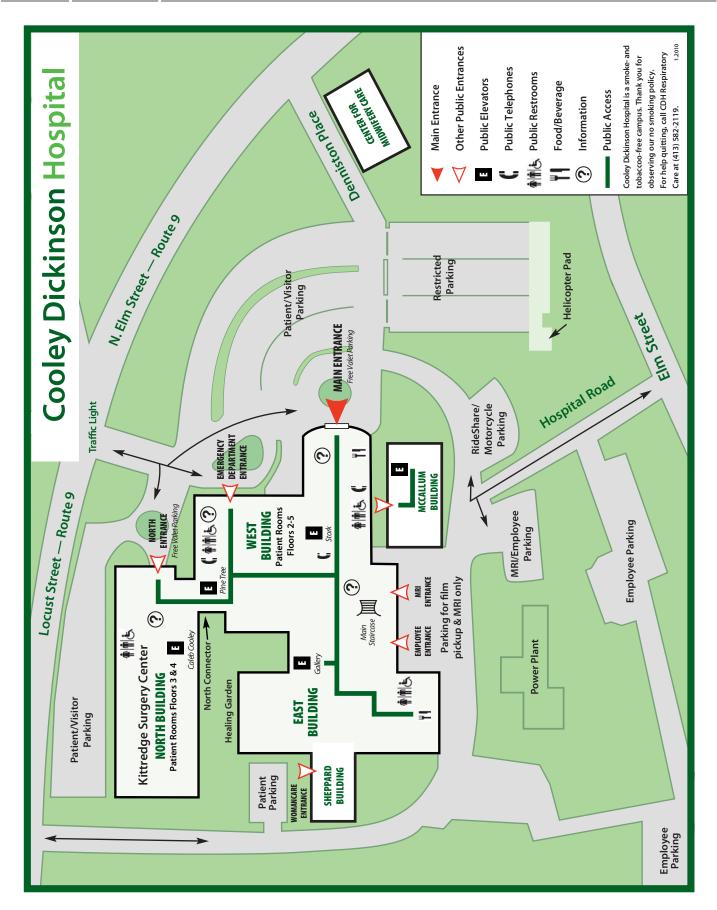
Patient Welcome Packet



Cooley Dickinson Hospital www.cooley-dickinson.org

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From the President



Thank you for choosing Cooley Dickinson Hospital. We realize that when it comes to medical care, you have a choice, and we appreciate that you have put your trust in Cooley Dickinson Hospital and our talented providers.

While our doctors, nurses, therapists and other members of your health care team pride themselves on *delivering* the safest, highest quality of care, they also are working to consistently *improve* the quality of care you receive.

At Cooley Dickinson, we are making care safer through our ongoing efforts to reduce medical errors, complications and infections. Because any unexpected outcome is one too many, we continue to strive toward the goal of making care safer for all patients. We are doing everything we can to reach these high standards, which reflect best practices in the top 10 percent of hospitals nationwide. To see our results and learn about these important efforts, visit www.cooley-dickinson.org/depts/quality-safety

In addition to our quality and safety efforts, we are committed to:

- ♦ Treating you and your family with dignity and respect.
- ♦ Involving you and your family in your plan of care.
- ♦ Helping you and your family understand the care you are receiving.

At Cooley Dickinson, you are surrounded by people who are committed to doing what is right for every patient, every time. Thank you for choosing Cooley Dickinson, and please let us know if there is anything we can do to assist you during your time with us.

Sincerely,

Craig N. Melin President/Chief Operating Officer Cooley Dickinson Hospital

Mission, Vision, Values



MISSION: To provide our patients and communities with the best health care in the most appropriate setting.

VISION: To become a model community hospital.

VALUES:

Build Partners: I reach across boundaries to collaborate with others.

Extend Trust: I extend trust and commit each day to be worthy of yours.

Change Now: I encourage and embrace change and consistently ask what else I can do to achieve

CDHCC goals.

Own It: I step up and take responsibility for our results.

Model Excellence:

I seek and provide feedback and coaching, lead by example and share my knowledge

to achieve our desired results.

Exceed Expectations: I create a positive experience for every patient, family and co-workers.

