

# Patient Rights and Responsibilities

As a patient, family member, or legally responsible party of a patient at Northern Light Health, we want you to be aware of the rights and responsibilities you have under Federal and Maine State law. We are committed to honoring your rights, and want you to know that by taking an active role in your healthcare, you can help Northern Light Health caregivers meet your needs.

## Your Rights

Northern Light Health complies with applicable Federal civil rights laws and does not discriminate on the basis of age, color, ethnicity, sex, gender, gender identity or expression, language, national origin, mental or physical ability or disability, political affiliation, race, religion, culture, sexual orientation, socio-economic status, genetic information and veteran status. As a Northern Light Health patient, you have the right to safe, respectful, and dignified care. While you are here, you will receive hospital services and care that are medically needed and capable of being provided by Northern Light Health in accordance with the Northern Light Health stated mission, and in accordance with applicable law and regulations.

## Communication

### You have the right to:

- Have a family member or another person that you choose as a support person to be with you.
- Receive information in a way that you can understand. This includes free interpretation and translation services, in the language you prefer to discuss or read about your healthcare. This also includes help if you have vision, speech, hearing or cognitive impairments.
- Designate a person, if needed, to act on your behalf to assert and protect your patient rights.
- Provide the name of the caregiver who will assist in your discharge.

## Informed Decisions

### You have the right to:

- Receive information about your current health, care, outcomes, recovery, ongoing healthcare needs, and future health status in terms that you and your family understand.
- Be informed about care options including the risks and benefits (informed consent), other care options, what could happen without care, and the outcome(s) of any medical care provided, including any outcomes that were not expected.

- Be actively involved in all aspects of your care and to take part in decisions about your care, including end of life care.
- Make choices about your care based on your spiritual and personal values.
- Request care.
- Refuse any care, therapy, medication, or procedure against the medical advice of a doctor. Please note: There may be times that care must be provided based on the law.
- Expect Northern Light Health to obtain your permission before taking photos, recording, or filming you, if the purpose is for something other than patient identification, care, diagnosis, therapy, or for law enforcement.
- Decide to take part or not take part in research or clinical trials for your condition, or donor programs that may be suggested by your doctor.

## Visitation

### You have the right to:

- Decide if you want visitors while you are at Northern Light Health. Please note: Staff nurses may need to limit visitors to better care for you or other patients.
- Visitation rights include the right to receive visitors including, but not limited to, a spouse, a domestic partner, including a same-sex domestic partner, another family member, or a friend.
- Designate preferred visitors or inform us of individuals that you do not want to see during your stay.
- Designate a support person who may determine who can visit you if you can no longer make that decision.
- Decide if you do not want staff to acknowledge whether you are a patient at Northern Light Health.

## Care Planning

### You have the right to:

- Receive a medical exam to determine treatment and follow up care.
- Participate in the care that you receive at Northern Light Health. This includes your caregiver.

- Receive instructions at discharge on follow-up care and participate in decisions about your plan of care after you leave Northern Light AR Gould Hospital.
- Receive a prompt and safe transfer to the care of another hospital when Northern Light AR Gould Hospital is not able to meet your request or need for service and the receiving hospital has agreed to accept and has a bed for you.
- You have the right to know why a transfer to another facility might be required, as well as learning about other options for care.
- You have the right to protective and advocacy services.

## Care Delivery

### You have the right to:

- Expect emergency care to be implemented without unnecessary delay.
- Receive care in a safe setting free from harassment, neglect, exploitation, and verbal, mental, physical, or sexual abuse.
- Receive kind, respectful, safe, quality care delivered by skilled and competent staff.
- Be told the names and roles of the healthcare providers and staff that are caring for you.
- Request a consultation from other healthcare providers.
- Receive care in an environment that preserves dignity and contributes to a positive self-image.
- Receive assessment and management of your pain, including the right to request or reject any or all options to relieve or treat your pain.
- Receive care that is without restraints or seclusion unless necessary to provide medical, surgical, or behavioral healthcare.
- Receive efficient and quality care with high professional standards that are continually monitored, maintained, and reviewed.

## Privacy and Confidentiality

### You have the right to:

- Limit who knows about your presence at Northern Light Health.
- Be interviewed, examined, and discuss your care in places designated to protect your privacy.
- Be advised why certain people are present and ask others to leave during sensitive talks or procedures.
- Expect all communications and records related to care, including who is paying for your care, to be treated as private and confidential.
- Receive written notice which explains how your personal health information will be used and shared with other healthcare professionals involved in your care. Staff will explain this to you as well.
- Review and request copies of your medical record unless restricted for medical or legal reasons. Northern Light Health has policies which help guide this process.

