

## **Patient and Family Rights and Responsibilities**

This Bill of Rights and Responsibilities describes Children's Hospital of Philadelphia's (CHOP) commitment to partnering with you and your family as active members of the care team. This partnership is the core of patient and family centered care and includes dignity, respect, participation, information sharing and collaboration. We will forge this partnership for the safest care of children by understanding each other's responsibilities in the care environment. Residents, students and other trainees will be included in this collaboration because CHOP is a teaching institution. CHOP expects patients and families to share responsibility for creating a trusting and safe environment of care. These rights and responsibilities are posted throughout the organization for you, are available on our website and can be provided in writing as well.

**Dignity and Respect:** Hospital staff and families will listen to and respect each other's ideas and concerns. Hospital staff incorporates patient and family knowledge, values, beliefs and cultural backgrounds into care planning and delivery as appropriate.

You can expect CHOP to:

- Provide care regardless of race, color, age, sex, gender identity or expression, sexual orientation, national origin, religion, disability, who pays for care or your ability to pay.
- Provide respectful, high quality care given by qualified staff (including supervised residents, students and trainees) and maintain high professional standards, while respecting your values, beliefs and preferences.
- Respect your right to exercise your civil and religious freedom, including the right to make your own decisions.
- Provide care in a safe and secure setting, free from any form of abuse or harassment, neglect or being preyed upon, with access to protective services.
- Provide emergency care without unnecessary delay.
- Take actions to address your pain within a reasonable time, and educate you about pain management.
- Not use restraints (including medicines) or seclusion, or limit communication except when we need to protect you for a limited time and when ordered by a provider.
- Provide interpreters free of charge for those who have a preferred language other than English, including sign language.
- Provide accommodations for persons with disabilities including assistive devices for the visually impaired and deaf/hard of hearing, wheelchair access, service animals, etc.
- Keep information about your medical care and family information private. Discussions, exams, consultations and treatments will be conducted discreetly. We will not release any information in your medical record to anyone outside of the CHOP network without your approval, except when required or allowed by law or regulation.
- Not require you to perform work for the hospital unless it is part of your treatment and is done by choice.
- Obtain your permission before recording, filming or taking pictures of you or your family.
- Be considerate of your time in order to minimize patient discomfort.

Patient and Family responsibilities are to:

- Work with your providers and others to follow the advised medical plan and other patient/family responsibilities, and inform us if you are unable to do so.
- Respect the rights of other patients and personnel and expect your visitors to do the same. Disrespectful or disruptive behavior toward anyone is prohibited because it does not allow for a safe, healing environment.
- Respect the property of CHOP and other patients, families and visitors and expect your visitors to do the same.
- Follow rules for visiting, limiting noise, refraining from use of alcohol, tobacco and other drugs, and expect your visitors to do the same.
- Not carry weapons on any CHOP property.
- Keep appointments or let us know as soon as possible if you cannot.
- Pay your bill as soon as possible, or work with your insurance company and CHOP's Financial Counselors to do so. Please visit the "Financial Matters" page at <http://www.chop.edu/visitors/financial-matters/financial-matters.html>.

**Information Sharing:** Hospital staff and patients/families strive to communicate complete and unbiased information with each other in timely, compassionate and useful ways. We share this information so all may effectively partner in care and decision-making.

You can expect CHOP to:

- Explain your health problem, including diagnosis, treatment, prognosis and results, and work with you to develop a treatment plan, including follow-up needed after discharge, in a way that you can understand.
- Help you to get a copy of your completed medical records if you request them and if access is not restricted for medical reasons, and share them with another provider at your request.
- Provide written materials in words you can understand, including the diagnosis, recommended treatment, other possible treatment choices, complications and the expected prognosis. If you are unable to understand the information, it will be given to your parent or legal guardian and will be written in the chart. If you are an adult patient unable to understand the information, it will be provided to your health care representative and documented in the chart.
- Provide information about your bill and provide counseling on financial resources to help you pay for care upon request.
- Tell you the names and roles of all staff that provide care.