CDH is a Smoke-Free Organization

Cooley Dickinson Health Care has joined many health care organizations in the nation in becoming tobacco free. No one may smoke or use tobacco products on our property, including patients, visitors, employees, physicians and volunteers.

It is the policy of Cooley Dickinson Health Care to maintain a smoke free environment. Promoting a safe and healthy environment for our patients, visitors, employees, physicians and volunteers is essential. **Smoking is not allowed inside or outside the buildings on the Cooley Dickinson campus or at Cooley Dickinson Health Care satellite offices.** Cooley Dickinson Health Care feels so strongly about promoting good health through prohibiting tobacco use that, as of Sept. 1, 2009, the organization will no longer hire tobacco users.

Why is Cooley Dickinson Health Care Smoke-Free & Tobacco-Free?

"Cigarette smoking is the chief single avoidable cause of death in our society and the most important public health issue of our time." - C. Everett Koop, MD, U.S. Surgeon General 1981-1989

- ♦ Tobacco affects those who use it and those around them.
- ♦ Smoke, chew and cigarette butts are harmful to our environment.
- ♦ Secondhand smoke is a major cause of lung cancer and heart disease in non-smokers.
- If you smoke, it takes longer to heal after an operation and recover from illness.
- ♦ Secondhand smoke and the odor of smoke triggers wheezing and allergic reactions in others who have allergies

What physical areas are considered to be part of the campus?

- ♦ All facilities, buildings and grounds owned or leased by CDH.
- ♦ Adjoining sidewalks to CDH-owned or leased property.
- ♦ Parking lots and driveways that are used by CDH.
- ♦ CDH-owned vehicles.

What tobacco products are included in this policy?

- ♦ Cigarettes
- **♦** Cigars
- ♦ Pipe smoking
- ♦ Chew

How can I manage my cravings for nicotine while I am on the CDH Campus?

We realize that nicotine dependence is an addiction. Nicotine withdrawal can make people feel anxious, restless, sad or depressed. It can also make you feel frustrated, angry or more hungry. You may find it harder to sleep. Some people find these resources useful in curbing the symptoms of withdrawal:

- ♦ Nicotine replacement
- ♦ Tobacco treatment classes
- ♦ Hypnosis

If you are a patient, talk to your care team about nicotine replacement. If you are an employee, nicotine gum is available through Employee Health Services. For information, call 582-2236. Cooley Dickinson and the American Lung Association together offer a Freedom From Smoking ® program. For more information, including upcoming dates, call 582-2119.

What if I do not want to quit smoking?

This policy is not intended to take issue with those who smoke cigarettes or use tobacco products. Our policy is intended to eliminate the use of tobacco from our owned or leased property. Our goal is to help those who are trying to quit and to remove the potential for exposure to second-hand smoke and smokeless tobacco products on the Cooley Dickinson Hospital campus and satellite sites.

Where can I smoke?

Smoking is not allowed on the Cooley Dickinson Hospital campus or at Cooley Dickinson Health Care satellite offices.

RESOURCES:

1-800-Try-to-STOP (1-800-879-8678) ♦ www.makesmokinghistory.org ♦ www.fight4yourlife.org ♦ www.trytostop.org

The following are things you should know about your stay at Cooley Dickinson:

- ♦ Your local telephone service and television are free. To use our telephone, dial "9" followed by the local telephone number. There are educational television channels available; for information, please ask your nurse.
- ♦ Hearing-impaired patients may request usage of a TTY machine through a member of their health care team. The device is free and must be returned upon discharge.
- ♦ You will be given an identification bracelet (I.D.) with your name and date of birth. Please check to see that the information is correct. Do not take the bracelet off until you have been discharged from the hospital. If the bracelet comes off for any reason, notify your nurse and ask for a new one. For your safety, you will be asked frequently throughout your stay for your name and date of birth.
- Please send home any valuables that you have with you. You are responsible for your valuables.
- If your doctor expects that you will spend the night, we will make every effort to provide you with the type of room you desire. Keep in mind that we cannot guarantee the availability of a particular room on the day of your admission.

Understanding your insurance

We recommend that you be aware of the type of coverage provided by your health insurance and that you know whether you've met all necessary terms. If you belong to a Managed Care Plan or an HMO (Health Maintenance Organization), be sure your primary care provider is aware of your upcoming hospitalization and is prepared to submit a referral to authorize your admission. A pre-admission coordinator may have called you at home to verify basic information.

