



## **Patient's Bill of Rights**

*As a patient enrolled in a program offered by Hospice of the Piedmont, you have the right to:*

- Be informed of your rights and responsibilities in a language and manner that you and/or your representative understands.
- Be cared for by a team of professionals who will provide high quality comprehensive hospice services as needed and appropriate for you and your family in keeping with your goals and without discrimination.
- Be fully informed orally and in writing in advance of services being delivered, about the services/care to be provided including eligibility requirements, the disciplines that furnish care, the anticipated frequency of visits, service charges and anticipated payment from third parties, and any payment responsibility you may have.
- Receive appropriate and compassionate care with a focus on pain management and symptom control in accordance with physician orders and to be informed of anticipated outcomes of care and any barriers to outcome achievement.
- Accept or refuse services or treatments with expected consequences of decisions fully presented.
- Participate in the development and periodic revisions to your service/care plan.
- Be informed in advance of any modifications to the service/care plan (including anticipated discharge from program services).
- Have your property and person be treated with respect, consideration and recognition of your dignity and individuality, cultures, values and beliefs.
- Receive information on advance directives including a living will and healthcare surrogate and complete an advance directive as appropriate to your personal wishes and without fear of reprisal or discrimination.
- Choose your own attending physician.
- Have a confidential medical record and be advised of agency policies regarding disclosure of clinical records.
- Be free from mistreatment, neglect, or verbal, mental, sexual and physical abuse including injuries of unknown source, and misappropriation of patient property.
- Voice grievances/complaints regarding treatment/care, lack of respect of property or recommend changes in policy, staff, or service/care without restraint, interference, coercion, discrimination or reprisal.
- Have grievances/complaints promptly (within 72 hours) investigated.
- Be informed of any provider service/care limitations and of any financial benefits or formal business relationships that Hospice of the Piedmont has with organizations to which we might refer you.
- Be able to identify visiting staff members through proper identification—a photo ID badge with Hospice of the Piedmont logo.
- Have a clear understanding of how to access services from Hospice of the Piedmont during normal business hours and through on-call service for other times.

**If you have any questions or concerns about your rights, concerns/complaints about care/treatment or need to voice other concerns, please discuss with your hospice team or call the Director of Clinical Services (336-889-8446).** If you still have concerns, you have the right to contact the North Carolina Department of Health Services Regulations by phone (919) 855-3750 or through their website at <http://ncdhhs.gov/dhsr>. You may also contact them through their Complaint Intake Unit at 1-800-624-3004 or (919) 855-4500. These offices are open from 8 a.m. to 5 p.m., Monday through Friday. You may also report a concern to our accrediting organization, The Accreditation Commission for Health Care, Inc. at (919) 785-1214.

***As a patient, you have the responsibility to:***

- Participate in developing your plan of care and updating it as your condition or needs change.
- Provide Hospice with accurate and complete health information and notify Hospice of any changes in your condition.
- Remain under a doctor's care while receiving Hospice services.
- Assist Hospice staff in developing and maintaining a safe environment in which your care can be provided.
- Advise Hospice of any problems or dissatisfaction with the service provided or if instructions are not fully understood or cannot be followed.
- Inform Hospice of the existence of and/or any changes made to Advance Directives.
- Provide accurate insurance information and apply in a timely manner for all resources that may be available to you to cover Hospice charges.
- Be considerate and respectful of the rights of other patients and staff.

*Your signature on the Hospice of the Piedmont consent form indicates that you have received and understand this full Bill of Rights.*