



# PATIENT INFORMATION GUIDE

# MACLEAN DISTRICT

# HOSPITAL

2018/2019



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# Welcome

We know that coming into hospital can be an overwhelming experience for many people. This Patient Information Book is designed to provide information for you and your family/carers about planning your stay in hospital.

Our team strive to provide the best care for our patients, so we encourage your involvement and the involvement of your carers throughout your hospital stay.

We are happy to provide any further information that you may require. Please feel free to speak to your doctor, nurse, the Nursing Unit Manager\* of the ward you are in, or the After-Hours Hospital In-Charge (you can ask a staff member to contact them for you).

Please let us know if this Patient Information Book does not meet your needs, so that we can make further improvements – you can give your comments to the Nursing Unit Manager.

*\* Nursing Unit Manager (NUM): Nursing staff member who is in-charge of the ward. A poster with their photo is available at the entry of each ward.*

### Our Contact Details:

#### Maclean District Hospital

21 Union Street, Maclean. Phone 6640 0111.

#### Community and Allied Health – Maclean

21 Union Street, Maclean. Phone 6640 0123 (8:00am – 4:30pm).

#### Grafton Mental Health Services

175 Queen Street, Grafton. Phone 6641 8250 (8:30am – 4pm).

#### Drug and Alcohol Service (Counselling) – Grafton

184 Arthur Street, Grafton. Phone 6641 8702 (8:30am – 5pm).

#### Northern NSW Local Health District

<https://nswlhd.health.nsw.gov.au/>



#### VISION STATEMENT

Better Health and Excellence in Health Care

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## The Services We Provide

Maclean District Hospital includes:

- Emergency Department
- 2 Medical wards (Acute and Sub-Acute/Rehabilitation Unit)
- Day Surgery Unit
- Medical Imaging/X-ray
- Pathology Service
- Hospital-in-the-Home Service
- Community & Allied Health Services.

### Ground Floor

The **Emergency Department** is staffed 24/7 by experienced doctors and nurses. Patients are seen in order of need rather than the time they arrive. You may have to wait longer if somebody sicker than you comes in. We appreciate your patience if there is a delay. We provide treatment in the Emergency Department for children. Children may need to be sent to another hospital for ongoing treatment, if they need it.

The **Day Surgery Unit** operates every Tuesday and once a month on a Friday for minor surgery. There is also an outpatient clinic every Wednesday for people needing procedures like blood or iron transfusions.

The **Medical Imaging Department** provides X-ray and ultrasounds – these are different ways of taking pictures inside your body. This service is open 7 days a week and an After Hours service is provided for emergencies. Patients who have a referral from a doctor outside of the hospital can use this service – for X-rays 7 days a week (8:30am to 4:30pm) and for ultrasounds Monday to Friday (9:30am to 2:30pm).

### Level 1

The **Sub-Acute/Rehabilitation Unit** has 19 sub-acute beds and 10 rehabilitation beds. Sub-acute patients are people that don't need a high level of care. Rehabilitation includes programs to help people recover from major events, like strokes or accidents. Rehabilitation programs are developed by Allied Health professionals including: Physiotherapists, Occupational Therapists and Speech Pathologists.

There is a quiet room at the end of the Rehabilitation ward which you can use at any time to speak with your doctor, your minister or your family/friends in privacy or if you would like to have some quiet time for yourself.

### Level 2

The **Acute ward** is a 14 bed unit for sicker general medical patients. Patients can have heart monitoring on this ward. You may be transferred to the Sub-Acute ward if other patients come in with more serious illnesses.

You may need to be moved to another hospital, ward or room during your hospital stay. We do our best to avoid this happening, but sometimes this may be required, so that we can provide the best possible care for all patients.

## Visiting Hours

### General Wards

Visiting hours in the general wards are between 8:00am to 8:00pm, at the discretion of the nursing staff. If patients are critically ill or family/carers want to help with patient care, such as help with meals, times should be arranged with nursing staff.

## Community and Allied Health

Community and Allied Health Services are located next to the Emergency Department. Opening Hours: 8:00am – 4:30pm. These services are free and often do not need a referral. Services include:

- Physiotherapy/Occupational Therapy/Speech Therapy
- Community Nursing/Aged Care Assessment Team/Transition Aged Care
- Palliative (end of life) Care
- Cardiac (heart) & Respiratory (lungs) Services
- Child & Family Services
- Aboriginal Health
- Dietetics/Diabetes Management
- Podiatry (foot problems)
- Counselling Services
- Chronic Disease Management.

