

# *Family Health Care Network and Services*

## **St. Joseph Hospital**

### **St. Joseph Hospital Campus**

2700 Dolbeer Street, Eureka.....445-8121

### **General Hospital Campus**

2200 Harrison Avenue, Eureka .....445-8121

## **Redwood Memorial Hospital**

3300 Renner Drive, Fortuna .....725-3361

## **The Cancer Program**

2700 Dolbeer Street, Eureka.....269-4242

## **Community Resource Centers**

Blue Lake, 111 Greenwood .....668-5239

Eureka, 212 G Street .....442-5239

Fortuna High, 379 12th..... 725-4461, ext. 3124

Loleta Grammar Schl, 700 Loleta Dr ..845-0464

Rio Dell, 95 Center Street.....764-5239

Willow Creek 38883 Hwy. 299... 530-629-3141

## **Evergreen Lodge**

2700 Dolbeer St., Eureka .... 445-8121 ext. 7980

## **Heart Institute at St. Joseph Hospital**

2700 Dolbeer Street, Eureka..... info. 269-3770

## **Humboldt Home Infusion**

2612 Harrison Avenue, Eureka.....269-4258

## **Kris Kelly Health Information Center**

Located in the Evergreen Lodge at

St. Joseph Hospital, Eureka .....442-9094

## **Northcoast Specialty Clinic**

2752 Harrison Avenue, Suite A, Eureka

Russel Pardoe, MD, FACS, Mark Pardoe, MD

Plastic & Reconstructive Surgery.....445-3075

John Aryanpur, MD, Neurosurgery.....268-0190

## **Outpatient Laboratory Services**

2200 Harrison Avenue, Eureka.....441-4420

## **Redwood Surgical Clinic**

3300 Renner Drive, Fortuna .....725-9832

## **Rehabilitation Center:**

Inpatient Medical Rehabilitation Center

2200 Harrison Avenue, Eureka.....441-4414

Outpatient Medical Rehabilitation Center

2024 Harrison Avenue, Eureka.....441-4454

## **Sleep Disorders Center**

2367 23rd Street, Eureka.....443-7495

## **St. Joseph Home Care - Humboldt County**

Eureka.....443-9332

Fortuna .....725-3389

## **The Surgery Center**

2705 Harris Street, Eureka .....444-3882

## **Urgent Care Clinic**

2700 Dolbeer Street, Eureka.....269-3610

## **Willow Creek Family Health Center**

38883 Hwy. 299, Willow Creek.. 530-629-3111

Dental Clinic ..... 530-629-1941

**[www.stjosepheureka.org](http://www.stjosepheureka.org)**  
**[www.redwoodmemorial.org](http://www.redwoodmemorial.org)**

# *Welcome*

*Dear Patient,*

*“Dignity, Service, Excellence, and Justice” are words we live by here at St. Joseph Hospital. These are the four core values that reflect the mission of the Sisters of St. Joseph of Orange and St. Joseph Health System. During your hospitalization, these values will guide us in our efforts to comfort you and provide for your well-being.*

*This booklet contains practical information about the services available at St. Joseph Hospital. We hope it will answer many of the questions you have about the hospital. If you or your visitors have any additional questions, please feel free to ask your nurse or other members of our health care team. If there is any way we can be of additional service to you, please let us know.*

*We would be happy to hear comments on your stay as we strive to continually improve our service.*

*It is our privilege to serve you.*

*God bless and may you enjoy a speedy recovery.*

*Sincerely,  
St. Joseph Health System  
Administrative Team*



A Ministry of the  
**Sisters of St. Joseph**  
of Orange

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## *Mission Statement*

“To extend the Catholic health care ministry of the Sisters of St. Joseph of Orange, by continually improving the health and quality of life of people in the communities we serve.”

## *Our Vision and Values*

Our vision is to be recognized as a leader in providing regional integrated health care, promoting health improvements, and creating healthier communities.

St. Joseph Health System – Humboldt County is committed to the highest standards of excellence in the delivery of healthcare and to ministering to the needs of the whole person – body, mind, and spirit. This commitment is expressed in our four core values: dignity, service, excellence, and justice.

## *Our Commitment*

St. Joseph Health System’s tradition of excellence in health care dates back to 1920 when the Sisters of St. Joseph of Orange opened their first hospital in Eureka. The four core values of the St. Joseph Health System are the guiding principles for all we do, continuing a tradition of excellence and a dedication to help heal all we touch.

**Dignity of Person:** We respect each person as an inherently valuable member of the human community and as a unique expression of life.

**Service:** We bring together people who recognize that every interaction is a unique opportunity to serve one another, the community, and society.

**Excellence:** We foster personal and professional development, accountability, innovation, teamwork, and commitment to quality.

**Justice:** We advocate for systems and structures that are attuned to the needs of the vulnerable and disadvantaged and that promote a sense of community among all persons.

## *History*

The year is 1918. A flu epidemic is sweeping the United States, causing thousands of deaths. In Eureka, California, the Sisters of St. Joseph close

their school and begin serving the community in a way they never expected: health care. Wearing face masks and armed with mustard plaster and camphorated oil, the Sisters go from house to house caring for the sick and dying. The fact that they are putting themselves at risk of contracting the disease does not give them a second thought. Their mission from the days of their founding in 17th Century France is firmly in their minds: “Go out into the neighborhoods, see what the needs are, and meet them to the best of your ability.” For several months, until the epidemic subsides, the Sisters are seen all over the community from early morning until night. Surprisingly, even though the mortality rate from the flu is high, none of the Sisters dies.

The people of Eureka are impressed with the Sisters’ dedication and hard work, and ask them to consider continuing and broadening their health care ministry. The town has a 28-bed hospital which has been closed since the outbreak of World War I, and the Sisters are urged to buy and operate it. Mother Bernard, whose motto is “faith, foresight, and flexibility,” agrees. Money, however, is a problem. The hospital costs \$20,000, considerably more than the Sisters have. Ever-resourceful, Mother Bernard arranges for the transfer of some property that two young women brought with them as a dowry when they joined the convent. Traditionally, such property remains untouched during the lifetime of a Sister. But Sisters Thomas and Aloysius Croghan and their family agree that their valuable parcel of timberlands can be traded for the hospital. On the feast of St. Joseph in 1920, the old Northern California Hospital becomes St. Joseph Hospital.