On the day of your arrival, you may be required to pay a deductible or co-payment. In certain cases, an admission deposit (based on your estimated length of stay) may be required.

If you have questions regarding insurance benefits or coverage, please contact your insurance billing company. Due to the wide variety of insurance plans and levels of coverage, our billing staff is not able to answer questions regarding insurance coverage.

If you receive a bill and have questions or concerns, please call (413) 582-2222 for assistance.

Hampshire HealthConnect

Hampshire HealthConnect is a program at Cooley Dickinson Hospital that helps low-income, uninsured and underinsured people access health coverage and health care services. The program has served the local community since March 2002 by helping residents to access needed health care services including MassHealth, Commonwealth Care and Health prescriptions, dental, vision and mental health services. Please call Hampshire Health Connect at (413) 582-2848 if you are uninsured or need assistance.

Observation Bed Status

An Explanation of the New Rule That Affects Patients' Insurance Coverage

As medical advances lead to shorter hospital stays, health insurance plans are changing the way they pay for some of these stays. In the past, if you were admitted to the hospital for an overnight stay you were considered an "inpatient", and your coverage for such a stay would have been determined by the terms of your insurance policy governing inpatient hospital care. Today, however, many insurers are redefining the term "inpatient" and introducing a new category of coverage called "observation." Under this category, some overnight stays are classified as "outpatient observation." This is important information for you to know, as it may affect your insurance coverage and your payment obligations.

What is Observation? Observation is an outpatient category of hospital service that allows your doctor to care for you in the hospital for a limited period of time. The purpose of observation is to monitor the effect of the short-

term treatments or to administer tests and examinations to help clarify your diagnosis and determine whether you need a longer hospital stay. While you are under observation, you may be assigned to a specifically designated area in the hospital or to a regular patient room.

Will observation affect the quality of care I receive in the hospital? No. As an observation patient, you will receive the same quality of care you would as an inpatient.

Who decides whether my hospital stay will be outpatient observation or inpatient status? Based on your medical needs, your doctor will determine whether you should be admitted as an observation patient or as an inpatient. Your insurance plan may have guidelines about when observation services are appropriate and covered; your doctor will consider these guidelines in making the decision. In some cases, your insurance plan may disagree with your doctor's decision to admit you as an inpatient and determine that your stay can only be covered as outpatient observation. You may be able to appeal this decision to your insurance company.

How will observation affect my insurance coverage? It is important that you check with your insurer, at any time before, during, or after your hospital stay, to find out whether you have been approved for outpatient observation services or inpatient admission. If you have been admitted for observation services, you are considered a hospital outpatient, and will be responsible for any outpatient deductible and insurance co-payments. If you disagree with any determination of your observation status, you may be able to appeal this decision to your insurance company. Talk with your doctor and your insurer.

For Medicare Beneficiaries ONLY

Please be aware:

- ♦ You will be responsible for the Medicare Part B deductible (if applicable) and the 20 percent coinsurance payment.
- ♦ If you require skilled nursing facility services when you leave the hospital, your Observation Stay does not satisfy the three-day qualifying hospital stay requirement which must be met for Medicare Coverage of skilled nursing facility services. Medicare A will not pay for the services you receive in the nursing home.

If, after receiving observation services, you are admitted as an inpatient, you will be considered an inpatient for the rest of your hospital stay and will be responsible for any inpatient deductible and insurance co-payments that will apply for admission status. If you have any questions about your insurance coverage, your insurance company or hospital case manager can assist you.

Under what circumstances will my stay be considered observation? You may need observation services for either medical or surgical conditions. Medical conditions include those in which your hospital care is expected to be less than 24 hours. If your need for hospital care extends beyond that time, your doctor will decide whether to extend observation or admit you as a hospital inpatient. If you have been admitted for outpatient surgical procedure, observation services may be required if you need care beyond what is considered to be a normal recovery.

How long will I remain on observation status? Observation services usually do not exceed 24-48 hours. Your doctor will decide during the observation period whether to discharge you or admit you as a hospital inpatient.