Other Services:

- Mental Health/Drug and Alcohol Services.

For more information: <https://nswlhd.health.nsw.gov.au/about/community-health/maclean-community-health/>

## Keeping You Safe

We are committed to providing safe and efficient patient-centred care.

All Nursing handovers are at the bedside and we involve you and your family/carer. We understand that you and your carer/family can provide valuable input towards your care in hospital. You are encouraged to be involved in the planning of your care. It is important that we all work together so that your treatment and plan of care meets your needs. We also want to be able to discharge you from hospital (send you home) as soon as possible.

If you or any family member/carer/visitor notices that you are becoming more unwell, please report this to the nursing staff. The REACH Program has been introduced to help this process, see page 18 for further information.

You have the right to ask us to wash our hands if we have not done so. We must wash our hands or use a hand sanitiser in between patients and procedures – if you don't feel comfortable speaking to us, please ask to speak to the Nursing Unit Manager or After-Hours Hospital In-Charge.

You will have regular clinical observations recorded (for example, temperature, heart rate, blood pressure) – if these are abnormal for you, then you will be reviewed by a doctor/clinician. Some of these observations will take place overnight – please know that if we wake you up it is to make sure you are safely monitored during your hospital stay.

Please bring comfortable, well-fitting shoes for when you are standing or walking around. We also ask that you follow our instructions and please ask for help to move around if you need it. Most falls in hospitals happen when patients do not ask for help.

We have non-slip socks available if you are at risk of falling.

## Patient Care Information

### Admissions – Emergency, Booked and Surgery

An admission to hospital means that you have to stay in hospital for treatment or care.

The admission process involves a number of checks and forms to be completed by you and our staff. We will ask you some questions – some of these may be sensitive or personal, however, they help us provide the best care possible.

Emergency admissions to hospital, take place in the Emergency Department. If there is no bed available on the ward, your care will continue in the Emergency Department until a bed is available.

Booked admissions are arranged for a certain date. Priority is given to patients with more urgent conditions. Booked admissions may be delayed if other emergency admissions occur.

### What to bring to Hospital?

- Pyjamas/night dress
- Day clothes as required
- Dressing gown
- Appropriate well-fitting footwear
- Toiletries, including dentures and hearing aids
- Private Health Fund card if you have one
- Small amount of money (for newspapers etc.)
- Your medications in their original container (these will be returned to you)
- X-rays, CT scans, Ultrasounds and other test results
- Suitable reading material, or other activities such as knitting etc.

### What NOT to bring to Hospital

- Valuables, jewellery, credit cards or large sums of money
- Radios without headphones
- Television sets
- Electrical appliances (except for razor, hair dryer)
- Alcohol, recreational drugs, cigarettes.



### Surgery Admissions

Patients who need to have surgery (or an operation) booked at the hospital, will be given a Request for Elective Admission (**RFA Pack**) from their Surgeon. You need to **complete** this RFA Pack as soon as possible and send it to the hospital (either bring the form to the Admissions Clerk or mail to: Maclean District Hospital, PO Box 93, Maclean, 2463).

A signed consent form is required before you can have an operation. There is a consent form included in the RFA Pack – this should be filled out by your doctor and signed by yourself or someone able to consent on your behalf. More information about consent is on page 12.

Once we receive this form back from you, we will book your operation date. The date depends on how urgent the surgeon has told us your operation is. Before your operation, we will assess you to see if you need to have an appointment with an Anaesthetist. An Anaesthetist gives you medication and makes sure that you are safe during your operation.

We will send you a letter with the date of your surgery and any other appointments you need. If you have any questions about your surgery admission, please call this number – phone 6640 0105.

The day before your operation, we call you to tell you when to arrive and any special instructions about stopping food or medications.

On the day of your operation, please go to the Day Surgery Unit on the Ground Floor. Following your surgery, you will either be admitted to the Acute Ward or be discharged from the Day Surgery Unit. You will need to be picked up by a responsible person and you cannot drive for 24 hours after surgery.

