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HOME CARE CLIENT'S BILL OF RIGHTS AND RESPONSIBILITIES

- I. Home health care providers shall provide each client or client's legal representative with a written copy of the rights and responsibilities listed in paragraphs II and III of this section in advance of or during the initial evaluation visit and before initiation of care. These rights apply only to the services delivered by or on behalf of the home health care provider. If a client cannot read the statement of rights it shall be read to the client in a language such client understands. For a minor or a client needing assistance in understanding these rights, both the client and the client's legal representative shall be fully informed of these rights.
- II. The statement of rights shall state that at a minimum the client has a right to:
 - (a) Be treated with consideration, respect, and full recognition of the client's dignity and individuality, including privacy in treatment and personal care and respect for personal property and including being informed of the name, licensure status, and staff position and employer of all persons with whom the client/resident has contact, pursuant to RSA 151:3-b.
 - (b) Receive appropriate and professional care without discrimination based on race, color, national origin, religion, sex, disability, or age, nor shall any such care be denied on account of the patient's sexual orientation.
 - (c) Participate in, be informed about, and consent or refuse care in advance of and during treatment, where appropriate, with respect to:
 - (i) Completion of **all** assessments
 - (ii) The care to be furnished, based on the comprehensive assessment;
 - (iii) Establish and revising the plan of care;
 - (iv) The disciplines that will furnish care;
 - (v) The frequency of visits;
 - (vi) Expected outcomes of care, including patient-identified goals, and anticipated risks and benefits.
 - (vii) Any factors that could impact treatment effectiveness; and
 - (viii) Any changes in the care to be furnished.
 - (d) Be informed that care is evaluated through the provider's quality assurance program.
 - (e) Refuse treatment within the confines of the law and to be informed of the consequences of such action, and to be involved in experimental research only upon the client's voluntary written consent.
 - (f) Voice grievances and suggest changes in service or staff without fear of restraint, discrimination, or reprisal.
 - (g) Be free from emotional, psychological, sexual, verbal and physical abuse and from exploitation by the home health care provider, including injuries of unknown source, neglect & misappropriation of property.
 - (h) Be free from chemical and physical restraints except as authorized in writing by a physician.
 - (i) Be ensured of confidential treatment of all information contained in the client's personal and clinical record, including the requirement of the client's written consent to release such information to anyone not otherwise authorized by law to receive it. Medical information contained in the client's record shall be deemed to be the client's property

and the client has the right to a copy of such records upon request and at a reasonable cost.

- (j) Be informed in advance of the charges for services, including payment for care expected from third parties and any charges the client will be expected to pay.
- (k) Make complaints to the HHA regarding treatment or care that was (or fails to be) furnished, and the lack of respect for property and/or person by anyone who is furnishing services on behalf of the HHA;
- (l) Receive all services outlined in the plan of care
- (m) Receive proper written notice, in advance of a specific service being furnished, if the HHA believes that the service may be non-covered care; or in advance of the HHA reducing or terminating on-going care.
- (n) Be free from discrimination or reprisal for voicing grievances to the HHA or an outside entity.
- (o) Be informed of their right to access auxiliary aids and language services as described in paragraph (f) of this section, and how to access these services.
- (p) Be advised of any changes in any factors that could impact treatment effectiveness. The HHA must also advise the patient and representative (if any), of these changes as soon as possible, in advance of the next home health visit.
- (q) Right to determine how much information to receive and/or to delegate a caregiver or representative to receive certain information.

III. The provider has the right to expect the client or the client's legal representative will:

- (a) Give accurate and complete health information.
- (b) Create and maintain an environment that is safe and free from sexual or other forms of harassment by the client or others in the home. For the purposes of this subparagraph, an environment is unsafe if conditions in and around the home imminently threaten the safety of the home health care provider personnel or jeopardize the home health care provider's ability to provide care.
- (c) Participate in developing and following the plan of care.
- (d) Request information about anything that is not understood, and express concerns regarding services provided.
- (e) Inform the provider when unable to keep an appointment for a home care visit.
- (f) Inform the provider of the existence of, and any changes made to, advance directives.

IV. Nothing in this section shall be construed to apply to any visiting nurse service or home aid service conducted exclusively by and for the adherents of any church or religious denomination the tenets and practices of which include reliance solely upon spiritual treatment through prayer in lieu of medical treatment.

V. Home health care providers shall not be subject to the provisions of RSA 151:21.

To lodge complaints, call Visiting Nurse Home Care & Hospice of Carroll County at (603) 356-7006 between the hours of 8:00am and 4:30pm, Monday through Friday. You may also call the New Hampshire Home Health Hotline at (800) 621-6232 between 9:00am and 4:00pm weekdays to receive information about home health services, to ask questions, or to voice a complaint. FOR THE HEARING IMPAIRED, THE TELEPHONE NUMBER IS (800) 356-5643.

Discharge Notice for Home Health Clients

Required by RSA 151:26-a,II,(f) – Effective Jan. 1, 2014

“You have a right to appeal the decision to discharge you from home health care services. If you think you should not be discharged, you or your legal representative may request an expedited administrative hearing from the New Hampshire Department of Health and Human Services or you may file an appeal in superior or probate court. You also may register a complaint with the state and federal home health care regulatory agencies. If you have a legal representative that person may act on your behalf.”