For additional information speak to your Case Manager or call the Cooley Dickinson Hospital Case Management Department at 582-2248.

Discharge planning

Discharge planning is initiated upon admission. Your attending doctor will decide when you are ready to be discharged. Most attending doctors make the final decision to discharge patients in the morning. If you disagree with your doctor's decision, you may ask your nurse to contact Case Management. The discharge goal time is 11 a.m.,

unless there are other circumstances to consider by your physician, who will make the final decision regarding your discharge date and time. Check with your nurse for your discharge time.

Your nurses will work with you and your family to make your discharge as smooth as possible. Before you are discharged from the hospital, your nurses will review with you any special instructions for your at-home care or medicines.

Case managers can help arrange for discharge to another facility, such as a nursing home or rehab facility. They can also help arrange for home nursing care or home health care equipment or supplies, if needed. You should arrange for a family member or friend to take you home from the hospital.

Before you leave the hospital, ask your doctor or nurse about follow-up care.

- ♦ When should I see my doctor again?
- ♦ Do I need to see any other health care providers or have any lab work?
- ♦ What medications do I take and when should I take them?
- ♦ Is there anything special I should do to take care of myself?
- ♦ Are there any symptoms I should know about?

After discharge

- ♦ Home Care: If you need health care services or equipment at home, you may obtain them from the supplier of your choice.
- ♦ Rehab services. Cooley Dickinson Hospital's Rehabilitation Services are composed of Occupational Therapy, Physical Therapy and Speech-Language Pathology. Our therapists have developed their expertise through specialty training and/or certification and ongoing continuing education. We have offices in:

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Amherst (OT, PT, SLP)
(413) 253-0413

Easthampton (PT)
(413) 527-7970

Northampton (OT, PT, SLP)
(413) 582-2113

South Deerfield (PT)
(413) 665-7427

Worthington (PT)
(413) 238-4419.
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Nutritional Support. Dieticians in our Food and Nutrition services program can help you plan a diet that will best support your needs. Please call (413) 582-2322 to set up an appointment.

Home Health Agencies Serving Western Massachusetts:

Agency	Phone
VNA & Hospice of Cooley Dickinson	(413) 584-1060*
Baystate Visiting Nurse Assoc. & Hospice	(888) 852-2737 (866) 238-5023
Berkshire Visiting Nurse Association	(413) 447-2862 (413) 528-0130 (800) 788-2862
Capuano Home Healthcare	(413) 525-2124
Centrus Home Care	(413) 746-3711 (866) 547-2782
Gentiva Health Services	(413) 737-2656
Holyoke Visiting Nurse Association	(413) 534-5691
Hospice of the Fisher Home	(413) 549-0115 (413) 549-2751
Hospice of Franklin County	(413) 774-2400
Lee Regional VNA	(413) 536-0503
Noble Visiting Nurse & Hospice Services	(413) 562-7049
Overlook VNA	(413) 772-1993 (413) 732-4236 (800) 457-1070
Quaboag Valley Visiting Nurse Assoc. & Hospice	(413) 283-9715
Skilled Nursing Facilities	
Anchorage Nursing Home	(413) 625-2305
Buckley Healthcare Center	(413) 774-3143
Calvin Coolidge Nursing & Rehab Center of Northampton	(413) 586-3150
Center for Extended Care	(413) 256-8185
Charlene Manor	(413) 774-3724

Cozy Corner Nursing Home	(413) 665-2740
Farren Care Center	(413) 774-3111
Hampshire Care	(413) 584-8457
Holyoke Geriatric	(413) 536-8110
Holyoke Heath Care Center	(413) 538-7470
Holyoke Rehabilitation Center	(413) 538-9733
Linda Manor	(413) 586-7700
Loomis House	(413) 538-7551
Mount Saint Vincent	(413) 532-3246
Northampton Rehab and Nursing Center	(413) 586-3301
Poet Seat Nursing Home	(413) 774-6318
Renaissance Manor on Cabot	(413) 536-3435
Sunbridge Care and Rehab of Hadley	(413) 584-5057
Wingate at South Hadley	(413) 532-2200
Acute Rehab Facilities	
Bronson Rehabilitation Center	(413) 568-2811
Healthsouth Rehabilitation Hospital	(413) 589-7581
Parkview Specialty Hospital/	(413) 787-6700
Weldon Center for Rehabilitation	(413) 748-6806

^{*} The hospital has a financial interest in this agency.

