Patient Rights & Responsibilities

Saint Alphonsus honors the sacredness and dignity of every person by informing you of your rights and responsibilities.

Please do not hesitate to ask questions or seek clarification from a staff member.
Saint Alphonsus promotes and supports your rights as a patient to:

- Receive information in a manner that is understandable

- **Saint Alphonsus provides free aids and services to patients to allow you to communicate effectively with us, such as:**
  - Qualified interpreters, including sign language interpreters
  - Information written in other languages
  - Written information in other formats such as large print, audio, accessible electronic and other formats

  If you need these services, please contact our Community Services Coordinator at 1 (866) 727-6248 | TTY 1 (844) 801-7932
  Bo-CommunityServices@saintalphonsus.org

- Have a family member or representative and your care provider notified upon your admission to the hospital.

- Be notified of your rights in advance of starting or discontinuing your care whenever possible.

- Have the presence of a support individual of your choice, unless the individual's presence infringes on others’ rights, safety, or is counter to recommendations regarding your care. Your support individual may or may not be your representative.

- Know the names and roles of your caregivers.

- Be informed about Saint Alphonsus’ policies and rules that apply to your conduct.
• Enjoy full and equal right to visitors consistent with your preferences. Saint Alphonsus will not restrict, limit, or otherwise deny visitors access on the basis of race; color; national origin including ethnicity, culture, or language; religion; physical or mental disability; socioeconomic status; or sex, including sexual orientation, gender identity or gender expression. You have the right to decline visitors at any time during your stay.

You have the right to receive visitors whom you designate, including but not limited to, your spouse or partner (including same-sex partner), a family member, or a friend. You also have the right to have a support individual exercise your visitation rights on your behalf. Visiting is encouraged between 6am and 10pm to provide an opportunity for family and friends to visit and support you while also promoting optimal rest and healing. Children under 14 years old must be accompanied by an adult visitor.

Providing you safe, high-quality care is our top priority. Therefore, Saint Alphonsus may limit visitors when their presence presents an impediment to your care or the care of other patients. Bedside visitation is limited during changes of shift to optimize hand-off communication between caregivers. Additional circumstances in which Saint Alphonsus may restrict or otherwise deny visitation include, but are not limited to, circumstances in which: there is a court order restricting contact; your visitor engages in disruptive, threatening or violent behavior; you or your roommate needs rest, privacy or care interventions; or there exists an infection control concern.
You have the right to receive considerate and respectful care in a safe setting, including the rights to:

- Receive respect for your personal values and beliefs.
- Have access to religious and other spiritual services.
- Be free from any form of restraint or seclusion imposed as a means of coercion, discipline, convenience, or retaliation by staff. Restraint or seclusion may only be used to ensure your immediate physical safety or the safety of a staff member or others, and may only be used when less restrictive interventions have been determined to be ineffective. When restraint or seclusion is used, it must be discontinued at the earliest possible time.
- Be free from all forms of abuse, neglect and harassment.
- Receive considerate and respectful care without discrimination on the basis of age, race, color, national origin (including ethnicity, culture, or language), religion, physical or mental disability, socioeconomic status, or sex (including sexual orientation, gender identity, or gender expression).
- Receive a medical screening examination and stabilizing treatment for an emergency medical condition, regardless of your ability to pay.
- Receive care that protects your personal privacy. Saint Alphonsus may use a remote video monitoring device to observe you when needed to ensure your safety. The remote video monitoring device does not record audio or video.
- Have your health information protected as specified in the Notice of Privacy Practices and directed by the Health Insurance Portability and Accountability Act of 1996.
- Receive, upon request, an explanation of your bill, regardless of the source(s) of payment(s).
You have the right to make informed decisions regarding your care, including the rights to:

- Receive complete information about your diagnosis and state of health.
- Participate in your plan of care, discussing and working together with your provider to make decisions regarding your treatment.
- Formulate and provide Advance Directives and to have Saint Alphonsus’ staff and practitioners comply with your stated wishes.
- Request or refuse treatment to the extent permitted by law.
- Have your pain assessed and to be involved in decisions about pain management.
- Be informed of the need for a transfer and the alternatives to transfer, prior to your transfer to another health care facility.
- Accept or decline to take part in research.
- Be told about reasonable care choices when hospital care is no longer appropriate.
- Access information in your medical record, unless restricted by law, within a reasonable timeframe. Upon your request, other designated individuals may also access your medical record.
- Receive a discharge planning evaluation.
Saint Alphonsus recognizes your responsibilities as a patient to be an active member in the planning, creation and review of your plan of care, including:

- Making informed decisions regarding your care, health status, diagnosis, prognosis and your right to request and refuse treatment (i.e., informed consent).

- Asking your care team questions if you do not understand the care plan.

- Providing accurate and complete information regarding your health history, current medications and past admissions/treatment.

- Informing your care team of the name of your durable power of attorney for healthcare (Idaho)/appointment of healthcare representative (Oregon) if you have selected one, and bringing a copy of any Advance Directives.