## Billing

### You have the right to:

- Review, obtain, request, and receive a detailed explanation of your hospital charges and bills.
- Receive information and counseling on ways to pay for the hospital bill. Northern Light Health has financial counselors specially trained in this area.
- Request information about any business or financial arrangements that may impact your care.

## Advance Directives

### You have the right to:

- Create advance directives, living wills, and POLST forms. You have the right to have Northern Light Health staff comply with your directives.
- Ask about and discuss the ethics of your care, including the resolution of any conflicts that might arise such as deciding against, withholding, or withdrawing life-sustaining care.
- Request an Ethics Consultation.

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**French:** ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-888-986-6341 (ATS: 711).

**Spanish:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-986-6341 (TTY: 711).

## Complaints, Concerns and Questions

### You and your family/guardian have the right to:

- Tell Northern Light AR Gould Hospital staff about your concerns or complaints regarding your care. This will not affect your future care or how you are treated.
- Ask for a review of quality of care concerns, coverage decisions, and concerns about your discharge plan.
- Expect a timely and understandable response to your complaint/concerns or grievance from Northern Light Health. Complaints or grievances may be made in writing, by phone, or in person. Northern Light Health has a duty to respond to these complaints or grievances in a manner that you can understand. To share your concerns with Northern Light AR Gould Hospital, please contact the patient advocate by calling 207.768.4394.
- Contact the Maine Department of Health and Human Services (DHHS) to assist you with questions or concerns about your hospital care. You may reach DHHS at: **Division of Licensing and Regulatory Services**  
**41 Anthony Ave-#11, State House Station**  
**Augusta, ME 04333-0011**  
**800.791.4080**
- You may also contact The Joint Commission, Northern Light Health's accreditation organization at [jointcommission.org](http://jointcommission.org), using the "Report a Patient Safety Event" by **fax to 630.792.5636**, or by mail to **The Office of Quality and Patient Safety (OQPS), The Joint Commission, One Renaissance Blvd, Oakbrook Terrace, Illinois 60181**.
- You may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at: [ocrportal.hhs.gov/ocr](http://ocrportal.hhs.gov/ocr) or by mail or phone at: **U.S. Department of Health and Human Services**  
**200 Independence Avenue, SW,**  
**Room 509F, HHH Building,**  
**Washington, DC 20201**  
**800.368.1019, 800.537.7697 (TDD)**  
Complaint forms are available at: [hhs.gov/ocr](http://hhs.gov/ocr)
- Medicare patients may contact: **BFCC-QIO Program, Area 1**  
**5700 Lombardo Center Dr., Suite 100**  
**Seven Hills, OH 44131**  
**888-319-8452**
- Feel free to ask questions about any of these rights that you do not understand. If you have questions about these rights, please discuss them with your care providers or the patient advocate. You will receive a personal response.

## Your Responsibilities

As a patient, family member, or legally responsible party, you have the right to know all our rules and what we expect of you.

### Provide Information - As a patient, family member, or legally responsible party, we ask that you:

- Provide accurate and complete information about the patient's current healthcare problems, past illnesses, hospitalizations, medications, and other matters relating to your health.
- Report any condition that puts you at risk, such as allergies, hearing problems, use of recreational or illegal substances.
- Report unexpected changes in the patient's condition to the healthcare professionals.
- Provide a copy of your Advance Directive, Living Will, POLST form, Durable Power of Attorney for healthcare.

### Respect and Consideration - As a patient, family member, or legally responsible party, we ask that you:

- Recognize and respect the rights of other patients, families, and staff. Threats, violence, or harassment of other patients and Northern Light Health staff will not be tolerated.
- Comply with Northern Light AR Gould Hospital's "no tobacco" policy. If you have concerns about this, please speak with your care providers.
- Illegal activity on Northern Light property will be reported to the local police department.

### Safety - As a patient, family member, or legally responsible party, we ask that you:

- Become an active, involved, and informed member of the healthcare team.
- Ask questions if you are concerned about your health or safety or you do not understand.
- Remind all caregivers to wash their hands or use hand sanitizer before taking care of you.
- Be informed about your medications and why you are taking them.
- Ask all staff to identify themselves.

**Refusing Care** - As a patient you are responsible for your decisions if you refuse care or do not follow care instructions.

**Billing** - As a patient you are responsible for paying for the healthcare that you received as promptly as possible.

**Cooperation** - As a patient you are expected to follow the care plans suggested by the healthcare professionals. You should work with your healthcare team to develop a plan that you will be able to follow while at Northern Light and after you leave.