



<b>PATIENT RIGHTS POLICY</b>	WS-ADMIN-9.113
Administration	Effective Date: June 2025

**SCOPE AND PURPOSE** *The document is applicable to the people and processes of the following Penn State Health components specified below:*

<input type="checkbox"/>	Penn State Health Shared Services	<input type="checkbox"/>	Penn State College of Medicine
<input type="checkbox"/>	Milton S. Hershey Medical Center	<input type="checkbox"/>	Milton S. Hershey Medical Center - Academic Practice
<input type="checkbox"/>	St. Joseph Medical Center	<input type="checkbox"/>	Medical Group - Community Practice Division
<input checked="" type="checkbox"/>	Holy Spirit Medical Center	<input type="checkbox"/>	Penn State Health Life Lion, LLC
<input checked="" type="checkbox"/>	Hampden Medical Center	<input type="checkbox"/>	Pennsylvania Psychiatric Institute
<input type="checkbox"/>	Lancaster Medical Center		

At Penn State Health Hampden Medical Center and Penn State Health Holy Spirit Medical Center, herein after referred to as “hospitals”, our goal is to provide excellent health care to every patient. Our patients have the rights and responsibilities referenced in this policy regardless of patient age, ancestry, color, culture, disability (physical or intellectual), ethnicity, gender, gender identity or expression, genetic information, language, military/veteran status, national origin, race, religious creed, sexual orientation and preference, AIDS or HIV status, union membership, socioeconomic status, or source of payment for your care.

The hospitals’ board of directors, administration, providers, and staff respect and address the rights of all patients to treatment, care, and services within the hospital's mission, and in compliance with applicable federal and state laws and regulations. Patients are informed of their rights and responsibilities as early as possible upon arrival.

The patient Welcome Guide, distributed upon admission, includes a copy of the Patient Rights and Responsibilities brochure. For outpatients, copies of the Patient Rights and Responsibilities brochure are available in waiting areas and/or upon request. If a patient is unable to exercise his/her rights, these rights then become applicable to their designated/legal representative.

This policy discusses patient rights and patient responsibilities as required by the PA Department of Health, the Centers for Medicare and Medicaid Services, and The Joint Commission. Specific processes and procedures related to patient rights can be found in additional hospital policies including but not limited to those referenced in this document.

**STAFF AFFECTED**

All Penn State Health Hampden Medical Center and Penn State Health Holy Spirit Medical Center staff

**POLICY AND PROCEDURE STATEMENTS**

## **PATIENT RIGHTS:**

**All patients have the right to the following:**

### **Access**

The right to receive care without discrimination due to age, ancestry, color, culture, disability (physical or intellectual), ethnicity, gender, gender identity or expression, genetic information, language, military/veteran status, national origin, race, religious creed, sexual orientation and preference, gender identity/expression, AIDS or HIV status, union membership, socioeconomic status, or source of payment for the patient's care.

### **Respect and Dignity**

The right to considerate, respectful care given by competent personnel, optimizes the patient's comfort and dignity while contributing to a positive patient self-image.

### **Communication**

The right to:

1. Be informed of Patient Rights and Responsibilities at the earliest possible time of the patient's hospitalization in a manner and form that the patient understands.
2. The right to know what hospital rules and regulations apply to patient conduct.
3. Know the name of the provider who has primary responsibility for the patient's care, and the identity and function of all individuals providing their care, treatment, and services.
4. Be communicated in a manner that is clear, concise, and understandable.  
The information provided will be appropriate to the age and cognition of the patient.
5. Be provided with a qualified interpreter free of charge; either in person or on the phone as deemed appropriate if the patient has limited English proficiency.
6. Be provided with a certified Deaf and Hard of Hearing interpreter for patients with speech, hearing, and/or cognitive impairments.
7. Be informed about unanticipated outcomes of care, treatment, and services that relate to sentinel events considered reviewable by The Joint Commission. The provider responsible for the patient's care, or the patient's designee, informs the patient about the unanticipated outcome when the patient is not already aware of the occurrence or when further discussion is needed.
8. Have a family member, care partner, or physician of the patient's choice notified promptly of the patient's admission to the hospital.
9. Have assistance in accessing and designating a care partner or agency to act as needed to assert and protect the patient's rights.
10. Delegate decision-making to a specific person/s. The hospital will respect the patient's wishes to the maximum extent practicable and the degree permitted by law.
11. Designate a lay caregiver, who is a person chosen by the patient to receive health information about the patient due to their unique role as the patient's primary caregiver if the patient is discharged home.

