



Patient Name: _____

Patient/Family Bill of Rights and Responsibilities

LifeCare Hospice, a non-profit agency, guarantees patients and families the right to:

- exercise one's rights as a patient of LifeCare Hospice without discrimination or reprisal
- receive information about the services covered under the Medicare hospice benefit
- be informed of the hospice philosophy and concepts of care, admission criteria, services to be provided, specific limitations to services and other options of care that are available and to have that information communicated in an easily understood manner
- be fully informed in advance about care/services to be provided, including the disciplines that furnish care and the frequency of visits, as well as any modifications in the plan of care
- receive information, both verbally and in writing, about available services, limitations of services, and charges not covered by Medicare, Medicaid or private insurance
- participate in the development and periodic revisions of the plan of care
- be free from mistreatment, neglect or verbal, mental, sexual and physical abuse, including injuries of unknown source, and misappropriation of patient property
- communicate concerns, fears, and needs to sensitive and supportive staff; to voice grievances/complaints regarding treatment or care that is (or fails to be) furnished and lack of respect of property by anyone who is furnishing care/service on behalf of LifeCare Hospice and to have these investigated
- recommend changes in policies and procedures, personnel or care/service
- expect confidentiality, privacy, and security in all matters and be advised on agency's policies and procedures regarding the disclosure of clinical records
- accept or refuse treatment and receive information on possible consequences of such actions
- refuse service or withdraw from the program at any time
- be informed about the ways to prepare advance directives such as a Do Not Resuscitate form, a Living Will, and/the Durable Power of Attorney for Health Care
- receive quality care including effective pain management and symptom control for conditions related to the terminal illness. Care is provided regardless of race, religion, color, sex, national origin, ancestry, age, disability, veteran status, diagnosis, or ability to pay
- have personal property and person treated with respect, consideration, and recognition of patient dignity and individuality
- have staff properly identified at all times
- choose a healthcare provider, including choosing an attending physician
- receive individualized care that is respectful of patient and family values from a reliable, qualified, and well-trained Interdisciplinary Team
- be given information regarding anticipated change in healthcare providers and/or termination of hospice care services, and to be informed of any financial benefit when referred to a hospice
- be fully informed of one's responsibilities
- be informed on anticipated outcomes of care and of any barriers in outcome achievement
- receive honest answers to questions regarding health status, treatment, and condition

Issues may be discussed with the Registered Nurse, the Social Worker or the Compliance Coordinator by calling (330) 264-4899 or 1-(800)-884-6547. All concerns will be investigated and documented by the Compliance Coordinator. If a complaint is not handled adequately by LifeCare Hospice, a consumer hotline is available through The Accreditation Commission for Health Care who may be contacted at 1-(919) 785- 1214 or www.achc.org In addition the Ohio Department of Health hotline for health facility complaints and questions, including concerns regarding the implementation of Advance Directives, may be contacted at 1-(800)-342-0553 Monday – Friday 8am-5pm, or the Medicare Quality Improvement Organization at 1-(800)-589-7337 seven days a week 8am-4:30pm.

For concerns about a nursing home, the Long-Term Care Ombudsman program may be contacted 1-(800)-282-1206.

LifeCare Hospice patients and family members have the responsibility to:

- provide accurate information and to promptly report changes in the patient’s physical condition to hospice staff.
- provide for the care-giving needs of the patient. LifeCare Hospice will work to support patient and caregivers, but cannot assume responsibility for care-giving.
- maintain a safe environment for the patient and hospice staff.
- be cooperative and respectful of all hospice staff.
- participate in the development and updating of the hospice plan of care, and to abide by the plan of care.
- contact LifeCare Hospice promptly when the patient is not going to be available for a scheduled visit, when the patient experiences problems with pain and/or symptom control, or before care is initiated that is not authorized in the plan of care.
- request further information regarding concerns and problems that are not understood clearly.

My signature states that I have received and understand the Patient/Family Rights and Responsibilities outlined above.

Signature of Patient/Authorized Representative Date _____

Signature of LifeCare Hospice Representative Date _____