

DIVINE HOME HEALTH CARE, LLC.

HEMOCARE BILL OF RIGHTS

Home care clients have the right to be notified in writing of their rights and obligations before treatment begins. The client's family or guardian may exercise the client's rights when the client has been judged incompetent. Home care providers have an obligation to protect and promote the rights of their clients, including the following rights.

Clients and Providers have a Right to Dignity and Respect

Home care clients and their formal caregivers have a right to not be discriminated against based on race, color, religion, national origin, sex, or handicap. Furthermore, clients and caregivers have a right to mutual respect and dignity, including respect for property, personal privacy and security during home care visits. Caregivers are prohibited from accepting personal gifts and borrowing from clients.

Clients have the right:

- ❖ To be treated with dignity and respect.
- ❖ To have a relationship with our staff that is based on honesty and ethical standards of conduct.
- ❖ To be informed of the procedure they can follow to lodge complaints with the home care provider about the care that is, or fails to be, furnished, and regarding a lack of respect for property (to lodge complaints with us call **(614) 523-1400**).
- ❖ To know about the disposition of such complaints.
- ❖ To voice their grievances without fear or discrimination or reprisal for having done so and
- ❖ To be advised of the telephone numbers and hours of operation of the **Ohio Department of Health's "hot-line"**, which receives complaints or questions about local home care agencies. The hours of operation are **MON-FRI 8:30am-5:00pm** and the number is **1-800-342-0553**
- ❖ Be free from mental, physical, sexual and verbal abuse, neglect and exploitation.

Decision Making

Clients have the right:

- ❖ To have your communication needs met and to receive information in a manner that you can understand.
 - ❖ To be notified about the care that is to be furnished, the types (disciplines) of the caregivers who will furnish the care and the frequency of the visits that are proposed to be furnished.
 - ❖ To be advised of any change in the plan of care before the change is made.
 - ❖ To participate in the planning of the care and in planning changes in the care, and to be advised that they have the right to do so.
 - ❖ To be informed in writing of the policies and procedures for implementing advanced directives including any limitations if the provider cannot implement and advance directive on the basis of conscience.
 - ❖ To have health care providers comply with the advanced directives in accordance with the state law requirements.
 - ❖ To receive care without condition on, or discrimination based on, the execution of advanced directives.
 - ❖ To have family involved in decision making as appropriate concerning your care, treatment and services, when approved by you or your surrogate decision maker and when allowed by law.
 - ❖ To refuse services without fear of reprisal and discrimination.
- ❖ *The home care provider or the client's physician may be forced to refer the client to another source of care if the client's refusal to comply with the plan of care threatens to compromise the provider's commitment to quality of care.*

Privacy

Clients have the right:

- ❖ To confidentiality of information about their health, social and financial circumstances and about what takes place in the home.
- ❖ To expect the home care provider to release information on as required by the law or authorized by the client.

Financial Information

Clients have the right:

- ❖ To be informed of the extent to which payment may be expected from Medicare, Medicaid, or any other payor known to the home care provider.
- ❖ To be informed of the charges that will not be covered by Medicare.
- ❖ To be informed of the charges for which the client may be liable.

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- ❖ To receive this information, orally and in writing, before care is initiated and within 30 working days of the date the home care provider becomes aware of any charges, and
- ❖ To have access upon request, to all bills for service the client has received regardless of whether the bills are paid out-of-pocket or by another party.

Quality of Care

Clients have the right:

- ❖ To receive care of the highest quality.
- ❖ To be admitted by a home care provider only if it has resources needed to provide the care safely and at the required level of intensity, and determined by a professional assessment; a provider with less than optimal resources may nevertheless admit the client if a more appropriate provider is not available, but only after fully informing the client of the provider's limitations and the lack of suitable alternative arrangements and
- ❖ To be told what to do in the case of an emergency.

The Home Care provider shall assure that:

All medically related home care is provided in accordance with physician's orders and that a plan of care specifies the services and their frequency and duration and

All medically related personal care is provided by an appropriately trained home care aide who is supervised by a nurse or other qualified home care professional.

Client Responsibility

Clients have the right:

- ❖ To provide complete and accurate information to the best of your knowledge about your present complaints, past illness(es), hospitalizations, pain, medications, allergies and other matters relating to your health.
- ❖ To remain under a doctor's care when required by law and/or regulation.
- ❖ To agree to accept all caregivers without regard to race, color, religion, sex, age, gender preference, handicap or national origin.
- ❖ To notify us of perceived risks or unexpected changes in your condition (e.g., hospitalization, changes in the plan of care, symptoms to be reported, pain, homebound status or change of physician).
- ❖ To provide a safe home environment in which your care can be given.
- ❖ To notify the provider if the visit schedule needs to be changed and notifying the agency when unable to keep appointments
- ❖ To notify the agency of the existence of, or any changes in advance directives and to cooperate with the agency in meeting the requirements of an advance directive if one is executed.
- ❖ Participate in your plan of care; follow the plan of care and instructions and accept the consequences for any refusal of treatment or choice of non-compliance, including the outcomes and changes in reimbursement eligibility.
- ❖ To advise the provider of any problems or dissatisfaction with the services provided.
- ❖ To carry out mutually agreed responsibilities and to follow the organization's rules and regulations

CONFIDENTIALITY

Each Client's file will be maintained in a secure locked cabinet. All information will be only for personnel directly involved in that client's Plan of Care as per HIPPA privacy standards. Divine Home Health Care, LLC. will not discuss or permit anyone else to divulge any client information outside our office without prior written permission from the client.

COMPLAINT OR GRIEVANCE PROCEDURE

You have the right to voice grievances or to complain about the treatment or care that is (or fails to be) given to you or about lack of respect by anyone furnishing Services to you. You also may complain about the agency's practices regarding advance directives and privacy. There will be no reprisal or discrimination as a result of your complaint. Please use the following procedure:

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- ✓ You may report problems to the staff assigned to your case during visits to your home or at the office, during regular working hours at **(614) 523-1400**.
- ✓ If the problem lies with the staff assigned to your case or if the staff person does not resolve the problem within 5 working days, you may speak to the supervisor, Mary Muchene RN, at the office phone number, **(614) 523-1400**.
- ✓ The supervisor will investigate the problem with you and the involved staff, and, if necessary, take appropriate corrective action within 10 working days of your complaint. The supervisor will inform you within 5 working days of the outcome of the investigation.
- ✓ If you continue to be dissatisfied, you may speak to the Executive Director/CEO Gabriel Mungai, at **(614) 523-1400**.
- ✓ The State of Ohio operates a toll free complaint hotline, **1-800-342-0553**. Complaints made to this number can be kept anonymous.

The investigation and resolution of your complaint will be brought to the attention of the agency's Performance Improvement program and Governing Body. You will be notified by the agency Executive Director of the outcomes of the investigation and the final resolution within 15 working days.