Meanwhile, Mother Bernard has sent several Sisters to San Francisco and the Mayo Clinic to study nursing. Others continue teaching at their elementary school, Nazareth Academy, and spend their afternoons and weekends cleaning and renovating the hospital building. The Sisters throw themselves into the task with their usual determination and vigor, and soon St. Joseph Hospital is ready for patients. It opens on November 11, 1920, with 18 Sisters and one lay nurse. The Sisters work 12-hour shifts, seven days a week. Their job responsibilities include nursing, administration, purchasing, record-keeping, billing, laundry work, cooking – all there is. They take it for granted that everyone does just about everything. Their few hours off on Sundays is a much-appreciated luxury.

Fast forward to the present. St. Joseph Health System - Humboldt County is the second largest employer in the county. The ratio of Sisters to lay employees has reversed: there are five Sisters and 1,384 employees working at St. Joseph Hospital, Redwood Memorial Hospital, St. Joseph Home Care Humboldt County, and many community outreach programs. Over these past 85 years, the original mission of the Sisters – to respond to needs – has been

the inspiration behind the development of new programs and services.

In 1954 St. Joseph Hospital was rebuilt at a new location with 97 beds and has continued to provide primary and tertiary services to residents of Humboldt, Trinity, Del Norte and Siskiyou counties. The hospital's cancer program, heart institute, pediatric services, emergency services, ob services, Level II NICU, and medical reference laboratory are especially sophisticated for a rural hospital. In 1999, a new patient wing was completed at St. Joseph Hospital, which now offers 140 beds. St. Joseph Hospital is currently working on a Master Facility Plan to continue to meet the needs of the North Coast.

In 1954, the people of Fortuna, 30 miles south of Eureka, wanted to build their own hospital. The Pacific Lumber Company, which owned a hospital in the nearby Scotia, agreed to close it and use the new hospital of Fortuna. Land was donated by the Renner family, the Sisters provided the necessary funding, and Redwood Memorial Hospital opened its doors in 1957 under the sponsorship of the Sisters.

Today, "The Journey" at Redwood Memorial Hospital embraces a philosophy of providing holistic, patient-centered care to our community. The hospital is a recognized leader in holistic, patient-centered care, promoting the optimal well-being of the community; and providing a welcoming and healing environment that physically, emotionally and spiritually uplifts patients, families, physicians, staff and its volunteers. The hospital offers sophisticated medical surgical care, a family-centered maternity program, a busy emergency department and a CT scanner. The hospital serves a wide geographic area and extends its resources and services to Garberville.

Humboldt Home Health Services became a vital part of St. Joseph Health System – Humboldt County when it was purchased by the System in 1986. Returning to the Sisters' first health care ministry of caring for people in their homes has been especially motivating for the staff and important for patients and their families. Nurses, home health aides, social workers, volunteers, therapists, and chaplains travel south to Garberville, east to Orleans, and north to Orick, helping people to stay home and return to health. The Home Infusion Program was added to the impressive array of services offered. This program provides medications and instruction for patients and their families on how to administer IV medications at home, making a trip to the hospital unnecessary. In 2000, Humboldt Home Health Services became St. Joseph Home Care Humboldt County.

The mission of St. Joseph Health System – Humboldt County is broad and deep: to improve health and quality of life. This requires excellent health care services, but it requires more than that. The System recognizes that

health is affected at least as much by other factors. Access to food, affordable housing, a safe environment, jobs, and social supports are key determinants of the health of individuals and of communities. Therefore, the System makes a regular assessment of community needs and works with others in the community to address as many of these needs as possible. The System's Community Needs Network has provided approximately \$300,000 in grants each year for the past 12 years to a wide range of community programs.

If Mother Bernard and the 18 Sisters who staffed the first St. Joseph Hospital could pay a visit to Humboldt County today, they would be amazed and very proud. Little did they dream back in 1920 that they were launching a major health system that would reach into every corner of Humboldt County. They would marvel at the sophisticated technology and the commitment of so many employees, physicians, board members, and volunteers. They would praise the variety of services offered to the poor. They would delight at the strength and future plans of St. Joseph Health System – Humboldt County. It would all be very new to them except for one thing: the mission to seek out and meet needs. For the faith, foresight, and flexibility of those who have followed them, they would be truly grateful.

## *During Your Stay*

During your stay at St. Joseph Hospital, you have the attention of a dedicated staff of caring people who work to make your visit as comfortable as possible. Meeting your needs, whether physical, emotional or spiritual, is the main concern of everyone here. We have the skill, experience, equipment and understanding to meet those needs.

This pamphlet will answer some of your questions about your stay with us. If you have further questions, please do not hesitate to ask.

### *Personal Items*

Please bring personal items you might need to be comfortable during your stay at the hospital. Pajamas, robes, reading materials, and personal grooming items (non-electric) are some items you might wish to consider. Be aware that the hospital cannot assume responsibility in safe keeping eye glasses, hearing aids, dentures, and all other personal items, or for items lost or broken.

### *Valuables*

Please leave valuables at home. If your admission is an emergency, please give your valuables to your family, friends, or home care providers to take home for you or request hospital personnel to deposit your

valuables for safekeeping.

### *Visitors*

The love of family and friends is important in healing, and we affirm that all patients have the right to visits and also that visitors have certain responsibilities:

- visitors must be careful not to disrupt the rest and comfort of any patients, and all patients who have concerns or needs regarding visitors are encouraged to call this to the attention of hospital staff
- visitors may be asked to wait until a patient is ready to receive them, and must leave the room when requested to do so by medical or hospital staff
- children under 12 must be accompanied by an adult

Normally, visiting hours are from 11:30 am to 8:30 pm. Exceptions or limitations may be made based on needs of patients. A family member or friend may be requested to stay overnight, and appropriate arrangements will be made.

### *Telephone Calls*

All patient rooms have a telephone. Please follow these guidelines when using the phone.

- Dial 9 plus the number for local calls
- Dial 8-0-0 for long distance calls. You will be connected to a long distance operator. (Long distance calls must be charged to your home, your calling card, or made collect)
- Please limit incoming calls to between 7 a.m. and 10 p.m. If your caller has touch-tone dialing, we ask that they call 445-8121 and on connection with our automated operator dial your room number. If they do not have touch-tone dialing, they may wait for the operator to answer.