- Following your healthcare team’s instructions and making a concerted effort to follow recommended health care guidelines that support your health status.

- Following Saint Alphonsus’ rules for patient care and conduct, including “no smoking” policy and protection of your personal property. Please leave your valuables at home.

- Treating others respectfully regardless of age, race, color, national origin (including ethnicity, culture, or language), religion, physical or mental disability, socioeconomic status, or sex (including sexual orientation, gender identity, or gender expression).

- Discussing with your health care team or your representative if you feel your rights have not been respected.

- Providing Saint Alphonsus with accurate information about your sources of payment and ability to pay your bill, including health insurance coverage. Saint Alphonsus can make no guarantee concerning third party reimbursement for your care; any charges that are not reimbursed will be your responsibility.

- Informing Saint Alphonsus of any financial hardship so you can receive information about financial assistance.
You have the right to file a grievance if you feel Saint Alphonsus has not respected your rights or you have other concerns about your care.

If you have concerns about your care, we encourage you to share them with your care team so we can quickly resolve the issue.

If you are not satisfied with the response to your concerns or if you are uncomfortable raising your concerns to the care team, please contact Saint Alphonsus’ Patient Relations Coordinator:

Saint Alphonsus Health System  
Attn: Patient Relations Coordinator  
1055 N. Curtis Rd., Boise, ID 83706  
Phone: (208) 367-6226 | Fax: (208) 367-8181  
Email: BO-PatientRelations@saintalphonsus.org

You may also independently report any concerns about your care to the applicable State agency or The Joint Commission:

**Idaho:**
Idaho Department of Health & Welfare  
Bureau of Facility Standards  
P.O. Box 83720  
Boise, ID 83720-0009  
Phone: (208) 334-6626, ext. 4

**Oregon:**
Oregon Health Authority  
Health Care Regulation & Quality Improvement  
P.O. Box 14450  
Portland, OR 97293  
Phone: (971) 673-0540, ext. 2

**The Joint Commission:**
Office of Quality and Patient Safety  
One Renaissance Blvd.  
Oakbrook Terrace, IL 60181  
Fax: (630) 792-5636  
Web: www.jointcommission.org

If you have concerns about discrimination, you may also report your concerns to the U.S. Department of Health & Human Services, Office of Civil Rights:

**U.S. Department of Health & Human Services**
200 Independence Ave., SW  
Room 509F, HHH Building  
Washington, DC 20201  
Web: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf  
Phone: 1 (800) 368-1019 | TTY 1 (800) 537-7697
Non-Discrimination Policy

Arabic

ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات الترجمة اللغوية تتوقف عند الجسر.
العنوان بالاسماء: 1-866-727-6248  1-864-801-9732

Nepali

मुख्यमणि: यदि आप स्नेही भाषा बोलते हैं तो तब आपको पहंची प्रतियोगिता तरीका से स्नेही
भाषा सहयोग नहीं है। जंग में गतिविधियों
1-866-727-6248 बिनंबः 1-844-801-7932 ।

Burmese

အကြောင်း အသံ: နိုင်ငံစာကြောင်းစာမျက်နှာပေး
စာရင်းမှ 1-866-727-6248  TTY: 1-844-801-7932  စာရင်းပေးနေသည်

Chinese

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。
電話：1-866-727-6248  TTY：1-844-801-7932。

Farsi

توجه: اگر سر زبان فارسی گوییدم، خدمات ارائه گذاری به شما برای رایگان سازی می‌شود.
نام پیامگیری: 826-727-6881  108-1-2097-826-727-6881

French

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.

Japanese

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。
1-866-727-6248  TTY: 1-844-801-7932 まで、お電話にてご連絡ください。

Karen

NICHE THO NDOUMA: Bu aawuug aikiuri, uzoabawa serisiz gusu a
ku ndimi, ku buntu. Wotereonta 1-866-727-6248
TTY: 1-844-801-7932.

Kirundi

ICITONDÉERWA: Nimba uvuga kirundi, uzoabawa serivisi zo
ku ndimi, ku buntu. Wotereonta 1-866-727-6248
TTY: 1-844-801-7932.

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

Serbo-Croatian

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke
pomoci dostupne su vam besplatno. Nazovite 1-866-727-6248
TTY– Telefon za osobe sa oštećenim govorom ili sluhom;
1-844-801-7932.

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ
miễn phí dành cho bạn.

Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios
gratuitos de asistencia lingüística. Llame al 1-866-727-6248
TTY: 1-844-801-7932.

Swahili

KUMBUKA: Ikiwa unzungumza Kiswahili, unaweza kupata,
kuuduma za lugha, bila malipo. Piga simu 1-866-727-6248
TTY: 1-844-801-7932.

Urdú

جاہزیات: اگر اوّل بمبیالیکی میں بولتے ہوئے، تو اپنے کردار بسے چنی چانگی پھیلائی جائیں، میں
1-866-727-6248  1-844-801-7932.