The day after you go home from hospital, a nurse will call you. They will check you are recovering well and provide advice if you need it.

### Advance Care Directive

We recommend that you fill out an Advance Care Directive. This is a plan of what you want to happen if you become too ill to tell us your health care decisions.

If you already have an Advance Care Directive, please give the nurse a copy for our records. If you would like to complete an Advance Care Directive, we have books available in each ward. Ideally, they should be filled out with your family and GP.

### Allergy/Adverse Drug Reactions

Please let your doctor and nurse know if you have any history of allergies or bad drug reactions. We will include this information in your medical record.

Your doctor and nurse will also check if you have any allergies before they prescribe any new medication, and when they give you any medications during your hospital stay.

If you receive any medication in hospital and feel you may be having a reaction, let your doctor or nurse know immediately.

You can self-report adverse events to any medicine or vaccine, including medicines you get on prescription and over-the-counter medicines, to the Therapeutic Goods Administration – visit <http://www.tga.gov.au/reporting-adverse-events>

### Blood Clot Prevention

You may develop a blood clot if you have a number of risk factors, including:

- Immobility (you cannot move around by yourself)
- Previous strokes
- Family history of blood clotting problems
- Overweight
- Heart failure
- Smoking, and
- Taking the contraceptive pill.

We will assess your risk of developing a clot. If you are at risk, we will ask you to wear compression stockings or start you on some medication to prevent blood clots. Your doctor will explain these treatment options with you.

If you have a sudden increase in pain or swelling in your legs, pain in your chest or difficulty breathing, please tell your nurse immediately. If you get these symptoms at home after you have left hospital, please get emergency treatment.

### Blood Transfusions

Some patients need a blood transfusion during their stay in hospital. A blood transfusion is a procedure where you receive blood through an intravenous cannula (IV) inserted into a blood vein.

Some patients need a transfusion of other parts of blood e.g. platelets or plasma.

These transfusions can have risks. Your doctor will explain these risks to you and then ask you for your consent before we can give you the transfusion – you will need to sign a consent form. Please see page 10 and 11 for more information about consent.

For more information on blood transfusions, please visit our website: <https://nswlhd.health.nsw.gov.au/about/patient-blood-management/blood-and-blood-product-transfusion/>

### Clinical Handover

Clinical Handover is the transfer of responsibility and accountability for your care to another health professional.

This is usually done face to face at the bedside and where possible, you are encouraged to be involved. The Nurses who cared for you will introduce you to the next shift. They will discuss what has happened to you and your plan of care – please clarify information, ask questions and add any information you think may be helpful.

This can be done in a number of ways:

- Nurse handover to another nurse at the bedside when they change shifts
- Doctor handover to another doctor
- Allied Health handover to another Allied Health professional
- If your condition gets worse and we are asking for a doctor to see you
- During transfer of care to another health professional or health care facility.

### Communication Board

Each bed has a communication board. We will write the name of the Doctor and Nurse caring for you. We will write the Estimated Date of Discharge (EDD) to help you and your family plan for when you go home, and write plans for your care (e.g. X-ray appointment).

### Consent

An informed signed consent form is required for any patient having an operation or certain procedures or treatment.

Informed consent is needed for:

- Operations
- Anaesthesia (medication that blocks pain during surgery)
- Blood transfusions
- Unusual medications
- Photographs and audio-visual recording
- Other certain procedures where consent is required by law.

You cannot have any of these procedures or medications if we do not have a signed consent form from you, or from someone able to give consent on your behalf.

Informed consent means that you understand the details of your operation. Your doctor has a duty to explain:

- Your medical condition
- The treatment you are getting (including any other treatments available)
- The benefits, risks and possible complications of the treatment. This is so you can make the best decision for you.

We also need your consent before you have any other treatments or procedures, but this does not always mean you have to sign a consent form. Your consent can include you saying 'yes' when we ask if it is OK to do these treatments or procedures.

If you do not understand the details of your operation or treatment, ask to speak to your doctor or nurse.

### Discharge Planning

Discharge Planning helps us to arrange your health care needs once you leave hospital. Health professionals will help you and your family/carer with this planning process. The Nursing Unit Manager can help with concerns about your discharge.