When a patient is unable to make decisions about care, treatment, and services, a surrogate decision-maker will be involved in making those decisions. This includes the surrogate decision maker's right to refuse care, treatment, and services on the patient's behalf, following law and regulation.

### **Quality Care Delivery**

The right to:

1. Receive care in a safe and secure environment which incorporates current standards of practice for patient environmental safety, infection control, and security.
2. Expect good management techniques to be implemented to effectively use the patient's time and avoid the personal discomfort of the patient.
3. Receive high-quality care based on professional standards that are continually maintained and reviewed.
4. Expect emergency procedures to be implemented without unnecessary delay.
5. Be free from all forms of mental, physical, sexual, and verbal abuse, neglect, and exploitation.
6. Receive care, free from restraints or seclusion, unless it is necessary to provide medical, surgical, or behavioral healthcare.

### **Participation in Care**

The right to:

1. Participate with the providers in the development, implementation, and revision of the patient plan of care—both inpatient and outpatient, including the discharge plan and pain management plan.
2. Receive information about current health status, care needs, outcomes, recovery, ongoing healthcare needs, and future health status.
3. Be informed about proposed care options including the risks and benefits, other care options, what could happen without care, and the expected outcome(s) of any medical care provided, including any outcomes that were not expected.
4. Be involved in all aspects of care and take part in decisions about care.
5. Request care. This right does not mean the patient can demand care or services that are not medically needed.
6. Participate in the consideration of ethical issues surrounding his/her care.
7. Receive information upon discharge of continuing healthcare requirements and follow-up care, the plans for meeting them, as well as participate in decisions about the ongoing plan of care. The patient has the right to choose from available Medicare or other payors participating providers such as hospice agencies, home health agencies, rehabilitation hospitals, and nursing homes.
8. Receive a prompt and safe transfer to the care of others when the hospitals are not able to meet the patient's request or need for care or service. Patients have the right to know why a transfer to another health care facility might be required, as well as to learn about other options for care. The hospital cannot transfer someone to another hospital unless that hospital has agreed to accept the patient.
9. Receive assistance to obtain a consultation with another provider at the patient's request and own expense.

## **Pain Management**

The right to appropriate assessment, management, and relief of pain, including providing feedback on pain control.

## **Consent**

The right to:

1. Give informed consent. Except for in cases of emergencies, the provider must obtain the necessary informed consent before the start of any procedure or treatment or both. This information shall include the name of the person performing the procedure or treatment, a description of the procedure or treatment, the medically significant risks involved, alternate courses of treatment or non-treatment, and the risks involved in each.
2. Refuse any care, therapy, drug, treatment, or procedure that a provider is recommending. The provider will discuss the medical consequences of such refusal. There are times when care must be provided by law or regulation.
3. Give consent before the start of any experimental, research, donor program, or educational activities in which the patient may be asked to participate. The patient or the patient's legal representative may, at any time, refuse to continue in any such study/program to which informed consent has previously been given. Refusal to participate or discontinuation of participation will not compromise the patient's right to access care, treatment, or services.
4. Give consent for hospital providers and/or staff to take photos, make recordings, or film patients if the purpose is for something other than patient identification, care, diagnosis, or treatment.

## **Advance Directive**

The right to:

1. Formulate an advance directive, revise an existing advance directive, or appoint a surrogate to make healthcare decisions on the patient's behalf. These decisions will be honored within the limits of the law and the hospital's mission. The patient is not required to have or complete an advance directive to receive healthcare.
2. Be provided with assistance in developing or revising an advance directive.
3. Make decisions regarding the withholding of resuscitative services or the foregoing or withdrawing of life-sustaining treatment within the limits of the law, regulation, and the hospitals' policies.
4. The right to make decisions concerning organ donation. The hospitals will honor the patient's wishes within the limits of the hospitals' capability and following law and regulation.

## **Privacy**

The right to:

1. Be interviewed, examined, treated, and have care discussed in places designed to protect privacy.
2. Expect all communications and records related to care to be treated as confidential except as otherwise provided by law or third-party contractual arrangements.
3. Receive written notice that explains how personal health information will be used and

- shared with other health care professionals involved in the patient's care.
4. Request an accounting of circumstances in which information about the patient has been disclosed or reported due to law or regulation.
  5. Limit who can receive information about the patient, including demographic information, the patient's presence or location in the clinical area, or information about the patient's medical condition.