### *Smoking Policy*

The hospital is a no smoking facility. Smoking is allowed outside in designated areas only.

### *Mail and Flowers*

Mail and flowers will be delivered to your room or forwarded to your home if received after discharge. To avoid interference with specialized equipment, flowers cannot be delivered to the Critical Care Unit, but will be given to your family or friends.

## *Spiritual Health*

Your emotional and spiritual health are important components of your total health. We hope your stay in the hospital is a time not only for expert care of your physical needs, but also of emotional rest and even spiritual renewal.

Spiritual/emotional healthcare is usually best provided by people who know you well. Please call the professionals or friends of your choice to let them know you are here. We welcome your clergy and other spiritual/emotional support providers as partners in your care. Let us know if you need help calling a pastor, priest, rabbi, or any other spiritual care provider.

Our chapel is available as a place of quiet or meditation. Mass is celebrated in the hospital chapel on a scheduled basis – call the extension below for current schedule.

We have many excellent written resources for you and your family, including information, reflections and prayers related to emotional and spiritual health in a wide variety of situations. Ask a chaplain or your nurse for a complete list of titles.

Our Spiritual Health Services personnel include staff chaplains and community volunteers. These people are available to visit you, listen to your concerns, and provide personal support, prayer, and sacraments. Chaplains are available most days of the week.

If you would like a chaplain's visit, or want to receive a sacrament or blessing, please call Spiritual Health Services at extension 7522.

## *Financial Arrangements*

Please provide patient registration/billing with copies of your insurance card or claim form for accurate billing. If you do not have insurance, we will assist you in arranging financial plans to meet your anticipated hospital costs. Please feel free to discuss any concerns about your bill with our patient accounts department. Remember that your hospital billing statement will reflect only hospital charges and you will receive separate billings from physicians, surgeons, radiologist, etc.

## *Concerns & Complaint Resolutions*

While you are a patient at St. Joseph Hospital, we encourage you to express concerns or complaints regarding your care and our services. Please dial "0" for the hospital operator who will connect you with the appropriate staff member so you may voice your concerns. Expressing

these concerns will not compromise in any way your present or future care in our facility. Concerns or complaints expressed by a patient's family or friends, when patients are unable to speak for themselves or by parents and/or guardians, will be given equal consideration and respect.

The Hospital is also committed to providing protective services information to the portion of our patient population that may need those services. Those services may include guardianship, advocacy services, conservatorship needs assistance, and child or adult protective services. Hospital staff and our Social Services Department are available to assist patients and their family in contacting protective service agencies. Should a patient or patient's family member wish to file a complaint or if they have a concern about patient abuse, neglect, or about the misappropriation of a patient's property, listed below are addresses and phone numbers for protective services agencies:

Department of Public Health

2179 North Point Parkway

Santa Rosa, CA 95407

866-784-0703 (Toll Free) or 707-576-2380

Adult/Child Protective Services

808 E St., Eureka, CA 95501

707-476-2100 (APS)

707-445-6180 (CPS)

Northcoast Advocacy Services

1910 California Street

Eureka, CA 95501

707-443-9747

Office of the Inspector General of the United States (Medicare)

Department of Health & Human Services

7500 Security Blvd.

Baltimore, Maryland, 21244

1-800-447-8477

Public Guardian/Conservator

825 5th Street, Eureka, CA 95501

707-445-7343

Humboldt Women for Shelter  
P.O. Box 969, Eureka, CA 95501  
707-444-9255

Office of State Ombudsman  
1600 K. Street  
Sacramento, CA 95814  
1-800-231-4024

Northern California Investigations  
P.O. Box 942732 (Medi-Cal)  
591 North 7th Street, 1st Floor  
Sacramento, CA 94234-7320  
916-324-8447

### *Cafeterias*

The cafeteria is located on the main floor, adjacent to the main lobby.

#### Food – Patients

Patients receive meals and menus from Nutrition Services. Each morning, menus including numerous food and beverage options are delivered to patients so they can choose their next-day meals. After marking their selections, patients should give these completed menus to the nurse or volunteer as soon as possible to ensure reception of these choices at the upcoming meals. Physicians often prescribe special diets as part of the overall treatment plan. These special diets often limit meal choices. Patients on liquids-only diets generally receive beverages selected by Nutrition Services. Patients are asked to rely solely on their nursing staff to arrange for meals and snacks and NOT to use the vending machines or Café services until after discharge. Questions about meals can be answered by calling the Diet Office at ext 7400.

#### Food - Guests

Guests are welcome to enjoy the Cafeteria services located on the St. Joseph Hospital Campus main floor adjacent to the main lobby. Our weekday hours are 6:30 a.m. to 7:30 p.m. each weekday. Our weekend and holiday hours are 6:30 a.m. to 2:00 p.m., reopening at 6:00 p.m. to serve customers until 7:30 p.m. Vending machines provide limited food and beverage service throughout the day and night. Guests at the General Hospital Campus will find vending machines and tables in the cafeteria located on the main floor adjacent to main entrance.

## *Discharge*

Your physician will work with you, the staff and the Discharge Planning Team (Discharge Planning Nurse or Social Worker), to prepare for your discharge from the hospital. On the day of discharge, your nurse will go over the discharge instructions with you and a volunteer will accompany you to the patient discharge office on the main floor.

If you need assistance at home during your recuperation, please inform your physician and discuss your needs with the Discharge Planning Team. Arrangements can be made for home care services, if medically necessary. Other community services are available to assist with non-medical needs and can be arranged prior to discharge.