The Cooley Dickinson Yellow Medication Card

Medications have many uses. They can help relieve pain, control blood pressure and cure diseases. Medications are strong chemicals, so you need to use them correctly. Our yellow medication cards, recognized by *Newsweek* magazine, can help your health care team prevent medication errors.

Whenever you seek health care, remember that you are part of the health care team. You share the responsibility for safe medication use. It is important that you learn as much as you can about the medications that you are taking. Keeping a current list of all these medicines, dietary supplements, vitamins and herbal products will help your pharmacists, doctors, nurses and dentists safely manage your care. Upon admission, you were given a yellow medication card. You should list all your medications, dose and time you take them on this card, and keep it in your wallet or purse. Should you ever have to be hospitalized, this card will help our health care providers make sure that you receive the right medication at the right time.

Ask your health care provider for a yellow medication card.

Patient Rights and Responsibilities

Our organization is committed to:

- ♦ Providing considerate care that safeguards the personal dignity of our patients and respects their cultural, psychosocial and spiritual values; and
- ♦ Respecting and protecting the rights of our patients, as established by state and federal law and by professional standards, without regard to age, race, color, national origin, language, culture, citizenship, creed, religion, gender, sexual orientation, marital status, physical or mental disability, educational background, economic status or source of payment.

You have the right to:

- ◆ A written copy of these rights when you are admitted to Cooley Dickinson Hospital;
- ◆ Freedom of choice in selection of a facility, physician or health service mode, except in emergencies, or as otherwise provided by contract or law, as long as the facility, physician or health service mode is able to accommodate you;
- ♦ Obtain, upon request, the name and specialty, if any, of the physician or other person responsible for your care or the coordination of your care;
- ♦ Request that a family member or representative of your choice and/or your personal physician be notified promptly of your admission to the hospital.
- ♦ Confidentiality of all records and communications to the extent provided by law (see the Cooley Dickinson Health Care Corporation Notice of Privacy Practices). Be informed that there are certain infectious disease results that must be reported to the Massachusetts Department of Public Health in accordance with Massachusetts State Law
- ♦ Have all reasonable requests responded to promptly and adequately within the capacity of the facility;
- ♦ Obtain, upon request, an explanation of the relationship, if any, of our facility or your physician to any other health care facility or educational institution, including the physician's ownership or financial interest, if any, in the facility or other health care facilities, to the extent that the relationship relates to your care or treatment;
- ◆A copy of any rules or regulations of our facility which apply to your conduct as a patient;
- ◆ Receive, upon request, information about financial assistance and free health care;
- ♦ Inspect, upon request, your medical record and receive a copy of your medical record for a copying fee consistent with law or regulation,
- no fee will be charged to you or your representative if you are an applicant or beneficiary under any provision of the Social Security Act or a federal or state financial needs-based benefit program and you provide reasonable documentation at the time of your request that the purpose of your request is to support a claim or appeal under any provision of those programs; the record will be provided within 30 days.
 - Medical Records will be retained for 20 years in either paper, microfilm, or electronic format;
- ♦ Refuse to be examined, observed, or treated by students or any other facility staff without jeopardizing access to psychiatric, psychological or other medical care and attention;
- ♦ Refuse to serve as a research subject and to refuse any care or examination when the primary purpose is educational or informational rather than therapeutic;
- ♦ Receive information, if asked to be a research subject, about the expected benefits, if any, of the proposed experimental treatment or procedure, the potential risks and discomforts, and alternative services that might prove advantageous to you;
- ◆ Privacy during medical treatment or other care within the capacity of our facility;
- A medical screening examination, necessary stabilizing treatment and, if necessary, appropriate transfer to another facility if you have a medical emergency or are in labor, even if you cannot pay, do not have medical insurance or are not entitled to Medicare or Medicaid;
- ♦ Prompt life saving treatment in an emergency, whether or not you are already a patient of our facility, without discrimination on account of economic status or source of payment and without delaying treatment to discuss payment issues unless such delay will not impose material risk to your health;
- ♦ Be involved in all aspects of your care and, if you wish, to have your family participate in your care and decisions;

