

# PATIENTS' RIGHTS & RESPONSIBILITIES

The founding principles and values of Franklin Community Health Network (FCHN) include respect for the individuality and dignity of each patient. Our medical and support staff, volunteers, and administration are committed to providing every patient with the best possible medical care.

## AS A PATIENT, YOU HAVE THE RIGHT TO:

### RESPECTFUL AND DIGNIFIED QUALITY HEALTH CARE

- \* Receive care in accordance with your psychosocial, cultural, religious, or spiritual choices.
- \* Obtain access to auxiliary aids and/or assistive devices to assist with any hearing, speech, or visual impairments.
- \* Request an interpreter, at no cost to you, if you do not speak the predominant language of the community.
- \* Express complaints, and have your complaints resolved.
- \* Resolve any ethical issues and dilemmas regarding your care and request help from FCHN's Ethics Committee.
- \* Be granted safe access to the outdoors as condition warrants.

### PRIVACY PROTECTION

- \* Be guaranteed personal privacy and confidential treatment under the HIPAA Privacy Rule (Health Insurance Portability and Accountability Act).
- \* Be informed regarding the HealthInfoNet and provided the opportunity to opt out

### A SAFE AND SECURE ENVIRONMENT

- \* Know the name of the physician directing your care as well as the names and affiliations of others involved in your diagnosis and treatment.
- \* Access hospital security and other protective services. A list is available by contacting Care Management 779-3114.
- \* Request a transfer to a different room if a patient or visitor is disturbing you.
- \* Enjoy communication and visitation privileges, including the right to designate and restrict individual visitors.
- \* Receive care free from physical or mental abuse, and from restraint or seclusion, of any form. Restraint or seclusion may only be used to ensure the immediate physical safety of the patient, a staff member, or others and must be discontinued at the earliest possible time.

### ACCESS TO INFORMATION AND INVOLVEMENT IN CARE

- \* Participate in the development, implementation, and revision of your care plan; and allow your family to participate.
- \* See your medical record and be informed of your health status, diagnosis, prognosis, and treatment options.
- \* Receive information about a proposed treatment or procedure so you can make an informed decision about whether to consent or refuse a course of treatment.
- \* Receive appropriate management of pain and refuse pain control if you choose.
- \* Forgo life-sustaining treatment, or ask that treatment be withheld, including resuscitative services.
- \* Make decisions regarding care at the end of life.
- \* Obtain information about "advance directives" such as living wills that express your medical choices in the event that you are unable to make such decisions yourself.
- \* Examine your bill and receive an explanation of the charges.
- \* Be informed about institution-wide conscience objections and those that may be raised by individual physicians.
  - a. Hospitals and providers may limit certain services based upon conscience under the Maine Uniform

Healthcare Decisions Act.

b. Patients can obtain information regarding affected services from the Medical Staff Office.

- \* Choose or refuse to participate in a research project, including the right to:
  - a. Be informed of expected benefits of the research
  - b. Be advised of potential discomforts and risks
  - c. Be advised of alternative services
  - d. Be given a full explanation of the procedures

### **AS A PATIENT, YOU HAVE THE RESPONSIBILITY TO:**

- \* Keep appointments.
- \* Provide accurate and complete information about your condition, medical history, and health insurance coverage.
- \* Indicate when you do not understand something.
- \* Comply with hospital rules concerning visitors, noise, and smoking.
- \* Pay your bill as promptly as possible and follow through with applications for assistance.
- \* Consider the rights of others and treat them with respect.
- \* Accept treatment, follow treatment instructions, and accept responsibility if you refuse treatment.

### **WE WELCOME YOUR QUESTIONS, CONCERNS, OR COMPLAINTS.**

We encourage you to talk to us about your questions or concerns while you are here so we can address them immediately. To best serve you, we suggest the following:

- a. Talk to the person who is attending to you.
- b. Talk to the manager in charge of the department.
- c. Dial 778-6031, or "0" in the hospital, and ask for the Administrator on call.

### **CONTACT THE MAINE STATE DIVISION OF LICENSING AND REGULATORY SERVICES**

If you would like to share a concern with the Maine Division of Licensing and Regulatory Services, you may contact that office at any time.

Call **207-287-9308** or **800-383-2441** or write to:

**Maine State Division of Licensing and Regulatory Services  
41 Anthony Avenue, 11 State House Station  
Augusta, Maine 04333**

Concerns regarding patient care and safety in the hospital that cannot be resolved by the hospital's management may also be reported to the Joint Commission by calling **800-994-6610** or by sending an email to **[complaint@jointcommission.org](mailto:complaint@jointcommission.org)**.

If you are a Medicare beneficiary and have concerns about the quality of your care or a premature discharge, you can also contact the CMS Quality Improvement Organization (QIO) at:

Northeast Healthcare Quality Foundation  
15 Old Rollinsford Road  
Dover, New Hampshire 03820-2830  
1-800-772-0151



Franklin Community  
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