### *You have the responsibility –*

- to take an active part as possible in the planning and managing of the plan of care to meet treatment needs
- to provide health related information including past illnesses, hospitalizations, medications, as well as present complaints and unexpected changes in condition to medical personnel
- to accept responsibility for the consequences of any refusal of treatment
- to recognize the impact of your lifestyle on your personal health. Your health depends on much more than health care services
- to cooperate to the best of your ability with the treatment plan
- to request additional information or clarification about your health status or treatment when you do not fully understand information and instructions
- understand your visitors must comply with policies and procedures designated to protect the health and safety of others, and to facilitate the safe and efficient operation of the facility
- to treat hospital personnel with courtesy, dignity, and respect, and to require that your support community do the same
- be respectful of the property of other persons and the property of the facility
- understand that the facility is not responsible for your personal property nor for your valuables unless they are locked in the facility safe
- to provide the hospital with a copy of any advance directive, if you choose to complete one

- to provide necessary information for insurance claims and for working with the hospital to make payment arrangements, when necessary, to assure the financial obligations for your care are met as promptly as possible
- recognize that you, as the patient, are responsible for your hospital bill and any additional charges owed to other care providers for their professional services
- to report to the appropriate hospital representative any complaints, problems or difficulties which arise during the provision of care
- to inform your physician and other caregivers if you anticipate problems in following prescribed treatment
- to make reasonable accommodations to the needs of the hospital, other patients, medical staff, and hospital employees. Patients should also be aware of the hospital's obligation to be reasonably efficient and equitable in providing care to other patients and the community. The hospital's rules and regulations are designed to help the hospital meet this obligation. All patient rights and responsibilities apply also to the person who has legal responsibility to make decisions regarding medical care on your behalf, including the family and/or guardian of a newborn, child, or adolescent.

## *Patient Rights*

We are committed to your rights as a patient, and to clearly identifying your responsibilities.

### *You have the right:*

- to considerate and respectful care, and to be made comfortable. You have the right to respect for your cultural, psychosocial, spiritual, and personal values, beliefs, and preferences.
- have a family member (or other representative of your choosing) and your own physician notified promptly of your admission to the hospital.
- to be aware of hospital charges and to receive an itemized and detailed explanation of the bill, regardless of the source of payment, if requested
- you have the right to know the identity of your physicians, nurses, and others involved in your care, as well as when those involved in your care are students, residents or other trainees

- to be fully informed of the care and treatment to be provided. To discuss your illness, diagnosis, and prognosis with your physician, prospects for recovery and outcomes of care (including unanticipated outcomes) in terms and language that you can understand. You have the right to effective communication. To participate fully in decisions regarding your care-except in emergencies when you lack decision-making capacity and the need for treatment is urgent. You are entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation, the medically reasonable alternatives, their accompanying risks and benefits, and the name of the person who will carry out the procedures and/or treatments. You have the right to participate in ethical questions that arise in the course of your care, including issues of conflict resolution, withholding resuscitative services, and forgoing or withdrawing life-sustaining treatment.

- to refuse or request treatment to the extent permitted by law, including leaving the hospital against advise of physicians, and to be informed of the medical consequences of such refusals. However, you do not have the right to demand treatment or services deemed medically unnecessary or inappropriate.

- to be aware of any research, data collection, or experimentations related to your care that is taking place in the hospital, and to participate in such projects only on a voluntary basis.

- to reasonable responses to any reasonable request made for services
- request or reject the use of any or all modalities to relieve pain, including opiate medication, if you suffer form severe chronic intractable pain. The doctor may refuse to prescribe the opiate medication, but if so, must inform you that there are physicians who specialize in the treatment of severe chronic intractable pain with methods that include the use of opiates

- to formulate and complete advance directives such as an Advance Healthcare Directive, expressing your wishes regarding future care or naming someone to speak for you when you are unable to do so and to have hospital staff and practitioners who provide care in the hospital comply with these directives. All patients' rights apply to the person who has legal responsibility to make decisions regarding medical care on your behalf.

- to have your personal privacy respected. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. You have the right to be told the reason for the presence of any individual. You have the right to have visitors be asked to leave prior to an examination and when treatment issues are being discussed. Privacy curtains will be used in semi-private rooms

- to confidential treatment of all communications and records pertaining to the care and the stay in the hospital. Written permission shall be obtained before the medical records can be made available to anyone not directly concerned with the care. You will receive a separate “Notice of Privacy Practices” that explains your privacy rights in detail and how we may use and disclose your protected health information.

- to review medical records with appropriate explanations, except when restricted by law

- to confidentiality of financial and medical records and the right to refuse their release except in the case of transfer to another health facility, as required by law or by third party payment contract

- to be assured that the personnel who provide care are qualified through education and experience to carry out the services for which they are responsible, and to be aware of the names and roles of all individuals providing treatment

- to receive care in a safe setting, free from verbal or physical abuse or harassment

- to be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience, or retaliation by staff

- to reasonable continuity of care and to know in advance the time and location of appointments as well as the identity of persons providing the care

- to have knowledge of the name of the physician who has primary responsibility for coordinating the care, the names, the professional relationship of other physicians and non physicians who will see you

- to be informed of continuing care needs following discharge from the hospital and to meet with hospital personnel to plan to meet these needs.

- to be informed by the physician, or a delegate of the physician, of continuing health care requirements following discharge from the hospital. Upon request, a family member may be provided this informa-

tion also.

- to know which hospital rules and policies apply to your conduct while a patient
- to designate visitors of your choosing, if you have a decision-making capacity, whether or not the visitor is related by blood or marriage, unless:
  - a. no visitors allowed
  - b. the facility reasonably determines that the presence of a particular visitor would endanger the health or safety of you, a member of the health facility staff, or other visitor to the health facility, or would significantly disrupt the operations of the facility
  - c. you have indicated to the health facility staff that you no longer want this person to visit
- this section may not be construed to prohibit a health facility from otherwise establishing reasonable restriction upon visitation, including restrictions upon the hours of visitation and number of visitors
- to have your wishes considered for purpose of determining who may visit if you lack decision-making capacity and to have the method of that consideration disclosed in the hospital policy of visitation. At a minimum, the hospital shall include any person living in the household
- examine and receive an explanation of the hospital's bill regardless of the source of payment
- exercise these rights without regard to sex, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation or marital status, or the source of payment for care
- to file a grievance and/or file a complaint with the State of California Department of Health Services and/or the hospital.

The State Department of Health Services phone number and address is: 50 Old Courthouse Square, Suite 200, Santa Rosa, CA 95404 (707) 576-2380.

The grievance committee will review each grievance and provide you with a written response. The written response will contain the name of a person to contact at the hospital, the steps taken to investigate the grievance, the results of the grievance process and the date of completion of the grievance process. Concerns regarding quality of care or premature discharge will also be referred to the appropriate Utilization and Quality Control Peer Review Organization (PRO).

