highway  
Scranton, PA 18508

The Pennsylvania Department of Health is also available to assist you with any questions or concerns about your hospital care. You may lodge a complaint directly with the Department of Health, regardless of whether you first use the hospital complaint process. You can reach the Department of Health by calling (800) 254-5164 or writing:

Pennsylvania Department of Health  
Acute and Ambulatory Care Services  
PO Box 90  
Harrisburg, PA 17108-0090

If you feel that your concerns regarding patient care and safety were not resolved through the hospital's complaint and/or grievance process, you, or a representative of your choice, may contact the Office of Quality Monitoring of the Joint Commission by either calling 1-800-994-6610 or sending an e-mail to [complaint@jointcommission.org](mailto:complaint@jointcommission.org).

You may also lodge a concern with the Quality Improvement Organization (QIO) regarding coverage decisions, whether you have used the hospital's grievance process or not. You have the right to report any concerns regarding the quality of your care, coverage decisions, or appeal a premature discharge, to the (QIO). The QIO is Livanta and they can be contacted at 1-866-815-5440.

## **RESPECT AND DIGNITY**

Patients and/or their representative have the right:

- to respectful care given by competent personnel at all times.
- to expect good management techniques to be implemented within the hospital, considering effective use of the patient's time and avoiding personal discomfort to the patient.
- to be free from physical or mental abuse, and corporal punishment. Patients should be free from restraints and seclusion of any form if these are used for coercion, discipline, convenience or retaliation.
- to care that respects the patient's cultural and personal values, beliefs and preferences.
- to religious and other spiritual services.
- to have a family member or representative of their choice as well as their physician notified promptly of their admission to the hospital.
- to an environment that preserves dignity and contributes to a positive self-image.
- to be free from mental, physical, sexual, and verbal abuse, neglect and exploitation, or harassment.
- to respect, dignity and comfort while in the hospital.
- to have their rights respected during research.

## ACCESS TO CARE

Patients and/or their representative have the right:

- to be informed of their rights at the earliest possible moment in the course of their hospitalization.
- to good quality care and high professional standards that are continually maintained and reviewed.
- to reasonable access to care.
- to make informed decisions regarding his or her care. The patient's rights include being informed of their status, being involved in care planning and treatment, and being able to request or refuse treatment. This right must not be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary or inappropriate.
- to medically appropriate services without discrimination based on age, race, color, national origin, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, source of payment, sex, sexual orientation, and gender identity or expression.
- to assistance in obtaining consultation with another physician at the patient's request and own expense.
- to expect emergency procedures to be implemented without unnecessary delay.
- to full information in layperson's terms concerning their diagnosis, treatment, prognosis and outcomes, including information about alternative treatments and possible complications. When it is not medically advisable to give such information to the patient, the information shall be given on their behalf to the patient's next of kin or other designated individual.
- to effective communication from health care personnel in a manner that meets their oral and written communication needs. The patient who does not speak English should have access to an interpreter, free of charge. Patients with visual, speech, hearing, language and cognitive impairments will have their needs addressed.
- to access an individual or agency who is authorized to act on their behalf to assert or protect the rights of the individual. This includes advocacy services.
- to be transferred to another facility, when medically permissible, only after the patient and their next of kin or other legally responsible representative has received complete information and an explanation concerning the needs for and alternatives to such a transfer. The hospital to which the patient is to be transferred must first have accepted the patient for transfer. In the event of a medical emergency, patients may be transferred to acute care prior to their next of kin being notified.
- to be involved in the development and implementation of their plan of care, including the right to participate in the development and implementation of their inpatient and outpatient treatment/care plan, to participate in the development and implementation of their discharge plan, and to participate in the development and implementation of their pain management plan.
- to ongoing assessment and management of pain, including education about pain and pain relief measures.

- to allow their family to be involved in care, treatment and service decisions to the extent permitted by the patient or surrogate decision maker.
- to refuse any drugs, care, treatment and services/procedures offered by the hospital, to the extent permitted by law, and the physician shall inform them of the medical consequences of this refusal. When a patient is not legally responsible, the surrogate decision maker has the right to refuse care, treatment and services on the patient's behalf.

## **IDENTITY OF CARE PROVIDERS**

- Patients and/or their designee have the right to be given the name of their attending physician, the names of all other physicians directly participating in their care, and the names and functions of other health care persons having direct contact with the patient.

## **PRIVACY AND CONFIDENTIALITY**

- A patient's medical record is used only for the purposes of treatment, payment, and healthcare operations except as otherwise required or permitted by applicable law, rule or regulation. A patient is entitled to access information in the medical record, following Allied Services Corporate HIPAA policies and procedures, unless such access to the medical record is restricted by the physician for medical reasons or is prohibited by law. Patient records will only be used or disclosed as referenced in our Notice of Privacy Practices.
- The privacy of a patient's protected health information will be maintained as required by law. A patient has the right to receive the applicable Notice of Privacy Practices brochure indicating Allied Services Corporate HIPAA privacy practices with respect to a patient's protected health information on a patient's first contact on or after April 14, 2003, and when such a brochure is materially changed. To receive a copy, please contact any of our employees.

