

Patient Rights Brochure

Family Health Care

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Patient Rights

Roane County Family Health Care, Inc. adopts and affirms as policy the following rights of patients and clients who receive services from Family Health Care employees and health care providers.

This policy affords you, the patient/client, the right to:

1. Considerate and respectful care.
2. Receive, upon request, the name of the person providing your care.
3. Know the name and function of any person providing services to you.
4. Obtain from the person responsible for your health care, complete and current information concerning your diagnosis, treatment, and expected outlook in terms you can be reasonably expected to understand. When it is not medically advisable to give such information to you, the information shall be made available to an appropriate person on your behalf.
5. Receive information necessary to give informed consent prior to the start of any procedure and/or treatment, except for emergency situations. This information shall include as a minimum: an explanation of the specific procedure of treatment itself; its value and significant risks, and an explanation of other possible treatment methods, if any.
6. Refuse treatment and to be informed of the medical or other consequences of your action.
7. Privacy to the extent consistent with adequate medical care. Care discussions, consultation, examination, and treatment are confidential and should be conducted with adequate discretion.
8. Privacy and confidentiality of all records pertaining to your treatment, except as otherwise provided by law or third party payment contract.
9. A reasonable response to your request for services customarily rendered at the facility, and consistent with your treatment.
10. Expect reasonable continuity of care and to be informed, by the person responsible for your health care, of possible continuing health care requirements, if any.
11. The identity, upon request, of all health care personnel and health care institutions authorized to assist in your treatment.
12. Refuse to participate in research and human experimentation affecting care or treatment.
13. Upon request, examine and receive an itemized explanation of your bill, regardless of source of payment.
14. Know the facility's rules and regulations that apply to your conduct as a patient.
15. Treatment without discrimination as to race, color, creed, religion, sex, national origin, source of payment, sexual orientation, political belief or handicap.

16. The right and responsibility to fully participate in all decisions related to their health care. Consumers who are unable to fully participate in treatment decisions have the right to be represented by parents, guardians, family members, or other conservators.
17. A fair and efficient process for resolving differences with their health plans, health care providers, and the institutions that serve them, including a rigorous system of internal review and an independent system of external review.
18. Communicate with health care providers in confidence and to have the confidentiality of their individually identifiable health care information protected.
19. Review and copy your own medical records and request amendments to your records.
20. Provision of a procedure for resolving patient complaints and grievance. The process is for initial complaints to be addressed by the Medical Director; if the issue is not resolved the matter will be presented to and addressed by the Executive Director. If the complaint remains unresolved, the issue will be added as an agenda item to a regular scheduled meeting of the Board of Directors. The decision Board of Directors will be final.

In order to ensure this right:

- Individually identifiable health care information can be used without written consent for health purposes only, including the provision of health care, payments for services, peer review, and quality assurance.
- In addition, disclosure of individually identifiable health care information without written consent should be permitted in very limited circumstances only where there is a clear legal basis for doing so. Such reasons include: medical or health care research for which an institutional review board has determined anonymous records will not suffice, investigation of health care fraud, and public health reporting.
- To the maximum feasible extent in all situations, non-identifiable health care information should be used unless the individual has consented to the disclosure of individually identifiable information. When disclosure is required, no greater amount of information should be disclosed than is necessary to achieve the specific purpose of the disclosure.

Patient Responsibilities

As a patient of Family Health Care, you assume some responsibility for your care. Among the responsibilities that you assume as a patient are the following:

1. Use the health plan's internal complaint and appeal processes to address concerns that may arise.
2. Work collaboratively with health care providers in developing and carrying out agreed upon treatment plans.
3. Keep appointments.
4. Become involved in specific health care decisions and follow treatment plan.
5. Assume responsibility if treatment is refused.
6. Assume responsibility for following facility rules and regulations regarding patient care and conduct.
7. Consideration of the rights of other patients and staff.
8. Assume responsibility for respecting other's property.
9. Conduct self in a respectful manner while on premises.
10. Disclose relevant information (past illnesses, hospitalizations, medications, treatment, and any change in conditions or adverse reactions) and clearly communicate wants and needs.
11. Pay for services rendered by facility.

Patient Complaint*

A complaint is usually issued because of some degree of dissatisfaction. It may be due to a misunderstanding, poor communication, perception of lack of proper care or that the delivery of services is less than expected.

At Family Health Care, we appreciate your willingness to express a concern. In fact, we would like to know about it at the time of the incident or as soon thereafter as possible.

If you are unhappy with your service or care, please make your nurse or the department manager aware.

If you need additional assistance in this matter, you may complete a "Patient Grievance" form. This form can be obtained at the front desk in our lobby.

***Presentation of a complaint does not compromise a patient's future access to care.**