# *Patient Financial Policy*

## *Payment Policy*

St. Joseph Hospital would like to make your entire medical stay, including the billing process, as pleasant as possible.

Our goal is excellence. We work together to bring quality medical care to our community marked by personal attention. St. Joseph Hospital does not provide service in order to collect money, however, we must obtain payment in order to be able to provide service.

While the hospital cooperates in billing your health plan, insurance company, or government payor, the patient or the responsible party still has the ultimate financial responsibility.

We trust you will meet this obligation in a prompt and responsible manner. For our part, we will do our best to handle your account in an efficient and trouble-free manner.

If you have questions about your bill, please call our Patient Accounting Department, Monday through Friday, from 8:00 a.m. to 4:30 p.m. or write us. We are happy to assist you.

### **St. Joseph Hospital**

Patient Accounts Department

2700 Dolbeer Street

Eureka, California 95501

(707) 269-4203

## *Insurance Billing*

Our billing process begins when you register as a patient. At the time of registration, we ask you to provide complete and accurate information about all of your insurance coverage. The information that you provide assists us in efficiently processing the payment of your bill through your insurance company. Any un-met deductible will be requested prior to discharge.

Within seven days after your service, the hospital will send your insurance company a claim requesting payment of your charges.

You will receive separate statements for each visit, such as emergency treatment, outpatient, and/or inpatient services. Depending on the services you received, you may also receive separate statements from your treating physicians such as a surgeon, anesthesiologist, radiologist,

emergency department physician, and other doctors who provided care.

Depending on your insurance coverage, we will send you regularly updated statements indicating the current status of your account. Your statement will clearly indicate when payment is due and the amount you need to pay the hospital.

If insurance payment is delayed more than 45 days after the billing, the balance of the bill must be paid by you or satisfactory payment arrangements must be made.

### *Third Party Liability*

Although the hospital does not verify third party benefits, we will honor third party assignment to the hospital after complete billing information is received.

### *Medicare*

For hospital stays, you must pay a deductible, the amount of which is established by the Medicare program annually. You are also responsible for Part B co-insurance. We will notify you of any portion of the bill which you need to pay. Please bear in mind that the Medicare claim processing time is sometimes quite lengthy. Additionally, you may be responsible for paying the cost of any items that Medicare does not cover such as medications that you take home. We will bill Medicare supplemental insurances for all services.

### *Medi-Cal, CMSP, and other Agency Aid*

We honor public agency reimbursement for services provided. Necessary authorization cards must be presented upon admission.

If the agency is only responsible for part of the bill, you must make satisfactory financial arrangements with the hospital upon admission for your portion of the bill.

If the Medi-Cal card is for limited services and services being provided are not covered, you will be responsible for the bill.

If you do not have appropriate treatment authorization from the Medi-Cal Field Office, verified by the physician's office for elective services, those services will be postponed until authorization can be obtained.

### *Worker's Compensation Claims*

Worker's Compensation claims will be verified before admission on scheduled procedures. Employers will be billed for claims not paid

within 60 days.

### *Outpatient Laboratory Services*

Your physician may have sent a laboratory specimen, such as blood, to Outpatient Laboratory Services for processing. Outpatient Laboratory Services will send the results to your physician and St. Joseph Hospital will bill you or your insurance company for the actual test.

## *Financial Assistance Policy*

St. Joseph Health System - Humboldt County believes that as a health service organization we have a social responsibility and moral obligation to make quality health services accessible to the uninsured, the underinsured and those who cannot pay for their health care. We further believe all persons have a right to an adequate level of health care and that the provision of health care for those who require it is an obligation of justice as well as charity or mercy.

### *What Is Financial Assistance?*

SJHS-Humboldt County provides inpatient and outpatient services for persons who need medical services and are unable to pay for them.

This includes people who don't have any insurance and can't pay their hospital bill, as well as patients who do have insurance but can't pay the portion of the bill that insurance doesn't cover.

In some cases, eligible patients will not be required to pay for services; in others they may be asked to make partial payment.

### *Who Is Eligible?*

It is important to understand that access to necessary health care will not be affected by one's eligibility for financial assistance; medically necessary care will always be provided to the extent the hospital can reasonably do so.

Eligibility for financial assistance shall be determined solely by the patient's ability to pay. There may even be circumstances where individuals with relatively high incomes will qualify for financial assistance because of special circumstance.

You should not be embarrassed to seek financial assistance. Like all of our patients you will be treated with dignity and respect.

Here are some of the guidelines used to determine eligibility:

- Family income up to 500 percent of the Federal Poverty Level.

- You live at a local homeless shelter.
- You have filed for bankruptcy within the last year.
- You would likely forgo medically necessary care due to lack of coverage.
- You are not eligible for government sponsored programs such as Medicare, Medicaid, Healthy Families and any local indigent program.

### *Where to Get More Information*

In the Emergency Department and main hospital admitting areas at both St. Joseph and Redwood Memorial Hospitals we conspicuously post a summary of the Financial Assistance Policy in English and Spanish. This summary contains contact information on where a patient can obtain more information on financial assistance and how to apply for such assistance. We have also published a brochure describing the policy which is available in the Emergency Department and main hospital admitting areas, and at many doctors offices.

If you don't see the Financial Assistance information please ask any staff person in Admission or at the Information Desk. Also, please be aware that a member of staff, or your doctor, may recommend you for Financial Assistance if they believe you are eligible.

You may also call the Patient Services office at St. Joseph and Redwood Memorial Hospitals, 269-4203 and trained staff will be available to help you.

### *Confidentiality*

We understand that the need for Financial Assistance is a sensitive and deeply personal issue. We will do our very best to maintain the confidentiality of requests, information and funding for all who seek or receive Financial Assistance.

## *Comfort and Pain*

### *Our Commitment*

We are committed to minimizing the pain of those we serve. We believe that the sensation of pain and discomfort is a very personal experience. Good pain control is essential to the healing process physically, emotionally, mentally, and spiritually. We believe you when you talk about your pain. In fact, this discussion is essential and welcome.

Successful pain management is a team effort. The team includes you,

as the head of the team, and your therapists, nurses, and doctors. Only you know how your pain feels. We rely on you to describe your pain and what it feels like so we can help keep your pain under control.