Patient Rights and Responsibilities

- ♦ Receive from your doctor understandable information that you need to make informed decisions about your medical care, including at least:
 - a description of the recommended treatment or procedure and medically viable alternatives, if any, and
- the risks, benefits and likely outcomes of the proposed treatment and alternatives (including no treatment at all);
- ♦ Voluntarily consent to, or refuse, treatment, including life-sustaining treatment, to the extent provided by law;
- ♦ Make an advance directive to direct your caregivers in the event that you become unable to make or communicate your health care decisions;
- ♦ Be informed about the outcomes of your care, including unanticipated outcomes;
- ♦ Appropriate assessment and management of pain;
- ♦ Receive (and have your physician receive), upon request, an itemized bill or statement reflecting all charges, payments and third-party reimbursements, and an explanation of the bill, regardless of the source of payment;
- ♦ See on an identification badge the first name, licensure status, if any, and staff position of all persons, including students, who examine, observe or treat you;
- ◆Access protective services;
- ♦ Receive from your physician, if you have breast cancer, complete information on all alternative treatments which are medically viable; and
- ♦ Receive from your physician, if you are planning to have an operation to insert a breast implant, information concerning the disadvantages and risks associated with breast implantation.
 - this information must be given at least 10 days before the breast implant operation, except in an emergency,
 - this information shall include, but not be limited to, the standardized written summary provided by the Department of Public Health,
 - you will be asked to sign a statement provided by the Department of Public Health acknowledging that you received the standardized written summary.

If you are a maternity patient, you have a right, at the time of pre-admission, to receive complete information from Cooley Dickinson Hospital concerning our institution's:

- ♦ Annual rates of primary C-sections, repeat C-sections and total C-sections;
- ◆ Annual percentage of women who have had successful vaginal deliveries after having C-section;
- ♦ Annual percentage of deliveries in birthing rooms and labor-delivery-recovery or labor-delivery-recovery-postpartum rooms;
- ♦ Annual percentage of deliveries by certified nurse-midwives;
- ◆ Annual percentage of deliveries which were continuously externally monitored only;
- ◆ Annual percentage of deliveries which were continuously internally monitored only;
- ♦ Annual percentage of deliveries which were monitored both internally and externally;
- ♦ Annual percentage of deliveries utilizing intravenous inductions, augmentation, forceps, episiotomies, anesthesia (spinal, epidural, general); and
- ♦ Annual percentage of women breast-feeding upon discharge from our hospital.

Female patients who are victims of sexual assault of childbearing age have the right to receive information and administration of emergency contraception regardless of whether they report the alleged rape to the police.

All patients have the right to refuse the removal of their clothing unless there is compelling clinical evidence that they could harm themselves or others.

Patient Rights and Responsibilities

Cooley Dickinson Hospital welcomes information regarding any concerns about patient care and safety within our organization. You may communicate these concerns to any manager or nursing supervisor on duty; the Quality Manager at (413) 582-4970; or the Risk Management Department at (413) 582-2827. Resolution of concerns is a top priority for the Cooley Dickinson Hospital management, and our goal is to respond to you within seven days. If concerns cannot be resolved through the hospital or you choose not to make your concerns known to the hospital directly you may contact the Department of Public Health, Division of Health Care Quality, 99 Chauncy St., 2nd floor, Boston, MA 02111 (617) 753-8000; the Board of Registration in Medicine, 200 Harvard Mills Square Suite 330, Wakefield, MA 01880 at (781) 876-8200; or the Joint Commission, Office of Quality Monitoring at (800) 994-6610 to report any concerns or to register complaints.

Patient Responsibilities

You, patients of Cooley Dickinson Health Care Corporation, have responsibilities as well. We bring these responsibilities to your attention in a spirit of cooperation between you and our organization. As a patient, you have the responsibility to:

- ♦ Provide, to the best of your knowledge, accurate and complete information about your present illness and symptoms, medications, hospitalizations, surgeries, past illnesses, and other matters relating to your health;
- ♦ Listen to explanations and ask questions to fully understand proposed treatment so that you can make informed decisions about your care;
- ♦ Follow your treatment plan, or tell your doctor or nurse if you do not understand the plan or cannot follow it for any reason;
- ◆Understand that you are responsible for your actions if you refuse treatment;
- ◆ Respect the privacy of other patients and their need for a quiet atmosphere;
- ◆ Respect the property of other persons and our organization;
- ♦ Observe the "NO SMOKING" rules of our organization. Smoking is not allowed on our campus; and
- ♦ Be prompt with payment or make appropriate arrangements for payment.

