

YOUR RESPONSIBILITIES

At Salem Health, we want to create a healing relationship with you founded upon trust and respect.

Honest communication between you and your health care team will help you understand your care and have the best possible experience.

Asking questions and sharing decisions helps us make sure your care is tailored to your needs.

WHEN YOU ARE A PATIENT, YOU AND YOUR FAMILY HAVE THE RESPONSIBILITY TO:

Provide information:

- Provide accurate, honest and complete information about your current condition, medical history, and possible health risks. This includes medicines you are taking, previous illnesses, injuries or treatments.
- Be involved as much as you are able in decisions about your care, unless you give that responsibility to a family or friend.
- Give us a copy of your advance directive if you have one.

Ask questions and follow directions:

- Ask questions until you understand your illness; treatments, surgeries or procedures; the medicine you will take; and our instructions for how to care for yourself at home.
- Tell us if you do not understand your treatment or what we are asking you to do. If you don't think you can follow our directions, tell us.

- Tell us about unexpected changes in your condition or concerns about your care.
- Follow directions once you and your provider have agreed on your care.

Refuse treatment and accept consequences:

- Accept what happens if you choose not to follow directions or not to have treatment.

Be respectful and kind:

- Treat other patients, families and staff with courtesy and respect
- Respect the rights and property of others.

Follow rules and regulations:

- Follow hospital rules and regulations.
- Attend appointments on time. Call your health care provider if you are unable to keep your appointment.
- Leave valuables at home or have family members take all valuables home while you are at the hospital.

Financial Charges:

- Pay your bills or agree to a plan to help pay for the cost of your care.

HOW TO FILE A COMPLAINT

If you have any concerns or complaints about our care regarding possible violation of your rights including discrimination of any kind, please contact us either in writing, by e-mail or via telephone.

We also invite you to share your concerns and complaints by speaking with your care provider or any Salem Health employee or leader.

You may also contact:

At West Valley Hospital

West Valley Administrative Department:

Call 503-623-7323 any weekday between 8 a.m. and 4 p.m. After hours, on holidays and weekends, please leave a message, you will be contacted the next business day.

Your complaint may also be mailed to West Valley Hospital, Administration, PO Box 378, Dallas, OR 97338.

At Salem Health, Salem Health Urgent Care and Salem Health Medical Group clinics

Salem Health Patient Advocate:

Call 503-561-5765, any weekday between 8 a.m. and 4:30 p.m. After hours, on holidays and weekends, call 503-561-5200 and ask to speak with the House Supervisor.

Your complaint may also be mailed to Salem Health, Patient Advocate, PO Box 14001, Salem, OR 97309-5014. Or email patientadvocate@salemhealth.org.

Patients may also contact the following organizations to file a complaint:

Oregon Health Authority, Health Care Regulation & Quality Improvement:

800 NE Oregon St, Suite 465
Portland, OR 97232 971-673-0540
(TTY 971-673-0372)

www.healthoregon.org/hcrqi

The Joint Commission, Office of Quality Monitoring: complaint@jointcommission.org

Patient rights and responsibilities

*Adopted by the Board of Trustees Feb. 7, 1991
Revised August 2017*



Salem Health is committed to caring for you as one of our family. We invite you and your loved ones to join us as active members of your care team. Together, we will support your physical, cultural, spiritual and emotional needs. We want to honor what makes you unique, offer you the care you deserve and promote your healing.

Thank you for trusting us to help care for you.

You have rights and responsibilities during your visit.

As a patient of Salem Health, you have the right to:

Professional care:

- To receive respect for your cultural, social, spiritual and personal values; beliefs; and preferences.
- To a safe and private environment, free of abuse or neglect.
- To privacy of your body and dignity.
- To participate in clinical research or training programs of your own free will or decline involvement at any time.
- To receive care without discrimination based on:
 - Race, color, national origin, ethnicity, religion, cultural and spiritual values
 - Language
 - Physical or mental disability
 - Social or economic status, source of payment
 - Marital status, age, gender, gender identity or expression, and sexual orientation
 - To be informed of the hospital rules that apply to Salem Health employees.

Be involved in care decisions:

- To free, correct and on-time access to language interpreters and American Sign Language (in person, by telephone or through video relay). To receive free aids and services for your disability to be able to

communicate well.

- To know the names, professional titles and jobs of the people who are taking care of you.
- To help make decisions about your care. Your loved ones may also help in care decisions, if you wish.
- To receive correct information in a way that you can understand. With this information, you can make decisions about your care. This includes information about:
 - Your diagnosis
 - Care options
 - Risks of a treatment or procedure
 - Outcomes of care, including outcomes that were not expected
 - The cost of care
- To ask for more information before you decide to agree to or decline any procedure or treatment, except in emergencies. If you have a physical or mental disability, or just don't understand something, we can offer you help so you can make informed health care decisions.

Treatment:

- To refuse treatment at any time, if allowed by law. If you refuse care, we will explain the possible medical consequences of your decision.
- To be checked and treated for pain.
- To be free from restraints and seclusion of any form unless needed to keep you safe.
- To request a second opinion from another doctor at your own expense.
- To complete or update an advance directive.

An advance directive will tell your health care team or family members about the care you do or do not want to receive, in case you become unable to express your wishes. This may include your wishes for organ and tissue donation. You have the right to have those decisions respected.

- To choose another person to make health care decisions for you (if allowed by law). You may remove, add or change people at any time.

Confidentiality and privacy:

- To expect privacy of your health information.
- To understand how your health information is shared for purposes of treatment, payment or health care operations. You can read more about this in the Notice of Privacy Practices.
- To see or get a copy of your medical record.
- To ask to change wrong information or add information to your medical record if you think it is missing.
- To have information in your medical record explained to you.

Support while in care:

- To have a family member or a person of your choice (including your own doctor) informed promptly when you are admitted to the hospital.
- To have someone stay with you (such as your spouse, your domestic partner or another family member or a friend). The hospital will not deny visitors based on race, color, national origin, religion,
- sex, gender identity, sexual orientation or

disability. However, if any visitor is causing risk for you or others, we will ask them to leave.

- To withdraw or deny visitors at any time.
- To have help with making difficult decisions. In addition to clinical staff, our chaplains, ethicist and counselors are available to speak to you and your visitors. We will do all that is possible to support you and your family.

Continuity of care:

- To request and receive an evaluation from care management to help you plan for when you leave the hospital.
- To participate (with your loved ones) in decisions affecting your care and planning for when you leave the hospital.
- To have the freedom of choice of providers to support you after you leave the hospital.
- To have access to community agencies for your support after you leave the hospital.

Fair billing:

- To receive an explanation of your bill, no matter who will be paying it.
- To receive information about financial help for your bill.

Share concerns about your care:

- To talk with us about your concerns without it affecting the quality of your care. We will not discriminate, stop service or punish you in any way if you have a complaint.
- Be informed of the process to file a complaint.