So let's start...

### *Talking About Pain*

First of all, let's talk about some common misconceptions about pain and pain medications.

I don't want to bother the nurse. One of the most wonderful things about nursing is being able to relieve pain and suffering. Once your pain gets out of control, it is harder to manage and prevents you from doing the things that will help you get better.

I'll just tough it out! Unrelieved pain has negative effects and actually hinders the healing process. Good pain management allows you to walk and move easily and deep breathe and cough. These activities are essential to prevent complications such as pneumonia. Pain also causes anxiety, fear, and fatigue, which can lead to a range of problems such as depression. These mental and emotional stresses can lead to even more pain and this can become a cycle that spirals out of control. We have the means to manage pain... take advantage of it!

I'll get addicted to drugs! Addiction to a drug prescribed for pain is extremely rare. In fact, research has shown that less pain medication is needed when medication is effectively used to keep pain under good control.

What other questions do you have concerning pain or other things that may be causing you anxiety or distress? Talk to us about it.

### *What To Tell Us*

We will ask you about your pain history, such as what pain medication works for you and what doesn't work for you, where your pain is and what it feels like. Here are some words that can help you describe your pain.

Constant	Pressing	Tingling	Burning
Radiating	Piercing	Shooting	Cramping
Sharp	Throbbing	Stabbing	Prickling
Penetrating	Pounding	Aching	Dull

You may be able to think of other words that especially describe your pain. You need to tell us when you feel pain. Let us know if your pain is

not relieved. Together, we might consider other treatments such as:

Suggested medication	Counseling
Relaxation, distraction, imagery	Heat, cold, massage
Movement or immobility	Music

We will also ask you to describe the intensity of your pain. This is discussed under the Pain Rating Scales later on.

### *Managing Pain and Discomfort*

Your nurse will discuss with you what we call your comfort goal. That is the level of pain control you feel would be best for you. You might set a goal of 2 out of 10 (2/10) or 3/10 for instance.

### *Keep on Talking*

As you can see, effective pain management requires good communication between you and the staff to help you reach your comfort goal. So please... keep on talking to us!

The doctor orders medicine on an “as needed” basis with a time limit. IV medications might be ordered every hour whereas oral medications are usually ordered every three to four hours. This means you need to let the nurse know how intense your pain is. She/he may not know that you need pain medicine if you don’t ask for it. However, if getting medicine on a regular schedule helps you have better control of your pain, you may request that of your doctor and nurse.

Some medications can affect your breathing and make you too sleepy. You may have set a comfort goal of 2/10, but at that level you may be too sleepy or not breathing well. The nurse will adjust your pain medication and alert the doctor. Some changes can be made to your medicines, such as using a different combination to help you reach your comfort goal of say, 2/10.

The most common IV pain medication your physician may prescribe includes Morphine, Demerol, or Dilaudid. Most patients achieve pain relief using these medications. At first, you may not be able to take medicines by mouth, so the IV is an effective and painless way to get relief.

Sometimes a Patient Controlled Analgesia pump (or PCA) can be used. This is connected to your IV line and is programmed by your doctor’s orders. It can be set with a low continuous dose or you can dose yourself when you need it or both methods can be used together. You

can discuss with your doctor whether a PCA is recommended for you.

The medications mentioned above might also be given in an intramuscular injection (IM). This is usually given in the buttock area.

Another way to get excellent pain control is by means of an epidural catheter. This is a very small catheter placed in the epidural space in your back. It has been used with very good success on patients with major surgeries of the abdomen and lower extremities of women in labor. It may sometimes be recommended on a short-term basis for pain not related to surgery. Again, your doctor will know if this is recommended for you.

The latest innovation in surgical pain control is an infusion pump

### 0 – 10 Numeric Pain Intensity Scale

0            2            4            6            8            10

0    1    2    3    4    5    6    7    8    9    10

No pain            Mild pain            Moderate pain            Severe pain            Very severe pain            Worst possible pain

The nursing staff will teach you about the Pain Scales. These scales give us a common language with you so we don't each interpret your pain differently. The nurses will:

1. Show you the pain scale and explain its purpose.
2. Explain the parts of the pain scales.
3. Discuss the different aspects of pain. For example, pain refers to a kind of discomfort in your body and your pain level/description is what you say it is.
4. Make sure that you know how to use the scales.
5. Help you practice using the scale.
6. Help you set a comfort goal that you think is right for you.

that delivers pain medication right to the surgical site. What is so great about this is that since the medication does not travel through the bloodstream, light-headedness, dizziness, and respiratory complications can be avoided. It is used for bone and joint surgeries, and some abdominal cosmetic and general surgeries.

As you begin to get better, your doctor will switch you to pain medications you can take by mouth. Some of the most common ones for short-term use are Tylenol, Vicodin, Percocet, and Percodan. The most common ones for long-term use are Oxycontin, Roxanol, MS Contin, and others. To make a smooth transition from one method or medication to another, be sure to talk with the health team members. We can make adjustments as necessary.

### *Common Side Effects*

Nausea is the most common side effect of pain medications. This is usually controlled with special drugs. The doctor may even switch to another medication that will not make you sick.

Constipation is another common side effect. Walking helps the bowels to become active. If you are allowed to eat and drink, drink eight 10-ounce glasses of water or juice per day. Eat foods that are high in fiber. Let your nurse or doctor know if you have not had a bowel movement and what your bowel routine is. Your doctor can prescribe something to help you have a bowel movement.

Some pain medications may make you feel light-headed. If you feel dizzy or too sleepy, let your nurse or doctor know. We might change to another medication. This is essential for safety reasons and so you can do the things that will help you recover.

### *Personal Choices*

People come to a hospital for many reasons: to have a baby, to undergo tests, to have surgery, to receive treatment for a serious illness, and so on. Whatever the reason, being hospitalized is an occasion for thinking about the choices made possible by modern medical technology. In fact, many people do not wait until they are in the hospital to think about these things. You may already have thought about and discussed your own values, ideas, and decisions.

This information has been compiled to assist you in thinking about health care decisions, particularly decisions that involve the use of life-

support technologies. We hope the information will be helpful to you and your family.

This booklet addresses some of the questions that are often asked by patients and families. Since every situation is different, not all questions will be answered. The information will not replace important conversations among those involved: patient, family, close friends, ministers, nurses, physicians, social workers, and others. However, we hope this information will clarify some issues and be a source of guidance.

