



## **Patient Rights and Responsibilities Statement**

### **AS A WHITMAN-WALKER HEALTH (WWH) PATIENT, YOU HAVE THE RIGHT TO:**

#### **ACCESS SERVICES in a safe and respectful manner**

- Receive services at WWH regardless of your race, color, religion, sex, marital status, sexual orientation, gender identity or expression, English language proficiency, national origin, age, disability, veteran status, or any other status protected by law.
- Receive respect and consideration from every employee, volunteer, or trainee you interact with at WWH.
- Feel safe from harm and free from verbal, physical, or psychological abuse, intimidation, or harassment when you are at WWH's facilities.

#### **PRIVACY regarding your personal health information**

- Expect WWH to comply with the Federal and State privacy laws when using or disclosing information about you or the health care and related services you receive at WWH.
- Receive a copy of WWH's Notice of Privacy Practices when you register as a new patient so that you will be more fully informed about your privacy rights.

#### **ACTIVE INVOLVEMENT in your ongoing care**

- Help WWH providers and staff to develop a plan for the treatment and services you receive at WWH.
- Provide (or withhold) your consent to voluntary treatment, including your participation in clinical research, and be informed about the consequences of refusing any treatment or service.
- Provide WWH staff members with positive or negative feedback about your care or voice your concerns or complaints about WWH.

#### **TIMELY INFORMATION about your care**

- Receive complete information about your diagnosis and treatment or service plan in plain language that you can understand.
- Obtain a copy of your medical records upon request unless the law permits WWH to withhold the records.
- Receive an explanation of the costs associated with your care at WWH.
- Obtain assistance with referrals to other providers.

#### **QUALITY SERVICES from WWH**

- Receive coordinated health care treatment and services consistent with professional standards.

- Receive services from licensed and credentialed WWH providers.
- Request WWH to provide hearing, language, literacy, or other communication assistance required by law.
- Receive services and care in the least restrictive environment feasible, free from chemical or physical restraints.

## **AS A WWH PATIENT, YOU ARE RESPONSIBLE FOR:**

### **YOUR PERSONAL INTERACTIONS with the WWH Team**

- Treat WWH employees, volunteers, trainees, contractors, other patients, and guests with respect at all times.
- Do not make any threatening or offensive statements at WWH's facilities.
- Do not engage in any act of physical violence or other threatening or inappropriate behavior at WWH's facilities, which includes bringing a weapon of any kind on site.
- Do not distribute or use alcohol or drugs on WWH's property or enter a WWH facility or program under the influence of illegal drugs or alcohol.
- Take responsibility for all your personal belongings and valuables; WWH is not responsible for replacing lost, misplaced, stolen, or damaged belongings and valuables; therefore, WWH asks that patients and visitors bring only essential items to their appointments.

### **ACTIVE ENGAGEMENT in your care**

- Take an active part in your treatment or service plan at WWH and stay in contact with your providers about your care.
- Request any hearing, language, literacy, or other communications assistance you may need at least 48 hours prior to your visit.
- Show up for your appointments at least 15 minutes ahead of schedule and provide advance notice whenever it becomes necessary to cancel an appointment at WWH.
- Contribute to the cost of your care that the law or the health plan that you participate in require you to pay.

### **TIMELY INFORMATION sharing**

- Provide WWH with complete, accurate and truthful information at all times.

WWH's Patient Rights and Responsibilities Statement grants WWH discretion to take action placing limits on a patient's ability to receive treatment or services at WWH, based on a patient's failure to meet their Responsibilities or for any other reason permitted by law. Likewise, any WWH patient has discretion to decide not to seek further treatment or services at WWH based on WWH's failure to abide by the patient Rights set forth in this Statement or for any other reason.

**If you believe your rights as a Whitman-Walker Health patient have been violated, please contact our Compliance Department at 202.797.4450.**