Your Responsibilities

PROVIDING INFORMATION
You are responsible for:
1. Giving your health care providers accurate and complete information about your medical history. Your health care providers are the doctors, nurses, therapists and other professionals caring for you.
2. Your medical history includes past illnesses, hospital stays, pain, drugs, sensitivities or allergies, and any other facts about your health.
3. Telling your health care providers if there is a change in your condition.
4. Telling your health care providers if you have a reaction to your treatment.
5. Telling your health care providers if your pain continues or gets worse. You are responsible for working with them to develop a plan to manage your pain.
6. Giving your health care providers copies of your advance directives. Advance directives are legal papers that tell us what you want to happen if you cannot make your own decisions about your care. These papers can include a power of attorney (POA) for health care, a living will, a do-not-resuscitate (DNR) form or a physician orders for life-sustaining treatment (POLST) form.
7. Telling staff members right away if you think your rights have been violated.
8. Giving accurate insurance information so that your bills are processed correctly. You are responsible for paying your bills on time.
9. Giving accurate and complete information when filling out an application for financial assistance.

SAFETY AND RESPECT
You are responsible for:
1. Following the requests made by your health care providers about your care, behavior and safety.
2. Following requests about the number of people who visit you or the length of their visits. You and your visitors should not be noisy, threatening or disruptive.
3. Showing respect for other patients, staff members and property.
4. Following the Tobacco-Free Environment Policy. The use of tobacco products of any form, including electronic cigarettes, smokeless tobacco, vaping devices and nicotine delivery devices, is NOT allowed on OSF HealthCare property.

If a concern you have shared directly with the facility or your physician office was not addressed to your satisfaction, you may contact:
Joint Commission: Fax: (630) 792-5630 | www.jointcommission.org

If you have a complaint or concern about your care, please contact the facility directly using the information below:

OSF HealthCare Heart of Mary Medical Center Patient Advocate | (217) 841-2136 | Urbana, Illinois 61801
OSF HealthCare Holy Family Medical Center Administration | (217) 734-1400 | Monmouth, IL 61462
OSF HealthCare Little Company of Mary Medical Center Patient Advocate | (708) 229-6043, Evergreen Park, IL 60005
OSF HealthCare Sacred Heart Medical Center Patient Advocate | (217) 554-6888 | Danville, Illinois 61832
OSF HealthCare Saint Anthony Medical Center Patient Experience | (815) 381-7723 | Rockford, IL 61108
OSF HealthCare Saint Anthony’s Health Center Patient Experience | (618) 474-6395 | Alton, Illinois 62002
OSF HealthCare Saint Clare Medical Center Patient Advocate | (815) 876-2254 | Princeton, IL 61356
OSF HealthCare Saint Elizabeth Medical Center Service Excellence | (618) 431-5527 | O’Fallon, IL 62269
OSF HealthCare Saint Francis Medical Center Patient Experience | (309) 655-2222 | Peoria, IL 61637 sfmc.patientrelations@osfhealthcare.org
OSF HealthCare Saint James – John W. Albrecht Medical Center Patient Representative | (309) 642-6815 | Pontiac, IL 61764
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OSF Medical Group, OSF PromptCare, OSF OnCall Urgent Care or Care Station

Contact the office directly and ask to speak with the manager.

Patient Rights & Responsibilities (Illinois)
Our Mission
In the spirit of Christ and the example of Francis of Assisi, the Mission of OSF HealthCare is to serve persons with the greatest care and love in a community that celebrates the Gift of Life.

At OSF HealthCare
We want to treat all our patients with dignity. This is very important to us. We focus on the needs of each patient within the means of OSF HealthCare. We give considerable and respectful care to our patients. We follow the OSF HealthCare Mission and the law. We also follow the Ethical and Religious Directives for Catholic Health Care Services.

We are committed to honoring your rights as a patient. We want you to be an active partner in your care so you can help us meet your needs. That is why we ask you to share in some responsibilities. Your rights and responsibilities are explained in this brochure.
You have the right to:

1. Be treated with respect and dignity.
2. Have your privacy protected.
3. Have your beliefs and values respected.
4. Have your spiritual needs and your family’s spiritual needs met.
5. Ask and talk about the ethics of your care. This includes deciding if you want to be revived (or receive other life-saving treatment) if you stop breathing. We will help you and the members of your family agree on these decisions.
6. Have your wishes about organ donation followed.

