
Policies and Procedures

Section 008 – Participant Bill of Rights

Policy: LIFE Northwestern Pennsylvania (LIFE-NWPA) is committed to providing the highest quality of care that promotes the autonomy of the individual participant, and instills a level of cooperation between the participant, the family and the program.

To achieve those means, a Bill of Rights has been developed in accordance with the DPW licensing regulations and regulatory requirements, which both focus on the participants rights as an enrollee of LIFE-NWPA.

Purpose: To provide specific guidelines concerning the rights of participants enrolled in LIFE-NWPA.

Procedure:

- 1) The Participant's Bill of Rights is part of the Participant Enrollment Agreement.
- 2) During the enrollment process, the staff review these rights with the participant and/or their family member.
- 3) The signatures obtained on the signature page and the Bill of Rights confirm that the full explanation of the rights to the Participant and/or representative in a manner understood by the Participant and/or representative was provided.
- 4) The Participant's Bill of Rights is posted in a public place at the Center, and is accessible to Participants, families, staff and visitors.
- 5) The Participant Bill of Rights will be available in English and any other principal languages of the community.

8.1 Violation of Rights

Policy: To ensure that all participant rights are protected and to address action to be taken when those rights are violated.

Procedure:

- 1) Both staff and participants will be educated concerning participant rights, including:
 - A review of participant right with staff on hire date and on an annual basis.

- A review of participant rights with the participant and caregiver/representative at enrollment and on an annual basis.
- 2) If a violation of rights is suspected, concerns will be brought to the attention of the Center Manager or in his or her absence, the Clinical Manager.
 - 3) The Center Manager (or in his or her absence, the Clinical Manager) will investigate the incident in a timely manner. Family will be notified as the investigation warrants.
 - 4) Other persons to be notified, if indicated, include the Executive Director and/or outside agencies.
 - 5) Corrective action to be taken in accordance with LIFE-NWPA policy on Employee Corrective Action.
 - 6) Violation of participant rights by volunteers and providers under contract with LIFE-NWPA will be referred to the QI Coordinator with referral to outside agencies as appropriate.

Section 8
Attachment I — Participant Bill of Rights

Participant's Bill of Rights

LIFE-NWPA

As a participant of LIFE-NWPA, you have the following rights:

1. You will have considerate and respectful care from LIFE-NWPA and anyone else we may work with as part of your care. You will NOT be discriminated against, based on your race, ethnicity, religion, national origin, sex, age, sexual orientation, mental or physical disability, or source of payment.
2. You will be cared for with sincerity, interest and concern. Your care will be provided in clean, safe, and secure surroundings and in an accessible manner.
3. You will be respected as an adult. We will treat you with dignity and respect. We will be compassionate with your care. We will respect your right to personal privacy and confidentiality.
4. You will not have to perform services for LIFE-NWPA.
5. You will be able to use the telephone when you need to. We will not stop you from communicating with others.
6. You will have the best and safest care possible. You will not be given medicine that you do not need. You will not be abused physically or mentally. We will not neglect you. We will not restrain you for the purpose of discipline, convenience, or when it is not needed to care for you. We will not use corporal punishment or involuntary seclusion and no restraint will be used that is not required to treat your medical condition.
7. You will be encouraged and helped during your participation in LIFE-NWPA. We will help you to use your civil and legal rights regarding policies, services and appeals to Medicare and Medicaid. No one from LIFE-NWPA will keep you from using your rights. You will also be encouraged to tell us if there are any changes you would like to see in LIFE-NWPA so that we can talk about it with the staff.
8. You will receive truthful, easily understood written information. You will have help in making decisions about your care. We will tell you about the services that we provide, including the services we may provide through other health care people who are not employees of LIFE-NWPA. You will receive this information before you enroll, when you enroll and whenever we make any changes. At the time a participant's needs necessitate the disclosure and delivery of such information in order to allow the participant to make an informed choice.

9. You will have a LIFE-NWPA staff member talk about your enrollment agreement with you. They will explain everything about it to you and your family in a way that you can easily understand.
10. You may examine, or upon reasonable request, to be helped to examine the results of the most recent review of LIFE-NWPA conducted by CMS or the state administering agency and any plan of corrective action in effect.
11. You have a choice of health care people, within LIFE-NWPA's network, that make sure you get high quality care. Also, you can choose your primary care doctor and specialists within LIFE-NWPA's network.
12. You will have the ability to request a qualified specialist for women's health services furnish routinely and/or preventative women health services.
13. You can use emergency services when you need them without getting prior approval from your interdisciplinary team.
14. You will be able to make decisions for yourself, including what kind of care you need and how to get it. You may also decide whether or not to participate in activities. If you cannot make these decisions, then you may have someone decide for you. You will get the most helpful treatment and services to aid you in living as independently as possible.
15. You will have someone from LIFE-NWPA talk to you so that you can decide your health care wishes (advanced directives). You will have treatment choices explained in a manner that takes your culture into consideration. You have the right to decide what you want done. You can refuse treatment and have the right to be told what will happen to you if you refuse it.
16. You will be told by your interdisciplinary team about your health and how you are doing, unless you have chosen for the team or someone else to decide whether or not you should know.
17. You can help in developing and fulfilling your personal care plan.
18. You can ask the team to redo your physical exam and care plan. Even if you just had one done.
19. You will be given reasonable advance written notice if you are to be taken to another part of LIFE-NWPA's program. You will be told the reason for the move. If this is ever necessary, it will be clearly written in your records.
20. You will be able to talk confidentially with those who provide your care. They will not share any of your personal information. All the information LIFE-NWPA

- gets about you and your needs will be protected. This includes information we may use to collect data.
21. LIFE-NWPA will get your written permission before giving out any information about you to persons not legally allowed to receive it.
 22. You can tell us how much information a person can have and to whom you want the records sent.
 23. You can look at and copy your own medical record. You may ask for changes to be made to your record.
 24. You will have a fair and timely hearing when disagreements come up with LIFE-NWPA. You will also be able to appeal any disagreements about your care that was made by LIFE-NWPA, either our own employees or anyone else who has made decisions about your care. We will assure that there will be no restriction, meddling, force, discrimination, or retaliation by LIFE-NWPA staff.
 25. Any pictures we take of you will be used only to identify you or to monitor your medical progress. We will not give pictures to newspaper, television, or radio people without your written permission.
 26. You will be told of all of your rights and responsibilities. You will also be told of all rules and regulations that are expected of you as a member of LIFE-NWPA.
 27. You will be able to involve yourself in activities that help you learn, grow, and use your talents.
 28. You have the right to voluntarily disenroll from the LIFE program without cause at any time, effective on the first day of the month following the date that LIFE-NWPA receives your notice.