

## JACKSONVILLE MEMORIAL HOSPITAL ADMINISTRATIVE MANUAL

<b>Policy Number:</b>	9000-037
<b>Department:</b>	Administration
<b>Category:</b>	Quality Management
<b>Subject:</b>	Patient Rights and Responsibilities
<b>Effective Date:</b>	February 17, 2025
<b>Supersedes:</b>	December 23, 2021

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### **POLICY:**

Jacksonville Memorial Hospital's Administration, Staff and Medical Staff will provide for the rights of the patients to make rational choices regarding their health care based upon vital information concerning their illness, proposed procedures, alternate methods of treatment, and the risk and benefits of each. This effort will be accomplished through a partnership of the patient and the healthcare team, working together in an atmosphere of mutual consideration and respect.

### **PURPOSE:**

Jacksonville Memorial Hospital exists for the purpose of providing healthcare for the sick and injured. The following statement of patients' rights and responsibilities represents the policy of the hospital to reach this goal and presents in summary form the principle responsibilities which the hospital and its patients have to each other. There are additional rights and responsibilities involved in the patient/physician relationship and these rights and responsibilities may be discussed with the attending physician.

Jacksonville Memorial Hospital performs many functions, including the prevention and treatment of disease and the education of health professionals and patients. The furtherance of clinical research in these varied activities must be conducted with an overriding concern for our patients and the recognition of their dignity as human beings.

### **PATIENT RIGHTS:**

1. Patients have a right to receive safe, considerate and respectful care.
2. Patients have the right to receive care in a safe setting.
3. Patients have the right to be free from neglect; exploitation; corporal punishment; and verbal, mental, physical and sexual abuse.
4. Patients have the right to be free from restraint or seclusion, of any form, that is imposed as a means of coercion, discipline, convenience or retaliation by staff. See *Policy: Restraint and/or Seclusion for Violent Behavior and Restraints for Non-Violent Behaviors*.

5. Patients have the right to keep and use personal clothing and possessions, unless this infringes on others' rights or is medically or therapeutically contraindicated.
6. Patients have a right to receive medical treatment, regardless of age, race, color, ethnicity, national origin, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression, cultural beliefs, HIV status, or the source of payment for their care.
7. Patients have the right to be well-informed about their illness, possible treatments and likely outcome and to discuss this information with their care provider.
8. Patients have the right to participate in the development and implementation of their treatment plan, discharge plan, and pain management plan.
9. Patients have a right to receive information in a manner that meets their individual needs.
10. Patients have the right to ask physicians, nurses and other caregivers questions about the care they receive.
11. Patients have the right to obtain the name, position and professional relationship of all individuals who are treating them.
12. Patients have the right to receive visitors as designated by them; as well as the right to deny any or all visitors. Patients also have the right to be informed of any restrictions/limitations that are placed on their visitation rights; these limitations/restrictions may be made by the Hospital in order to protect the health and safety of all patients. The Hospital does not restrict, limit or deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, HIV status, or disability.
13. Patients have the right to designate a support person. This can be a family member, domestic partner (including a same-sex partner), friend or other individual to be present with them for emotional support during their hospital stay.
14. Patients have the right to have a family member or representative of their choice and their physician notified promptly of their admission to the hospital.
15. Patients have the right to have an ethics consultation without charge to review the plan of care and to discuss their rights or to attempt to settle ethical disagreements or conflicts with health professionals. See *Policy: Ethics Consultations*.
16. Patients have the right to have an advance directive, such as a living will or durable power of attorney for health care. These documents express choices about future care or name someone to decide if a patient cannot speak for his or her self. See *Policy: Advance Directive* for additional information.

17. Patients have the right to refuse any care, treatment, or services to the extent permitted by law, and to be informed of the medical consequences of their refusal.
18. Patients have the right to give or withhold informed consent to produce or use recordings, films, or other images for the purposes other than medical care.
19. Patients have the right, to the extent permitted by law, to leave the hospital against their physician's advice. See *Policy: Discharge Against Medical Advice (Inpatient)*.
20. Patients have the right to reasonable privacy and confidentiality concerning medical care and the communications and records pertaining to it. Third-party payors, medical care review committees and authorized hospital personnel and medical staff may have access to patient records.
21. Patients have the right to expect that treatment records are confidential unless they have given permission to give out information, or reporting is required or permitted by law. When the hospital releases records to others, such as insurers, it emphasizes that the records are confidential.
22. Patients have a right to expect that within its capacity, the hospital will provide a reasonable response to requests for its services.
23. Patients have the right to obtain information concerning the relationship of the hospital with other health care and educational institutions insofar as their care is concerned.
24. Patients have the right to be involved in the decision-making process related to their care. (Parents/guardians of children or adolescents have the right to be involved on behalf of their children with limited exceptions.)
25. Patients have a right to be advised if any portion of their care or treatment program is a part of any experimental or research program.
26. Patients have a right to refuse to participate in any experimental/investigational or research program.
27. Patients have the right to review their medical records and to have the information explained to them.
28. Patients have the right to be told of realistic care alternatives when hospital care is no longer appropriate.
29. Patients have the right to request the opinion of a consultant.
30. Patients have a right to obtain information about the hospital's teaching and education programs. Patients may elect to refuse to participate in all or any part of these programs.