COMMUNICATION

You have the right to:

1. Have your doctor and a family member or person that you choose told when you are admitted to the hospital.
2. Get information in a way that you understand, in the language of your choice. We will provide interpreters and translation if needed. We will help if you have vision, speech or hearing problems.
3. Be involved in all aspects of your care. This includes your discharge plan. You have the right to take part in all your health care decisions. This includes the right to refuse treatment and services.
4. Know the names of your health care providers. Your health care providers are the doctors, nurses, therapists and other professionals caring for you. You have the right to know if any of your providers are in training.
5. Get information about the results of your care that were unexpected.

INFORMED DECISIONS

You have the right to:

1. Get information about your treatment in a way you understand before you give permission to have it done. This is called “informed consent,” which includes a discussion about the options, possible benefits and problems, risks, side effects and the chances of success of the treatment. Informed consent is not required in an emergency.
2. Have the hospital staff get your permission before they take photos, recordings or films of you if the reason is not for your care.
3. Decide if you want to take part in research and studies about your condition. You have the right to have those studies clearly explained to you before you decide.

ADVANCE DIRECTIVES

Advance Directives are legal papers that tell us what you want to happen if you cannot make your own decisions about your care. These papers can include a power of attorney (POA) for health care, a living will, a do-not-resuscitate (DNR) form or a physician orders for life-sustaining treatment (POLST) form.

You have the right to:

1. Have your advance directives followed if they are available. If your advance directives are not available and you cannot speak for yourself, emergency life-saving treatment will be provided until your wishes are known. Please ask for help with advance directives if needed.
2. OSF HealthCare will not participate in any directly intended cause of harm to a patient that will result in the death of the patient or of a third party, including euthanasia, suicide or physician-assisted suicide. This position is protected by Illinois law.
3. OSF HealthCare will never make decisions for a patient unless the patient has an advance directive. If a provider is unable to make decisions for a patient, the provider will make decisions for the patient if the provider is determined to be unable to make decisions for the patient.
4. Have your health records kept private.
5. Have your health records provided to you when you leave the hospital.
6. Have your health records available to you.
7. Have your health records kept private.
8. Have your health records available to you.
9. Have your health records kept private.
10. Have your health records available to you.
11. Have your health records kept private.
12. Have your health records available to you.
13. Have your health records kept private.
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17. Have your health records kept private.
18. Have your health records available to you.
19. Have your health records kept private.
20. Have your health records available to you.

RECEIVING CARE

You have the right to:

1. Receive health care. Your age, race, color, creed, national origin, language, disability, source of payment, sex, sexual orientation or gender identity does not affect your right to receive health care.
2. Receive a medical screening exam in the emergency room (ER). You have the right to have your emergency condition stabilized in the ER. You will receive a prompt and safe transfer to the care of others if we are not able to meet your requests or medical needs.
3. Be free from neglect or mistreatment. You have the right to be free from verbal, mental, physical or sexual abuse.
4. Receive care without being restrained. We will use restraints only to keep you and others safe. You will be restrained only if other methods do not protect you or others. Restraints will not be used as punishment.
5. Expect that your health care providers will work with you to manage your pain.
6. Receive care to make you as comfortable as possible at all stages of life, including end-of-life care.

VISITORS

You have the right to:

1. Decide if you want visitors, such as your spouse, your domestic partner (including your same-sex domestic partner), another family member or a friend. The hospital staff may need to limit visits or the number of visitors if:
   - You are having a procedure and your health care provider thinks it would be better for you not to have visitors.
   - Visitors may get in the way of caring for other patients.
   - You or other patients need rest or privacy.
   - A visitor is bothering you, staff members or others.
   - A visitor threatens your safety or the safety of others.
   - You or a visitor is at risk of infection.
   - You are being treated for drug or alcohol abuse.
   - There is a court order limiting visitation.

HEALTH RECORDS

You have the right to:

1. Ask for and receive a copy of your health records within a reasonable amount of time.
2. Have your health records kept private.
3. Ask for corrections to your health records.
4. Know if your information is shared with others.

CHARGES AND BILLS

You have the right to:
1. Ask for and receive an itemized bill.
2. Receive an explanation of your bills.
3. Ask for and receive an application for financial assistance. The application for financial assistance is available online at http://osfhealthcare.org/billing/

PROTECTIVE SERVICES

You have the right to:

Get help if you are identified as a possible victim of abuse or neglect. This includes child or adult protective services or guardianship.