### *What Kinds of Things Should I Be Thinking About?*

If you are a patient or are making decisions on behalf of a patient, you need to understand the purpose, risks, and intended benefits of various medical treatments, as well as alternative treatments.

Many medical treatments and technologies are available. As long as you are capable of making informed decisions, you have the right to choose your medical treatment.

Sometimes the hardest decisions are those we need to make for someone who is no longer able to be involved in the decision-making process. In these cases, it is very helpful to know what the patient might have wanted. We may know this from statements they have made, or we may be able to have a good sense of what they would want by thinking about other choices they have made in life. We also need to think about what, all things considered, seems to be in the best interests of the patient. For example, what will minimize pain and suffering?

Treatments have different purposes. Some are intended to restore health, some to slow the progress of disease, and some to provide comfort. In some situations, treatments are available that offer none of these benefits, although they can prolong life. These are treatments that many patients and families wish to refuse. A decision to decline treatment can be difficult and is usually not made quickly.

### *What Kinds of Treatments Are Considered?*

#### Cardiopulmonary Resuscitation (CPR)

Cardiopulmonary resuscitation includes a number of procedures that are started when a patient's breathing or heartbeat stops.

These procedures include:

- chest compression by hand;
- defibrillation - an electrical shock to re-establish a normal heart-

beat;

- breathing support, including the placement of a tube into the wind pipe and use of a ventilator to breathe for the patient;
- the use of drugs to restore the heartbeat.

There are some situations when this type of resuscitation attempt is not appropriate. CPR is invasive and very aggressive. It was designed for a person in relatively good health whose heart suddenly stops due to abnormal heart rhythm, anesthesia reaction, drug overdose, heart attack, or other causes. The decision regarding the appropriateness of CPR is heavily dependent upon each situation.

The outcome of CPR can certainly have an impact on quality of life. It may restore life but overall survival rates are poor. Further, it often does not restore people to their previous level of health. CPR may not provide comfort or slow the progress of disease. Sometimes the burdens (pain and suffering) of the procedure outweigh the benefits.

It is important for patients, families and physicians to discuss whether CPR should be performed, so that the health care team knows what to do if a patient's heartbeat or breathing stops.

If CPR is not desired, a Do Not Resuscitate (DNR) order (sometimes called a "No Code" order) must be written by the physician in the patient's chart, so that all members of the health care team know not to start the procedures listed above.

Because this is a complicated issue, we strongly urge you and your family to discuss your concerns with your physician. This discussion is best started prior to hospitalization.

### *Ventilator*

A ventilator, also called a breathing machine or respirator, is used for patients who are not able to breathe on their own. Ordinarily, this is a temporary measure until they can breathe on their own again. Sometimes, a patient's ability to breathe may be permanently damaged. Then a decision will need to be made about the continued use of a ventilator. Some people prefer not to prolong their lives in this way; others find it acceptable.

Obviously, this is an important decision that should be made after all of the facts have been carefully discussed.

### *Artificial Means of Providing Food and Fluids*

In recent years, there has been much discussion of the medical, ethical, and legal considerations involved in decisions to forgo artificially supplied food and fluids.

As with any medical intervention, the important questions to ask are:

- What is the patient’s condition?
- Will the patient suffer in any way if feeding tubes are provided or are not provided?
- What are the goals of treatment? What might the patient have wanted?
- What is in the best interest of the patient?

For some patients, particularly those who are permanently unconscious and have lost the ability to eat, tube-feeding can prolong life without offering cure or comfort. For other patients, tube-feeding can offer comfort. Deciding whether to begin or continue tube-feeding is an important decision that should be made after careful consideration of the medical facts and one’s personal values.

### *Other Treatments*

There are many other treatments and procedures that might be considered, such as kidney dialysis, antibiotics, blood transfusions, chemotherapy, radiation therapy, surgeries, x-rays, and blood tests.

### *In Summary*

In each situation or decision about a medical treatment, four things should be considered:

- the purpose, risks, benefits, and alternatives to treatment;
- what the patient might have wanted;
- overall expected benefits and burdens of starting or continuing a treatment for the patient;
- the burdens of stopping treatment.

It is important to understand that deciding to withhold or withdraw life-sustaining treatment never means that medical and nursing care stops. In fact, pain control, other comfort measures and psychosocial, spiritual, and emotional care for the patient and family become particularly important. It is certainly reasonable to decide to start a treatment, and then later decide to discontinue when new facts become clear.

### *What is an Advance Directive?*

An “advance directive” is a generic term that refers to a statement in

which a person writes his or her wishes regarding their medical treatment in the event they are no longer able to speak for themselves.

The term can refer to two different kinds of documents: 1) An advisory document called “A Living Will” or 2) an Advance Health Care Directive. A Living Will will ordinarily have such language as: “I do not want my life prolonged if there is no reasonable hope of my recovery.” A Living Will does not provide the same legal protection to you, your family, or physician as the Advance Health Care Directive.

### *What is an Advance Health Care Directive?*

An Advance Health Care Directive (AHCD) is a legal document that allows a person to name someone to make health care decisions on their behalf if they are unable to do so.

Filling out such a form encourages people to think and talk about their preferences ahead of time and also to state them in the document if they wish. In an AHCD, a person can name a trusted friend or family member to speak for them, to consent to treatment, to refuse treatment, or to stop treatment. SJHC-HC honors AHCD’s in accord with California law.

It is advisable for everyone to have an AHCD, regardless of age or state of health. A lawyer is not needed to fill out the form. If you would like more information about the AHCD, please ask the chaplain, social worker, or nurse in charge of your unit, if you are in the hospital.

### *What About Organ Donation?*

The donation of needed organs after one’s death gives “the gift of life” to another person who might not otherwise survive.

People can state their wishes about organ donation in an Advance Health Care Directive, or can complete a special card available from the Department of Motor Vehicles. If it is determined at the time of death that the patient is a suitable organ or tissue donor, it is customary to ask the family to give consent before donation takes place. Therefore, it is important to make wishes about organ donation known to your family.

### *Making Difficult Decisions*

Decisions are difficult to make during any crisis. This is especially true when people are seriously ill. Therefore, it is helpful to think and talk about possible situations before they arise.