### **Visitation**

The right to:

1. Make decisions regarding visitors and designate who can visit Penn State Health Holy Spirit and Hampden Medical Centers. The hospitals will not discriminate against visitors based on race, color, religion, ethnicity, age, sex, sexual orientation, gender identity or expression, national origin, culture, physical or mental disability, language, genetic information, source of payment, or socioeconomic status.
2. Visitors do not need to be legally related to the patient.
3. Designate a care partner who may determine who can visit if the patient becomes unable to make their own decisions.

### **Medical Record**

The right to:

1. Access all information contained in the patient's medical record other than psychotherapy notes, unless access is restricted by the attending provider for medical reasons.
2. Request a copy of the patient's medical record (note: there may be a fee for the copying of the medical record). If the patient feels that the information is incorrect, they may request that the information be amended. The hospitals may deny the request to amend information under certain specific circumstances as permitted by law.

### **Financial Charges**

The right to:

1. Examine and receive a detailed explanation of the patient's bill.
2. Full information and counseling on the availability of known financial resources to help the patient in payment of healthcare bills.

### **Complaint/Grievance**

The right to:

1. Receive information about how to get assistance with concerns, problems, or complaints about the quality of care and services you receive, and initiate a formal grievance process with the hospitals, or state regulatory agencies without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care, treatment or services.
2. Speak to providers directly involved in your care. If the issue is not resolved to the patient's satisfaction, or if they would like the help of someone not immediately involved, the Patient Relations staff is available to help resolve the problem by calling:

- a. Holy Spirit (717)-763-3082
- b. Hampden (717)-981-8134
- c. For PA Department of Health or Civil Rights complaints/grievances directly to:

The Pennsylvania Department of Health  
Division of Acute & Ambulatory Care Room 532  
Health & Welfare Building  
625 Forster Street  
Harrisburg, PA 17120-0701  
Phone: (717) 783-8980  
Fax: (717) 705-6663  
Complaint Hotline: 1-800-254-5164  
<http://apps.health.pa.gov/dohforms/FacilityComplaint.aspx>

The Joint Commission, a hospital accreditation organization:  
The Office of Quality and Patient Safety (OQPS)  
The Joint Commission  
One Renaissance Boulevard  
Oakbrook Terrace, IL 60181  
Patient Safety Event Phone Line: 1 800-994-6610  
Email: [www.jointcommission.org](http://www.jointcommission.org), using the “Report a Patient Safety Event” link in the “Action Center” on the home page of the website.  
Fax: 1 630-792-5636

**Or**

Patients enrolled in Medicare or Medicare insurance products may contact Livanta, at 1 866-815-5440

## **PATIENT RESPONSIBILITIES**

The following patient responsibilities are presented to the patient and family in the spirit of mutual trust and respect.

### **Demonstrate Respect and Consideration**

Patients, as well as their family member(s), care partner(s), and visitors, are expected to recognize and respect the rights of our other patients, visitors, and staff. Threats, violence, disrespectful communication, or harassment of other patients or any medical center staff member, for any reason, including because of an individual's age, ancestry, color, culture, disability (physical or intellectual), ethnicity, gender, gender identity or expression, genetic information, language, military/veteran status, national origin, race, religion, sexual orientation, or another aspect of difference will not be tolerated. This prohibition applies to the patient as well as their family member(s), care partner(s), and visitors.

In addition, requests for changes of provider or other medical staff based on that individual's race, ethnicity, religion, sexual orientation, or gender identity will not be honored. Requests for provider or medical staff changes based on gender will be considered on a case-by-case basis and only based on extenuating circumstances.

Patients and their family member(s), care partner(s), and visitors are expected to respect the property of other persons and that of Penn State Health Holy Spirit and Hampden Medical Centers.

### **Provision of Information**

The patient, their family member(s), and care partner(s) must provide, to the best of their knowledge, accurate and complete information about:

1. Present complaints, past illnesses, hospitalizations, medications, advance directives, and other matters relating to the patient's health.
2. Report perceived risks in the patient's care
3. Report any unexpected changes in the patient's condition.
4. Report any condition that puts you at risk (for example, allergies or hearing problems).
5. Provide a copy of the patient's Advance Directive, Living Will, and Durable Power of Attorney for health care, and any organ/tissue donation permissions to the health care team taking care of the patient.