COMPLAINTS AND CONCERNS

You have the right to:

1. Tell staff members if you have complaints or concerns about your care.
2. Have your complaints or concerns resolved timely.
3. Report a complaint or recommend a change without retaliation or interruption of care.

If you have a concern, comment or compliment about your care, please see the list of contacts on the back of this brochure.

A parent or guardian who is authorized by law has these rights for the patient. The parent or guardian must carry out these responsibilities for the patient.
**Your Rights**

**PERSONAL**
You have the right to:
1. Be treated with respect and dignity.
2. Have your privacy protected.
3. Have your beliefs and values respected.
4. Have your spiritual needs and your family’s spiritual needs met.
5. Ask and talk about the ethics of your care. This includes deciding if you want to be revived (or receive other life-saving treatment) if you stop breathing. We will help you and the members of your family agree on these decisions.
6. Have your wishes about organ donation followed.

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3. Be involved in all aspects of your care. This includes your discharge plan. You have the right to take part in all your health care decisions. This includes the right to refuse treatment and services.
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**HEALTH RECORDS**
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2. Be free from neglect or mistreatment. You have the right to be free from verbal, mental, physical or sexual abuse.
3. Receive care without being restrained. We will use restraints only to keep you and others safe. You will be restrained only if other methods do not protect you or others. Restraints will not be used as punishment.
4. Expect that your healthcare providers will work with you to manage your pain.
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Joint Commission: Fax (630) 792-9630 | www.jointcommission.org
Use "Report a Patient Safety Event" link in the "Action Center" Mail to: The Office of Quality & Patient Safety The Joint Commission One Renaissance Boulevard, Oakbrook Terrace, IL 60181

OSF HealthCare<br>Heart of Mary Medical Center Patient Advocate | (217) 841-2136 | Urbana, Illinois 61801
OSF HealthCare Holy Family Medical Center Administration | (309) 734-1400 | Monmouth, IL 61462
OSF HealthCare Little Company of Mary Medical Center Patient Advocate | (708) 223-6043, Evergreen Park, IL 60805
OSF HealthCare Sacred Heart Medical Center Patient Advocate | (217) 554-6888 | Danville, Illinois 61832
OSF HealthCare Saint Anthony Medical Center Patient Experience | (815) 381-7723 | Rockford, IL 61108
OSF HealthCare Saint Anthony’s Health Center Patient Experience | (816) 474-6395 | Alton, Illinois 62002
OSF HealthCare Saint Clare Medical Center Patient Advocate | (815) 876-2254 | Princeton, IL 61356
OSF HealthCare Saint Elizabeth Medical Center Service Excellence | (815) 431-5527 | Ottawa, IL 61350
OSF HealthCare Saint Francis Medical Center Patient Experience | (309) 655-2222 | Peoria, IL 61637
OSF HealthCare Saint James — John W. Albrecht Medical Center Patient Representative | (815) 642-6815 | Pontiac, IL 61764
OSF HealthCare St. Joseph Medical Center Patient Advocate | (309) 665-5799 | Bloomington, IL 61701
OSF HealthCare Saint Luke Medical Center Administration | (309) 852-7525 | Kewanee, IL 61443
OSF HealthCare Saint Mary Medical Center Administration | (309) 344-3161 | Galesburg, IL 61401
OSF HealthCare Saint Paul Medical Center Patient Advocate | (815) 539-1628 | Mendota, IL 61342
OSF Medical Group, OSF PromptCare, OSF OnCall Urgent Care or Care Station Contact the office directly and ask to speak with the manager.

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ATENCION: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.OSF HealthCare cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. OSF HealthCare postępuje zgodnie z obowiązującymi przepisami federalnymi i nie dopuszcza się dyskryminacji ze względu na rasę, kolor skóry, pochodzenie, wiek, niepełnosprawność bądź płeć.

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OSF HealthCare Saint Elizabeth Medical Center
Service Excellence | (618) 474-6395 | Alton, Illinois 62002

OSF HealthCare Sacred Heart Medical Center
Patient Experience | (618) 238-1842 | Alto, Illinois 62002

OSF HealthCare Sacred Heart Medical Center
Patient Advocate | (618) 238-1761 | Danville, Illinois 61832

OSF HealthCare Sacred Heart Medical Center
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OSF HealthCare Saint Clare Medical Center
Patient Advocate | (309) 978-1628 | Peoria, Illinois 61614

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stfrancis.patientrelations@osfhealthcare.org

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