



Patient Rights

Mountain View Hospital adopts and affirms the following rights of patients/clients who receive services from our facilities.

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

- Know that if for any reason you are concerned with your patient care, you can contact any employee and ask for assistance or call our Compliance Hotline at (208) 542-7122 or by mail at 2325 , Idaho Falls, ID 83404. Concerns and grievances are handled by our Compliance Department and Ned Hillyard, Chief Compliance Officer.
- To receive treatment without discrimination as to age, race, ethnicity, color, religion, culture, language, sex, physical or mental disability, socioeconomic status, sexual orientation, gender identity or political belief. It is our intention to treat each patient as a unique individual in a manner that recognizes their basic human rights.
- To be considerate, dignified and respectful of cultural, psychosocial, spiritual and personal values, beliefs and preferences. To assure these preferences are identified and communicated to staff, a discussion of these issues shall be included during the initial nursing admission assessment.
- To expect to be cared for in a safe setting regarding patient environment, infection control, and security free from all forms of abuse, neglect, harassment, and/or exploitation.
- To know the name of the physician who has primary responsibility for coordinating his/her care and the names and professional relationships of other physicians and healthcare providers who will see him/her.
- To obtain from the person responsible for his/her health care complete and current information concerning the diagnosis, treatment, and expected outlook in terms that can be reasonably expected to understand, When it is not medically advisable to give such information, the information shall be made available to an appropriate person on the patients behalf.
- To receive the 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 or treatment itself, its value and significant risks, and the explanation of other appropriate treatment methods, if any.
- The patient may elect to refuse treatment. In this event, the patient must be informed of the medical consequences of this action. In the case of a patient who is mentally incapable of making a rational decision, approval will be obtained from the guardian, next of kin, or other person legally entitled to give such approval. MVH will make every effort to inform the patient of alternative facilities for treatment if we are unable to provide necessary treatment.
- Upon request, MVH will assist the patient in formulating advance directives, appointing a surrogate to make health care decision on the patients behalf, and to have hospital staff and practitioners who provide care in the hospital comply with these directives, to the extent permitted by law. Access to health care at our hospital will not be conditioned upon the existence of an advance directive.
- To privacy to the extent consistent with adequate medical care. Case discussions, consultation, examination, and treatment are confidential and should be conducted discreetly. The patient has the right to be advised as to the reason for the presence of any individual involved in his/her healthcare.
- To privacy and confidentiality of all communication and records pertaining to patient treatment, except as otherwise provided by law or third party payment contract. Written permission shall be obtained before medical records can be made available to anyone not directly concerned with care.
- To a reasonable response to a patients request for services customarily rendered by the hospital, and consistent with the treatment.
- To expect reasonable continuity of care and to be informed, by the personnel responsible for the patients' health care, of possible continuing health care requirements following discharge, if any.
- The identity, upon request, of all health care personnel and health care institutions authorized to assist in your treatment.
- Be advised if hospital/personal physician proposes to engage in or perform human experimentation affecting care or treatment. The patient has the right to refuse to participate in such research projects. Refusal to participate or discontinuation of participation shall not compromise the patient's right to access care, treatment or services. Upon patient request, examine and receive a detailed explanation of the bill including an itemized bill for services received regardless of sources of payments.
- To know the hospital's rules and regulations that apply to patient conduct.
- To be advised of the hospital grievance process, should they wish to communicate a concern regarding the quality of the care they receive or if they feel the determined discharge date is premature. Notification of the grievance process includes: whom to contact to file a grievance that they shall be provided with a written notice of the grievance determination; the steps taken on their behalf to investigate the grievance; the results of the grievance and the grievance completion date.
- To have access and copy information in the medical record at any time during or after the course of treatment within a reasonable time frame. If patient is incompetent, the record will be made available to their guardian.
- To remain free from restraint and seclusion of any form that are not medically necessary or are used as a means of coercion, discipline, convenience or retaliation by staff unless medically reasonable issues have been assessed and pose a greater health risk without restraints.
- To participate in the development and implementation of his/her plan of care; which includes at a minimum, the right to participate in the development and implementation of his/her inpatient treatment/care plan, outpatient treatment/care plan, participate in the development and implementation of his/her pain management plan.
- To have family/legal representation.
- To have patient's personal physician notified of admission to the hospital.
- Patients and family members also have the right to access the following government agencies:

If you have an issue or concern in which you cannot resolve at the local level, you may contact the Idaho Department of Health and Welfare. Send your written complaint to Department of Health and Welfare, 3232 Elder St., Boise, ID 83705 or call at (208)334-6626.

If you believe your health information privacy rights (HIPAA) have been violated, you may also file a complaint with the U.S. Department of Health and Human Services. Your complaint must be in writing and you must name the organization that is the subject of your complaint and describe what you believe was violated. Send your written complaint to: Region 10, Office for Civil Rights, U.S. Department of Health and Human Services, 2201 Sixth Ave., Suite 900, Seattle, WA 98121-183.

Effective Date: 09/27/2022