### **Asking Questions**

The patient, their family member(s), and care partner(s) must ask questions when they do not understand their care, treatment, and service or what they are expected to do. The patients and families are responsible for reporting whether they comprehend a contemplated course of action.

### **Refusing or Not Following Care Instructions**

The patient, their family member(s), and care partner(s) are responsible for the patient's healthcare outcomes if they refuse care or do not follow the care, treatment, and service plan.

### **Cooperate with Care Plans**

The patient, their family member(s), and care partner(s) are expected to follow the care plans suggested by the health care team caring for them while in the hospital. The patient, their family member(s), and care partner(s) should work with the health care team to develop a plan that the patient will be able to follow while in the hospital and after hospital discharge.

### **Following Penn State Health Holy Spirit and Hampden Medical Centers Rules and Regulations**

1. The patient, their family member(s), and care partner(s) must follow the hospital's rules and regulations affecting the patient care and conduct.
2. Patients are expected not to take drugs that have not been prescribed by their provider and administered by hospital staff. In addition, it is expected that patients will not complicate or endanger the healing process by consuming alcoholic beverages or toxic substances during their stay.

### **Following Safety Policies**

Patients and their families or visitors are expected to:

1. Observe the no-smoking policy of the organization.
2. To prevent accidental fire due to ignition of a patient's administered oxygen therapy, do not bring any smoking materials (cigarettes/tobacco in any form, electronic cigarettes ["Vaping"], matches, lighters, battery recharger for electronic cigarettes,) into a patient's room.
3. Refrain from conducting any illegal activity on the hospital's property. If such activity

- occurs, it will be reported to the police.
4. Refrain from recording your experiences in the hospital without the consent of everyone involved including Medical Center physicians, nurses, and other staff. Please note that unauthorized recording violates Pennsylvania state law.
  5. Refrain from bringing any weapons onto property

### **Paying for Care**

The patient is responsible for:

1. Assuming financial responsibility of payment for all services rendered through third-party payors (insurance companies), as applicable,
2. Being personally responsible for payment of any services that are not covered by his/her insurance.
3. If payment of the patient's medical bill is a concern, the hospital may be able to assist the patient. Financial assistance is based on income, family size, and assets for medically necessary and emergent services. Patients who are eligible for financial assistance will not be charged more than the amounts generally billed to patients with insurance.

Patient Financial Services Staff for Penn State Health, located at:  
Penn State Health Milton S. Hershey Medical  
Center Academic Support Building  
90 Hope Drive, 2nd floor,  
Suite 2106 Hershey, PA17033  
Phone: 717-531-5069 or 1-800-254-2619.

Visit the website, <https://www.pennstatehealth.org/patients-visitors/billing-medical-records/financial-assistance>, to access our Financial Assistance Policy and financial assistance applications. Documents are translated into various languages and are available on the website or in person.

### **RELATED DOCUMENTS AND REFERENCES**

1. CMS Conditions of Participation, State Operations Manual Appendix A (Revision 176, 12-29-17)
2. PA Hospital Regulations  
<https://www.health.pa.gov/topics/facilities/hospitals/Pages/Regulations.aspx>
3. Joint Commission. (2024) Rights and Responsibilities of the Individuals. Retrieved from <https://e-dition.jcrinc.com/Frame.aspx>
4. Holy Spirit and Hampden Medical Center Policies:
  - a. WS-ADMIN-9.02 Resolution of Patient Complaints and Grievances
  - b. WS-RPS-008 Informed Consent
  - c. WS-ADMIN-9.00.02 Interpreter Policy for Deaf/Hard of Hearing and Non-English-Speaking Patients
  - d. WS-ADMIN-104 Advance Directives
  - e. PSH-ADM-121 Patient Visitation System policy
  - f. WS-NURS-10.607 Restraint/Seclusion policy

### **APPROVALS**

Approved:	L. Williamson, West Shore Region Chief Operating Officer and Chief Nursing Officer, RN, DNP, MSN, MPH, NEA-BC, FACHE; Dr. J. Bret DeLone, MC, Holy Spirit Medical Center Vice President Medical Affairs; Dr. J. Leaming, MD, MBA, FACEP, FAAEM, CPE, Hampden Medical Center Vice President Medical Affairs;
Approved:	G. Ramsey, Regional Director of Patient Experience

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