If you think there will be problems for you returning home, speak to the nursing staff well before your discharge date. There are programs available which will help you settle back into the community and reduce the chances of you returning to hospital, for example – Meals on Wheels, Community Nurses, Physiotherapy, Falls Prevention Programs, Diabetes Coordinator and Aboriginal Liaison Officer.

You may be given prescriptions for medication. It is your responsibility to get these filled at your local Chemist.

If you have a wound that needs dressings/bandages, we will arrange for a nurse to visit you at home or we will make an appointment for you to see a nurse at the hospital clinic.

Follow-up appointments will be made at the hospital before your discharge. Community Support Services will not be arranged without talking to you or your family/carer. We will ask for your consent before referring you to any service.

### Patient Empowered Care

Please ask your doctor questions before you are discharged home, to make sure we have covered everything to meet your needs.

You could help us by asking your doctor these questions during your hospital stay and before you are discharged:

- When will my GP get information about my stay in hospital?
- Can I have a written list of my medications to take with me when I go home?
- What do I have to do next? (e.g. follow-up appointments)
- Are there any test results that still need to be followed up? (How do I get my test results, who should I follow them up with?)
- Who should I contact if I have any questions?
- Is there anything else I should know about my stay in hospital?

Your doctor will send a letter to your general practitioner (GP)/regular doctor once you are discharged from hospital, so they can provide ongoing care – please tell your doctor or Nursing Unit Manager if you do not want this information to go to your GP. If you are concerned about your condition or treatment when you go home, please contact the hospital (6640 0111) or your GP.

### Falls Prevention

There is an increased risk of falling in hospital. The reasons could be:

- Unfamiliar surroundings
- Your medical conditions
- Medications you may be taking
- Impaired mobility, or
- Just feeling unwell.

We will try to help reduce the risk of you falling by:

- Familiarising you with your surroundings
- Assessing your risk of falling – the results will be discussed with you and your family
- Putting prevention strategies in place if you are at risk of falling or you were admitted after having a fall
- Providing assistance to help you to move around.

You can help us by:

- Waiting for staff to assist you
- Using mobility aids provided to help you walk around e.g. wheelie walker
- Using non-slip socks or appropriate footwear
- Using your call bell if you are feeling unwell or unsteady so we can assist you.

We have Falls Packs available on each ward. Please ask staff for this pack if you would like more information.

### Hand Hygiene

We are making every effort to reduce the spread of infection. We take hand hygiene (making sure hands are cleaned properly) very seriously.

Hand Hygiene involves staff, patients and visitors. Hand sanitisers have been placed at entrances, lifts, corridors and in all patient rooms. Visitors are asked to use hand sanitisers before and after visiting patients.

You can also help by washing your hands:

- Anytime they feel dirty
- Before and after you eat
- After you use the toilet or bed pan or urinal
- If you touch a wound dressing/bandage
- After coughing, sneezing or blowing your nose
- Before and after you leave your room.

### Hourly Rounds

Our nursing staff do hourly rounding. This means at least once each hour a nurse will check:

- Your position in bed/chair
- Your personal belongings are within reach
- Your pain is under control
- Your medications
- If there is anything you need.

### Medicines

We are responsible for providing all necessary medicines during your hospital stay.

If you have any medicines prescribed by your own doctor or bought 'over the counter' from a Chemist, health food store or traditional medicines, please give them to the nurse – this includes herbal, homeopathic preparations and bush medicine. We will send all your 'own' medicines home with your family/carer once you are admitted.

While in hospital, it is important that you only take medicines that are prescribed and given to you by us. When we give you your medicines, we will:

- Check your armband with your details on it
- Ask your name and Date of Birth
- Ask you what medicines you think you are having
- Ask if you have any allergies
- Have 2 nurses check any restricted medicines given to you.

Doctors, nurses and pharmacists can discuss your medicines with you/your family or carer. We can also provide written information to help you understand your medicines, especially newly prescribed medicines. If you require this written information, please ask your doctor, nurse or pharmacist.

Your doctor should give you a list of your current medicines when you are ready to go home from hospital. Please ask your doctor if you need this list before you go home.

### Patient Identification

We must correctly identify patients and match your name to the treatment being given. If we do not, there is a risk of us giving the wrong treatment to the wrong person.