Patients and/or their representative have the right:

- to every consideration of personal privacy concerning the patient's medical care program. Case discussion, consultation, examination and treatment are considered confidential and should be conducted discreetly.
- to have all records pertaining to their care treated as confidential except as otherwise provided by law or third-party contractual arrangements.
- to access information in the medical record in a timely fashion.
- to security and personal privacy and confidentiality of information.
- to confidentiality of their clinical records.
- to access, request amendment to, and obtain information on disclosures of health information in accordance with law and regulation.

## PATIENT INFORMATION

Patients and/or their representative have the right:

- to know what hospital rules and regulations apply to their conduct as a patient.
- to formulate advance directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives .
- to have the hospital address Advance Directives, withholding resuscitative services, forgoing or withdrawing life-sustaining treatment and care at the end of life (if appropriate) with patients and/or their designee. Assistance will be provided to patients and/or their designee who indicate that they do not have an Advance Directive but wish to formulate one during their hospital stay. The hospital and staff must comply with these directives.
- to examine and receive a detailed explanation of their bill.
- to full information and counseling on the availability of known financial resources for their health care.
- to expect that the hospital will provide a mechanism whereby they are informed upon discharge of their continuing healthcare requirements following discharge and the means for meeting them.
- to be informed about and participate in decisions regarding their care, treatment and services.
- to designate a surrogate decision maker in case they are incapable of understanding a proposed treatment or procedure or are unable to communicate their wishes regarding care.
- to participate in ethical questions that arise in the course of their care, including issues of conflict resolution, withholding resuscitative services, forgoing or withdrawal of life-sustaining treatment.
- to be informed of their health status.
- to make informed decisions regarding his or her care.
- to be informed when the outcomes of care are significantly different from the expected outcome, including unanticipated outcomes including those that relate to sentinel events as deemed by the Joint Commission.
- to resolution of complaints and grievances from the patient and their family.
- Inpatients covered by Medicare have the following rights with respect to the Patient Assessment Instrument:
  - a. To be informed of the assessment data collection.
  - b. To have any information collected remain confidential and secure.
  - c. To be informed that the information will not be disclosed to others, except for the purposes allowed by the Privacy Act and federal or state regulations.
  - d. To refuse to answer patient assessment data questions.
  - e. To see, review, and request changes on the patient assessment instrument.

## **INFORMED CONSENT**

Patients and/or their representative have the right:

- to give or withhold informed consent.
- to give or withhold informed consent to produce or use recordings, films, or other images of the patient for purposes other than his or her care.
- to give informed consent, a legally responsible party, has the right to be advised when a physician is considering the patient as a part of a medical care research program or donor program, and the patient, or legally responsible party must give informed consent prior to actual participation in such a program. A patient, or legally responsible party, may, at any time, refuse to continue in any such program to which he has previously given informed consent.

## **SAFE ENVIRONMENT**

Patients and/or their representative have the right:

- to access protective services and advocacy services.
- to receive care in a safe setting.
- to be free from all forms of abuse and harassment, financial or other exploitation, retaliation, humiliation, and neglect.

## **HOSPITAL VISITATION RIGHTS**

Visitors can be 'good medicine' for patients. Family members, support persons, patient representatives and friends are welcome to visit.

Patient's have the right to the following;

- ✓ Consent to receive visitors he or she has designated, either orally or in writing, including but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend.
- ✓ Receive the visitors he or she has designated, including but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend, and
- ✓ Withdraw or deny his/her consent to receive specific visitors, either orally or in writing.

In order to enhance the quality of the patient care experience, some simple and flexible guidelines for visiting have been established supporting equal visitation privileges consistent with patient preferences.

We will ensure that all visitors you would like to see enjoy visitation privileges that are no more restrictive than that which family members would enjoy.

The following are simple and flexible guidelines for your visitors. If you need additional information, please check with the nurse on the unit:

- The hospital allows a family member, friend or other individual to be present with the patient for emotional support during the course of stay.
- Your family, support person, representative and friends generally may visit you until 8:30pm daily.
- Visitors may not smoke in patient rooms or anywhere on the hospital property.