As you consider your choices, please keep in mind that the staff of St.

Joseph Health System-Humboldt County is available to answer further questions or to serve you in any way that would make your decision-making easier.

The Bioethics Committee is available to assist with the process of making these decisions. Please approach any member of the health care team for more information about The Bioethics Committee or anything else mentioned in this booklet.

## *For Your Safety/Miscellaneous*

### *Smoking*

Smoking is strictly prohibited at St. Joseph Hospital. Because smoking and second-hand smoke present a serious health risk, patients, visitors, employees and physicians are not permitted to smoke in the hospital or on the hospital grounds. If you would like information on how to quit smoking, please ask your nurse.

### *Fire Drills*

For your protection, the hospital conducts fire disaster drills regularly. If a drill occurs while you are here, please remain in your room and do not become alarmed. The hospital staff is trained in fire protection and will give you whatever advice and assistance is appropriate.

### *Tips to Avoid a Fall*

The nursing staff has the following suggestions to help you avoid a fall during your hospitalization.

#### **Always**

1. Put on footwear (shoes or slippers from home) while walking.
2. Ask for help if you feel weak, dizzy, or light-headed when you need to get up.
3. Use the call light in the bathroom if you become weak or need assistance back to bed.
4. Notify the nursing staff if a spill occurs on the floor.
5. Ask to have objects such as bedside tables, phone, call lights within easy reach.
6. Use your call light for help.

### *Infection Control*

St. Joseph Health System - Humboldt County takes special care in protecting patients, visitors, and employees from the spread of infection

and communicable diseases.

Hand washing is our most important preventive procedure. You can assist in infection prevention by washing your hands as frequently as possible.

Your family members, if providing you with care, should also follow the same easy and effective prevention procedure.

You can expect that staff members, including physicians, nurses, lab technicians, and anyone associated with patient care, will follow infection prevention practice while carrying out any procedure where you, the patient, are involved. In some cases, this will require them to wear masks, gloves and other protective garments. In all cases they will adhere to strict regulations concerning disposal of injectables and body fluids.

Standard precautions promote the use of gloves, gowns, masks, and eye protection by health care workers when performing some procedure when there might be contact with body substances; i.e. drawing blood, starting an intravenous or emptying a bedpan. In addition, special care is taken in the disposal of linen, waste material, and needles.

In some instances, when a patient is known or suspected to have a communicable disease, specific precautions will be required. Signs will be posted at the entrance to the room designating these requirements.

Any questions regarding infection control can be addressed to the Infection Control Coordinator, at extension 5835.

### *Proposition 65*

Safe Drinking Water and Toxic Enforcement Act: Chemicals known to the State of California to cause cancer or birth defects or other reproductive harm, may be present within the hospital.

### *Parking*

Parking is available in designated lots surrounding the hospital. Some lots are designated for physicians or for short term parking and are posted with corresponding signs. A free shuttle service operated by the St. Joseph Hospital Auxiliary is available. A shuttle stop is located in the lower parking lot, or you may flag them down during their rounds.

### *Gift Shops*

The Gift Shop, located off the hospital's main lobby and staffed by volunteers, offers a wide variety of seasonal gifts, fresh flowers and

greeting cards, sundries, toys, and stuffed animals. We also have candy, baby gifts, and books.

St. Joseph Hospital Campus

The gift shop is open Monday through Friday from 9:00 a.m. to 4:00 p.m. and 5:30 - 7:30 p.m., and on Saturdays from 11:00 a.m. - 2:00 p.m.

General Hospital Campus

The gift shop is open Tuesday and Thursday from 9:00 am - 3:00 pm, and every other Friday from 9:00 am - 12:30 pm.

## *Patient Safety*

St. Joseph Hospital is committed to ensuring the best possible health outcome for every patient. In our efforts to support patient safety and reduce mistakes, we encourage patients to ask questions regarding all aspects of their medical care. Being involved in every decision about health care can lead to better results.

1. Be involved in your health care. The single most important way you can help optimize your care and help prevent mistakes is to be an active member of your health care team. **ASK QUESTIONS!** Take an active role in every decision about your health care from start to finish.

2. Make sure all of your doctors and nurses know about any medications you are taking, including prescriptions, over-the-counter medication, and dietary supplements such as vitamins and herbs. Also reveal any allergies or adverse reactions you have had to medication(s).

3. Be sure to ask for information about your medication when it is prescribed and when you receive it. Make sure the caregivers give you information in terms you can understand. Questions you may want to ask: What is the medication for? How am I supposed to take it and for how long? What side effects are likely? What do I do if they occur? Is this medication safe to take with other medications or dietary supplements? What food, drinks or activities should I avoid while taking this medication?

4. Speak up if you have questions or concerns. You have the right to question anyone who is involved in your care. Make sure that you know who is in charge of your care. Ask your doctor or nurse about the results of all tests performed. Do not assume that no news is good news. Ask doctors and nurses involved in your care about your condition and treatment during your hospital stay.

5. Provide all health professionals involved in your care with accurate information about you. This is especially important if you have any health problems.

6. Upon discharge from the hospital, ask your doctor and nurses to explain the treatment plan you will use at home.

7. Ask a family member or friend to be there with you and to be your advocate (someone who can help get things done and speak up for you if you can't). Even if you think you don't need help now, you might need it later. Ask about an Advance Directive if you do not have one. If you do, be sure to give a copy to the attending doctor and/or facility, i.e. hospital, surgery center, and primary doctor.

8. When you have any type of surgery ask for the following information about your surgery in terms that you can understand: Who will be assisting with my surgery? What is involved? How long will it take? What are the risks involved? How long will my recovery be? What are the expected outcomes?

9. If you are having surgery, make sure that you, your doctor, and your surgeon all agree and are clear on exactly what will be done as well as the site of the surgery.

10. We encourage anyone who has concerns about safety or quality of care to bring those concerns first to the staff providing your care, the immediate person in charge or the Department Manager to ensure that your concerns are addressed and resolved. You may also contact our Quality Management Department at Ext. 5811 for assistance. Anyone wishing to contact the Joint Commission regarding quality concerns may do so online at [www.jointcommission.org](http://www.jointcommission.org) or by calling toll free 800-994-6610.