We need to constantly check our patients. We understand our checking can be off-putting, but we care about your safety and appreciate your understanding.



### Pressure Injuries (bed sores)

Pressure injuries are areas of damage to the skin or underlying tissue. They are caused by too much pressure in one place. They can develop quite fast.

We will help you to prevent pressure injuries in hospital by:

- Assessing your risk factors. The results will be discussed with you and your family
- Putting strategies in place if you have been identified at risk of developing a pressure injury or if you already have one
- Providing equipment, if required (e.g. special bed or mattress).

You can help us by:

- Moving regularly (change your position every 20-30 minutes)
- Telling us if your bedding is moist or creased
- Telling us if you have any tender spots or reddened skin areas
- Looking after your skin – put moisturiser on dry skin
- Eating a balanced diet.

We have Pressure Injury Prevention (PIP) Packs available. Please ask staff for this pack if you would like more information.

### R.E.A.C.H

Are you worried about a recent change in your condition or that of a loved one?

**REACH** is a communication process which will help you share your concerns with us.

What does REACH stand for:

**R: Recognise:**

You or your loved one may recognise a worrying change in your condition.

**E: Engage:**

If you or your loved one recognise a worrying change, talk to the nurse that is looking after you. Tell the nurse your concerns.

**A: Act:**

If your concern is not responded to, or you or your loved one is getting worse, act. Ask to speak to the Nurse in charge and request a 'Clinical Review'. This should occur within 30 minutes.

**C: Call:**

If you are still concerned, you can call an emergency response by calling the hospital number and ask for the 'In Charge of Hospital' to be paged. Clearly say 'This is a REACH call' and tell the operator the name and ward of the person you are concerned about.

**H: Help is on its way**

You will not offend staff if you R.E.A.C.H out. We support patient and family/carer involvement. We also encourage you to raise your concerns with us during times of Clinical Handover between staff shifts.

We have REACH brochures available. Please ask staff if you would like this brochure.

## General Information

### Alcohol

Hospital Policy does not allow alcohol in the hospital for patients or visitors. Patients may be allowed alcohol only if ordered by a doctor.

### Accommodation for Family

Nearby motels provide accommodation. Maclean post code is 2463 if you need to search for accommodation using the internet.

Relatives of critically ill patients or parents of children in hospital, are able to remain in hospital beyond visiting hours. Please negotiate this with the Nursing Unit Manager.

### Clothing

Lockers and storage cupboards are provided for your personal clothing.

### Compliments and Complaints

We regard compliments and complaints in a positive way so that we can improve our care for you, your family and/or carers. All complaints are investigated with confidentiality and fairness. Your satisfaction is important to us.

If you receive a service or care that you feel is exceptional or warrants complimenting, please feel free to register a compliment with us.

A complaint is an expression of dissatisfaction by a patient/consumer or another person about access, treatment, communication, services or policies.

Compliments and complaints can be made:

- Verbally either over the phone (6640 0100) or face to face;
- In writing or by email: <https://nswlhd.health.nsw.gov.au/about/northern-nsw-local-health-district/complaints-and-compliments/comments-queries-and-feedback/> or
- In writing using our compliment/complaint card – please ask the receptionist, if required.

### Confidentiality and Privacy

Your medical record remains confidential (private). We must keep your information confidential by law. Please ask us if you want any information from your medical record.

Health care professionals who are treating you can access your medical record, wherever treatment takes place.

Your answers to our questions will remain confidential and your privacy ensured during any examination. Discussions will be discreet and only with staff involved with your care.

A discharge summary can be sent to your GP (General Practitioner) when you leave hospital. If you do not wish for this to happen, please tell the Nursing Unit Manager.

There is strict control of access to certain records such as:

- Sexual assault
- Drug and alcohol
- HIV/AIDS
- Domestic violence
- Sexual health
- Mental health
- IVF and artificial insemination programs
- Records of children considered at risk.

Sometimes, information from medical records may be used for teaching or research. Your identity will not be shared if we use your records for these purposes. Where possible, we will get your consent for this. Any person who has access to personal health information must legally keep it confidential.

If the NSW Ministry of Health extracts information about you, most of the time names are removed from the record before reporting. Other authorities are legally allowed to see information about:

- Medicare eligibility
- The registering of births and deaths
- Circumstances of death
- Drink-driving
- Cancer cases.