- Visitors in semi private rooms should be considerate of you and your roommate.
- The number of visitors in your room at the same time may be limited, based upon your request or preference, or in consideration of the other patient in the room.
- Your visitors may be requested to step out of the room for brief periods so that staff may provide care to you and/or your roommate, or in the event of emergency situations.
- Visitors with colds, sore throats or any contagious diseases should not visit.
- Visitors are asked to maintain a quiet environment and avoid unnecessary noise.
- Visitors must keep their young children under direct supervision at all times.
- Visitors may not bring in any medications, eye drops, ear drops, vitamins, supplements or herbals for you. Providing drugs or alcohol to patients is prohibited.
- Before bringing you food or beverages, your visitors must check with the nursing staff. Many of our patients have diet restrictions and/or swallowing difficulties.
- Visitors are not allowed to remove you or any patient from the unit without notifying nursing staff.

## **VISITOR CONDUCT**

Hospital visitors are expected to conduct themselves in a manner that is considered appropriate by community standards and should adhere to the following guidelines:

- Adhere to visiting hour restrictions
- Not consume alcoholic beverages on campus
- Avoid running, littering or loitering in the hallways
- Refrain from loud conversations or from any behavior that may be disruptive to the patient
- Children should be under the close supervision of an adult at all times and managed appropriately

## **VISITING RESTRICTIONS**

There may be circumstances where it is clinically necessary for reasonable restriction or limitation imposed by the Hospital necessary to provide safe care to the patient or other patients. These may include, but are not limited to:

- Behavior presenting a direct risk or threat to the patient, hospital staff or others in the environment.
- Court order limiting or restraining contact.
- Behavior disruptive of the function of the unit.
- Patient at risk of infection.
- Need for privacy or rest by another individual in the patient's shared room.
- When the patient is undergoing a clinical intervention, treatment or procedure and the treating health care professional believes it is in the patient's best interest to limit visitation during the clinical intervention or treatment.
- During times of infectious outbreak in the community (e.g. influenza) visitation restrictions may be imposed.



## **PATIENT RESPONSIBILITIES**

The partnership nature of health care requires that patients, or their families/surrogates, take part in their care. The effectiveness of care and patient satisfaction with the treatment depends, in part, on the patient fulfilling certain responsibilities.

### **HOSPITAL RULES AND REGULATIONS**

Patients and/or their representative have the responsibility:

- for following hospital rules and regulations affecting patient care and conduct. Patients should be aware of the hospital's duty to be reasonably efficient and fair in providing care to other patients and the community. The hospital's rules and regulations are intended to help the hospital meet this responsibility.
- for making reasonable accommodations to the needs of the hospital, other patients, medical staff and hospital employees.

### **PROVIDING INFORMATION**

Patients and/or their representative have the responsibility:

- to provide, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications (including prescribed and non-prescribed medications and herbals), medical insurance and other matters relating to their health.
- to report perceived risks in their care and unexpected changes in their conditions to the responsible practitioner.
- for making it known when they do not understand a treatment course or care decision.
- for ensuring that they provide a copy of their written advance directive, if they have one.

### **RESPECT AND CONSIDERATION**

Patients and/or their representative have the responsibility:

- for being considerate of the rights of other patients and hospital personnel and for assisting in the control of noise, smoking in designated areas and the number of visitors they receive.
- for being respectful of the property of other persons and of the hospital.
- to support mutual consideration and respect by maintaining civil language and conduct in interactions with staff and licensed independent practitioners

### **COMPLIANCE WITH INSTRUCTIONS**

Patients and/or their representative have the responsibility:

- for following the care, treatment and service plan recommended by the practitioner primarily responsible for the patient's care. This may include following the instructions of nurses and Allied professionals as they carry out the coordinated plan of care and implement the

responsible practitioners' orders and as they enforce the applicable hospital rules and regulations.

- for their actions if they refuse treatment or do not follow the practitioners' instructions.
- for keeping appointments and, when unable to do so for any reason, for notifying the responsible practitioner or the hospital.
- for recognizing the impact of their lifestyle on their personal health and have the responsibility to avoid drugs, alcoholic beverages or toxic substances which have not been prescribed by their physician.

## **SPEAK UP®**

Patients and/or their representative have the responsibility:

- to ask questions when they do not understand their care, treatment and service or what they are expected to do.
- to express concerns about their ability to follow the proposed course of care, treatment and services. When appropriate, they will help to identify potential safety and medical error risks.

## **PAIN MANAGEMENT**

Patients and/or their representative have the responsibility:

- to ask their doctor or nurse what to expect regarding pain and pain management and what pain relief options are available.
- for working with their doctors and nurses to develop a pain management plan and expressing any worries they have about taking pain medications.
- for asking for pain relief when pain first begins, helping the doctors and nurses assess their pain and telling them if their pain is not relieved.

## **MEETING FINANCIAL COMMITMENTS**

Patients and/or their representative:

- are responsible for notifying the hospital of any changes in their insurance coverage in a timely manner.
- should promptly meet any financial obligations agreed to with the hospital.

## **REFUSAL OF TREATMENT**

Patients or their legally responsible parties are responsible for the outcomes if they do not follow the prescribed care, treatment or service plan.