31. Patients have a right to see their hospital bill and have it explained to them.
32. Patients have a right to inquire about financial assistance in paying their bills or filing insurance forms.
33. Patients have a right to know what hospital rules and regulations apply to their conduct as a patient.
34. Patients have the right to freely voice complaints and recommend changes freely without being subject to coercion, discrimination, reprisal, or unreasonable interruption in care. See *Policy: Customer Complaint/ Grievance Management* for information regarding complaint resolution processes. A patient wishing to file a complaint or grievance should be referred to Patient Experience at (217) 479-3924. A patient may also wish to file a complaint or grievance with an accrediting, regulatory and/or licensing body. See Appendix A for a list of entities that patients can contact to file a complaint or grievance.
35. During a pandemic or other public health emergency, Jacksonville Memorial Hospital shall encourage the patient's ability to engage with family members throughout the duration of the pandemic or other public health emergency through the use of phone calls, video calls, or other electronic mechanisms.

#### **PATIENT RESPONSIBILITIES:**

1. In providing for our patients, the physicians and hospital staff recognize that the most effective results are obtained when the patient and health care team can work together as partners. Patients will be expected, within the limits of their abilities, to assume a share of the responsibility for their health care.
2. Patients have a responsibility to provide information about illnesses, hospitalizations, medications and other matters related to their health, both past and present.
3. Patients have a responsibility to cooperate with all personnel assigned to care for them and to ask questions if they do not understand any directions given to them.
4. Patients have a responsibility, both personally and on behalf of their visitors, to be considerate of other patients, particularly with regard to noise and the number of visitors who may come to see them.
5. Patients have a responsibility to keep any appointments connected with their care or treatment and to notify the appropriate parties in advance when they cannot be kept.
6. Patients have a responsibility to be prompt in the payment of their hospital bills, to provide the information necessary for insurance processing and to ask in a timely manner any questions they may have concerning the charges.

7. Patients have a responsibility to be respectful of others and the property of both others and the hospital.
8. Patients have a responsibility to abide by hospital rules and regulations and to see that their visitors do likewise.
9. Patients have a responsibility to aid the health care professionals in their efforts to return them to health by following their instructions.

### **ADVANCE DIRECTIVES:**

Patients have the right to express their wishes regarding the level and kinds of care they might wish to receive if they become unable to make these decisions for themselves. Patients may choose to express their wishes through advance directives such as a Living Will, a Durable Power of Attorney for Health Care or a Mental Health Treatment Declaration. These documents can express choices about future care and, if chosen, can name someone to decide care should the patient become unable to speak for his or her self. See *Policy: Advance Directives* for additional information.

### **REFERENCE SOURCES:**

The Joint Commission (TJC) Accreditation Requirements for: Rights & Responsibilities of the Individual (Standards RI.01.01-RI.02.01.01)

Centers for Medicare and Medicaid Services (CMS) Condition of Participation: Patient's Rights (Standards §482.13)

Illinois Hospital Licensing Requirements Section 250.260 Patients' Rights

This policy has been reviewed and approved by:

Carrie Carls, DNP, RN  
Chief Nursing Officer

Trevor Huffman  
President & CEO

Reviewed:	5/15/2016	Reviewed:	02/17/2025
Reviewed:	6/12/2017		
Revised:	8/04/2021 (to be in alignment with MMC)		
Revised:	12/23/2021		

## **Appendix A**

### **Contact Information**

#### **The Joint Commission**

*Web:* [www.jointcommission.org](http://www.jointcommission.org) > [Report a Patient Safety Event or Concern](#)

*Mail:* The Office of Quality & Patient Safety, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, IL 60181

#### **Illinois Department of Public Health**

800–252–4343 | TTY 800–547–0466

*Web:* [dph.illinois.gov/topics-services/health-careregulation/complaints](http://dph.illinois.gov/topics-services/health-careregulation/complaints)

*Mail:* 535 W. Jefferson Street, Springfield, IL 62761

#### **Livanta LLC–Medicare Quality Improvement, Organization (QIO) for Illinois**

*Toll-free:* 888–524–9900

*TTY:* 888–985–8775 | [Livantaqio.com](http://Livantaqio.com)