You are entitled to see information about yourself written in your medical record. If you need any information from your medical record, please ask us.

**HealtheNet** is a secure online summary of your personal health information from NSW public health services. HealtheNet provides access to **My Health Record**. HealtheNet and My Health Record provide us with better information about your health care. For further information, go to: [www.ehealth.nsw.gov.au](http://www.ehealth.nsw.gov.au) and <https://www.myhealthrecord.gov.au/>

### Cultural Background

We care for all patients regardless of race, nationality, culture, language, religious beliefs and choices.

We will ask 'Are you of Aboriginal or Torres Strait Islander origin?' to all patients. This is a mandatory requirement from all NSW Health Services to collect this information. This allows the health service to ensure that if you identify as Aboriginal or Torres Strait Islander, you have an opportunity to services such as the Aboriginal Liaison Officer, if you choose.

If you or your family/carer are not fluent/confident in English or are hearing impaired, we can arrange for a healthcare interpreter, if required. Please ask staff if you require this service.

### Donations

Donations may be made to the Hospital for specific items or equipment or to general funds. They may also be left in the form of a bequest. All donations of \$2 or more are tax deductible. No matter how small, donations are always welcome and appreciated.

### Gifts of Food, Drinks, Sweets

Visitors are asked to talk to us before giving you any food or drink. Some patients are on special diets due to swallowing difficulties or diseases such as diabetes. Giving the wrong food to you could result in serious harm.

### Hairdresser

Please ask us if you require any hairdressing service.

### Health Literacy/Health Information

We aim to provide you with information that you can understand. If you do not understand the information that is given to you either by the health professionals or the written information in brochures or pamphlets, please let us know.

You can visit the Health Literacy website for tips on taking charge of your health – <https://healthliteracy.nswlhd.health.nsw.gov.au/>

### Hospital Auxiliary

The Hospital Auxiliary provides a trolley service to the wards. The trolley carries sweets, drinks, books, stationery, toiletry requirements etc.

All funds are used to improve the hospital facilities. Donations are welcome and can be made directly to the Hospital Auxiliary.

### Justice of the Peace

A Justice of the Peace is available to witness documents. Please ask the Nursing Unit Manager if you require this service.

### Mail

Mail is delivered to the ward. If you would like to post something, you can give it to the nurse or Ward Clerk.

### Meals

The Catering Department operates between 6:00am and 8:30pm, 7 days a week. They offer a large range of meals to accommodate all tastes and recommendations from health professionals (i.e. speech pathologist, dietician & doctors).

A menu is provided and we ask what meal you would like before each meal time. We can provide meals to suit your preferences, such as vegetarian, vegan or Gluten Free meals. We can assist you at each meal if needed. Please ask if you need assistance.

Meal times are as follows:

Breakfast:	7:30am
Morning Tea:	9:30am
Lunch:	12 noon
Afternoon Tea:	3:00pm
Dinner:	5:00pm
Supper:	6:30pm

There is no convenience store within the hospital. There is a general store in the main street of Maclean.

### Mobile Phones

Mobile phones can be used in the hospital, however, you will need to ask nursing staff because using your phone may affect medical equipment. Consideration for other patients is expected and please do not use your mobile phone while staff are trying to treat you. Visitors may be asked to leave the ward to use their mobile phone.

### Newspapers

A daily newspaper is provided if you are a private patient.

### Parking

There is limited parking available within hospital grounds. There is free parking available in nearby streets.

### Personal Laundry

This should be arranged with your family or friends. The hospital does not provide laundry facilities for patients.

The Rehabilitation ward has laundry facilities to help patients with their Rehabilitation.

### Security

At certain times, outside doors to the hospital and checks inside the hospital are done during the night. We employ Hospital and Security Assistants who have security training and hold a security licence to help keep you safe. These staff wear an identification badge.



### Smoking

Our hospital is smoke-free. Please do not smoke in hospital buildings or anywhere outside on hospital grounds. You may be fined if you are smoking on site.

Nicotine Replacement Therapy (NRT) can help you manage cravings for smoking. You may be able to get free NRT during your hospital stay and 3 days' supply when you leave hospital. Please ask us if you have any questions or concerns about cravings, quitting and using NRT while in hospital.