Patient and Family responsibilities are to:

- Share complete and accurate information about your health history as best you can.
- Tell us right away if there are changes in your condition, or if you have concerns about safety or feel your care is at risk.
- Ask questions to fully understand your treatment plan and what is expected of you.
- Honor the confidentiality and privacy of other patients and families.

## **Patient and Family Rights and Responsibilities**

**Participation:** Hospital staff encourages patients and families to participate in care and decision-making as much as they feel comfortable.

You can expect CHOP to:

- Offer you written information about developing an advance directive, if you are 18 or older.
- Help you understand your options if you are to be transferred to another facility by providing you with as much information as we know about the facility, as well as the need for and alternatives to the transfer.

You may:

- Choose to give consent or refuse to consent to a procedure or treatment for which informed consent is required. You are entitled to information about treatment options and risks to help you make informed choices about your care.
- Refuse any care, treatment, drug or procedure as allowed by law, and have the doctor tell you what might happen if you refuse care.
- Review information contained in your medical chart unless restricted for medical reasons.
- Set goals for end-of-life care.
- Request to be transferred to another hospital or facility that will accept the transfer.
- Ask for help in getting the opinion of another physician, at your request and expense.
- Discuss any difference of opinion you may have regarding your care plan with your providers. If your questions are not answered or if you still have concerns, you may ask for an ethics consultation.
- Ask for religious or spiritual support services.
- Consider options for organ and tissue donation when appropriate.

**Collaboration:** Hospital staff and patients/families collaborate both at the bedside through coordination of care as well as on an enterprise level to work together.

You can expect CHOP will:

- Try to notify another person, such as a family member or your primary care physician, when you are admitted to the hospital.
- Welcome your visitors regardless of race, color, age, sex, gender identity or expression, sexual orientation, national origin, religion, or any disability. We will make reasonable accommodations for individuals with disabilities whenever possible. Visitors may be restricted for clinical reasons like increased infection risk, or other reasonable restrictions.

You may:

- Choose to designate or refuse visitors at any time.
- Designate another decision-maker, as allowed by law, when you cannot make decisions about care.
- Choose or refuse to take part in a research or donor program, and you may discontinue your participation at any time.

## **COMPLIMENTS OR CONCERNS**

We want to provide the best care for you and your family. Your suggestions help us to improve our services.

**Here are the ways you can give us your comments:**

As a first step, you may ask to speak with your providers or department manager about concerns or compliments.

You may also direct your concerns to the **Family Relations: Office of Feedback** by:

Phone: 267-426-6983

Email: [familyrelations@email.chop.edu](mailto:familyrelations@email.chop.edu).

Mail: **Family Relations: Office of Feedback**

The Children's Hospital of Philadelphia  
34th Street and Civic Center Boulevard  
CSH-153  
Philadelphia, PA 19104

Fax: 267-426-5300

On a mobile device:



Options for directing concerns outside of The Children's Hospital of Philadelphia:

Pennsylvania Department of Health  
Acute and Ambulatory Care Services  
P.O. Box 90, Harrisburg, PA 17108-0090  
Phone: 1-800-254-5164  
Online: <https://apps.health.pa.gov/dohforms/FacilityComplaint.aspx>

Livanta LLC  
BFCC-QIO Program, Area 1  
9090 Junction Drive, Suite 10  
Annapolis Junction, MD 20701  
Phone: 1-866-815-5440

The Joint Commission  
Office of Quality and Patient Safety  
Mail: One Renaissance Boulevard  
Oakbrook Terrace, IL 60181  
Online: [www.jointcommission.org](http://www.jointcommission.org) › resources › report-a-patient-safety-event  
Fax: 1-630-792-5636

New Jersey Department of Health  
Division of Health Facility Survey and Field Operations  
P.O. Box 367  
Trenton, NJ 08625-0367  
Online: <https://web.doh.state.nj.us/fc/search.aspx>  
24-hr Complaint Hot Line: 1-800-792-9770

Healthcare Quality Strategies Inc.  
557 Cranbury Road, Suite 21  
East Brunswick, NJ 08816