It's a good idea to quit or reduce your smoking before you come to hospital. For support and advice, phone Quitline on 137848 or go to the website [iCanQuit.org.au](http://iCanQuit.org.au) or get the My QuitBuddy app.

### Spiritual Needs

Religious representatives/clergy are welcome to visit you during your stay and can be called at any time if you wish. Please ask the nurse caring for you to arrange this. There is also a quiet room located on Level 1.

### Staff Identification

We all wear an identification badge showing our name, role and photograph. Categories of staff can be identified by their uniforms. Posters showing the different uniforms of staff are located throughout the hospital.

### Telephones

There are bedside telephones available for incoming calls. Calls asking about patients, or to speak to patients should be made after 10:00am. This allows us to do our morning rounds.

### Television Rental

There is a television available in all rooms. If you wish to bring your own radio or laptop, ear phones must be worn.

Any electrical equipment you bring into the Hospital must be checked, authorised and certified by our staff Electrician.

### Toilets

For health reasons, visitors are not to use the patient toilets (including ensuites). Visitor toilets are in Emergency Department waiting rooms and Ground Floor.

We clean the bathroom and toilets regularly. If you feel the toilets needs further cleaning, please let the nursing staff know.

### Valuables

Valuables include – cash, cheque books, bank cards (debit and credit cards), 'valuable' cards (licence, pension card, DVA card), jewellery and keys.

Wherever possible, please do not bring valuables to hospital. We cannot accept responsibility for your personal property, except for valuables that are placed in the hospital safe. If you do bring valuables with you to hospital, you are requested to please send them home with a family member.

Please tell us if you need valuables and money to be locked in the hospital safe. Your valuables will be checked by two staff members with you and you will be given a receipt for the items being placed in the hospital safe. Money over \$500 will be placed into an account on your behalf and returned to you via electronic transfer to a bank account of your choice within 5 business days.

Please take care of your personal items – false teeth, spectacles/glasses, hearing aids, walking aids, clothes, toiletries etc.

When you are ready to go home, collect your valuables from the Front Office during business hours. You will need to have your hospital Identification Band and your valuables receipt. If a family member is collecting the valuables, they will need to show staff written consent from you, the valuables receipt and photo identification.

We are not permitted to make payments or do shopping on your behalf – please ask your family/carer to help with this. If it is absolutely essential that we assist you, there are procedures we must follow.

## Hospital Fees and Health Insurance

Charges/fees for hospitalisation are based on whether you have decided to be a **chargeable** patient (using private health insurance or paying fees yourself) or a **non-chargeable** patient (using Medicare rebates only).

If you have private health insurance and choose to use this, you will be considered a chargeable patient. You have the right to choose your doctor. See below for more information for chargeable (privately insured) patients.

If you choose to be admitted as a non-chargeable patient (Medicare only), you will be cared for by a doctor selected by the hospital.

You will be asked to sign a 'Patient Election Form' to tell us of your choice. If you do not understand this form, please ask a staff member to help you before you sign it.

### Privately Insured patients

If you choose to be privately insured, you are responsible for finding out if your health insurance fund will provide the cover that you need. You will have no out of pocket costs for your hospital care. This means you will not have to pay any money to the hospital.

You will be asked to sign private elective forms. We submit these forms to Medicare and your health insurance fund for you. Your health insurance fund will then give you a statement of your hospital costs, for your record.

There may be **out of pocket expenses** for your care from your **specialist doctors**. You should ask your specialist doctor about this – if you have to pay any fees, you will be sent a bill from your doctor.

If you come to hospital through the Emergency Department, you will firstly be cared for by the on-call Specialist doctor best suited for your condition. You may choose to be transferred to the care of your preferred doctor, if available.

After you leave the hospital, your Specialist doctor usually provides follow-up care in their private rooms. You may be able to go to a private hospital for further treatment or for follow-up care.

There are not many single rooms in the hospital. They are first given to patients with specific medical conditions and may not always be available for private patients.

Privately insured patients will be given a free local newspaper.

You will help our hospital if you choose to use your private health insurance. The money we get from your health fund goes directly to the wards and services providing your care.

### **Self-funded Private Patients**

If you do not have private health insurance, you can still choose to be treated as a private patient. You will have to pay for staying in the hospital, your medical care and tests and any other fees yourself.

Hospital bills will be sent to your home address after you leave hospital. You cannot get this money back from Medicare if you have chosen to be treated as a private 'chargeable' patient and you do not have private health insurance.

### **Non-chargeable Patients (Medicare)**

There will be no charges for any healthcare-related service if you have a Medicare card. If you are not sure if you are eligible for Medicare, please ask us.

### **Long Stay Patients**

A long stay patient is someone who is a patient in hospital (public or private) for longer than 35 days (without a break of more than 7 days). After this, your doctor must decide if you still need acute treatment (short term, urgent care). If your doctor decides you do not need acute care, then you may be classified as a 'Non-Acute Patient'.

This means an accommodation charge will apply, it does not mean you are going to be sent to a nursing home. This is a fee for staying in the hospital when you do not need acute care anymore – these charges are called a 'patient contribution'. This means you cannot claim them on your Health Insurance or Veterans Affairs. For more information, please ask to speak to the Ward Clerk.

# Your Rights and Responsibilities

## Your Rights as a Patient

The Hospital recognises the Australian Charter of Health Care Rights. These include:

### 1. Access

#### You have a right to health care

- You will have access to services based on your medical condition and the urgency for treatment. If the care you need is not available, you may be transferred to wherever this is best provided
- You will have access to treatment regardless of your gender, disability, culture, religious beliefs, sexual orientation or age
- You will have a choice of being treated as a public or private patient in a public hospital. Please refer to Pages 27 and 28 for more information.

### 2. Safety

#### You have a right to safe and high quality care

- You will have access to qualified health professionals and quality care.

### 3. Respect

#### You have a right to respect, dignity and consideration

- You will be treated with courtesy and respect for your culture, beliefs, values and gender. For patients of Aboriginal or Torres Strait Islander descent, there is the support of an Aboriginal Liaison Officer.

### 4. Communication

#### You have a right to be informed about services, treatment, options and costs in a clear and open way

- You will be provided with information about your condition, the treatment options, risks and alternatives
- You can have an interpreter if you speak another language. Free translation services can be provided in person or by phone
- You can have a relative, carer or other support person to help you communicate with your health professional.

### 5. Participation

#### **You have a right to be included in decisions and choices about your care**

- You and your family/carer are encouraged to be involved in decisions about your health care
- You must give consent before receiving treatment, except in emergencies or where legally restricted. Please refer to Page 12 for more information
- You have the right to seek a second opinion on treatment recommended to you.

### 6. Privacy and Confidentiality

#### **You have a right to personal information being kept private and confidential**

- You have the right for the confidentiality of your condition and treatment to be maintained. Please refer to Pages 20 and 21 for more information.

### 7. Comments, Compliments and Complaints

#### **You have a right to comment on your care and to have your concerns addressed**

- You have the right to make comments, compliments and complaints about your health care. Please refer to Page 19 for more information.

If you do have any concerns, do not hesitate to contact the Nursing Unit Manager, or the Hospital Executive by phone or letter.

### Your Responsibilities as a Patient

As a patient we expect you:

- To provide complete information about your:
  - o Current issues
  - o Past illnesses and hospitalisations
  - o Medications
  - o Other matters relating to your health
- To report unexpected changes in your health to us
- To tell us if you do not understand the care being planned for you and what is expected of you
- To follow the treatment plan we recommend for you. This includes instructions from Nurses and Allied Health workers
- You may refuse treatment to the extent permitted by law
- You are responsible for your actions if you refuse or do not follow the health professional's instructions.

There are some things not allowed in the hospital or on the hospital grounds. These include:

- All weapons, illegal drugs or alcohol – having these in hospital may result in police involvement
- Any dangerous items that may cause harm to yourself or anybody else
- Smoking – fines may apply if you smoke on hospital grounds.

We will not tolerate violent behaviour or verbal abuse towards a staff member, patient or visitor. If this occurs, the person may be removed from the hospital and reported to the police.

If you would like any further information about our hospital or health network, please visit:

<https://nswlhd.health.nsw.gov.au/> or

<https://www.health.nsw.gov.au/patientconcerns/Pages/your-health-rights-responsibilities.aspx>