Advance Directives/Health Care Proxy

What is a Health Care Proxy or Advance Directive?

An Advance Directive is a legal document that gives an individual a method to identify health care preferences to be used in the event that they become unable to communicate such decisions. A Health Care Proxy (HCP) form is a type of advance directive and a legal document in Massachusetts that allows you, a competent person age 18 or over, to appoint someone to make medical decisions for you if for any reason you are unable to communicate decisions for yourself. This person you appoint is referred to as the health care proxy or agent.

What can the Proxy do?

The proxy is given the legal authority, by you, to make medical decisions on your behalf if, for any reason, you are unable to communicate your wishes on your own behalf.

How does the Proxy know what my wishes are?

You and your appointed proxy should discuss your wishes while you are able so that he or she is clear about what you would want or not want for medical interventions. The HCP proxy ensures that your wishes are honored in the event, and *only* in the event, that you are unable to make or communicate decisions about your care or treatment.

Who can be a Proxy?

You may appoint any competent adult to be your proxy. You should appoint someone you trust and who will be able to communicate on your behalf if, for any reason, you are unable to communicate for yourself. Your proxy does not have to be related to you.

What if I change my mind about who I choose as a Proxy?

You may revoke (cancel) your HCP by any one of the following actions:

- a) Destroying the original proxy form;
- b) Simply signing a new health care proxy document; or
- c) Communicating orally or in writing to your proxy, health care provider, family or friend that your proxy is revoked. In addition, a HCP document is automatically revoked when you are legally separated or divorced from a spouse/partner who is named as your proxy.

What is the difference between a HCP and a Living Will?

The HCP is the only document in Massachusetts that ensures that your wishes are followed if you cannot communicate on your own behalf. In Massachusetts, a Living Will may serve as a guide for specific medical interventions, but it is not legally enforceable. A Living Will does not name an agent who can communicate on your behalf if you are unable to communicate for yourself.

Do I need a lawyer to complete a HCP form?

You do not need a lawyer or a notary public to complete a HCP form. You will need two witnesses, neither of whom can be your appointed agent.

Where can I get a HCP form and information about how to complete this document?

You may ask for a Massachusetts HCP form with complete directions at any outpatient department of Cooley Dickinson Hospital (CDH). If you are an inpatient at CDH, you may ask your primary nurse to assist you with completing a form. Senior citizens may call their local Council on Aging for assistance with the form. You may access the form via the internet at www.massmed.org under the "patients" section found along the top menu bar, once in that section select "end of life care" found in the left menu. Cooley Dickinson Hospital has ongoing community programs about HCPs and advance directives, as well as other areas of interest. You should check the local newspapers or visit our web page at www.cooley-dickinson.org to inquire about our programs and services.

Advance Directives/Health Care Proxy

What do I do with my completed form?

- a) Keep a copy for yourself. (It is not necessary to have the original HCP form at any time; a copy is always valid.)
- b) Give a copy to your agent;
- c) Give a copy to your primary care provider;
- d) Give a copy to a family member;
- e) If you are an inpatient at CDH, give a copy to your nurse for your medical record;
- f) Always bring a copy of your HCP form to the hospital if you are to be admitted or undergo any procedure; and
- g) If you use Cooley Dickinson as your hospital, you may send a copy of your Health Care Proxy document to:

Health Information Management Department Cooley Dickinson Hospital P.O. Box 5001, Northampton, MA 01061

Attn: Proxy Information

Interpretation Services

The language interpreting service allows Cooley Dickinson Hospital to provide high-quality health care to our non-English-speaking or non-English reading patients for both emergencies and scheduled appointments at all hospital locations. It is a free service for patients that is paid for by Cooley Dickinson Hospital.

We have access to specially trained language interpreters who are available 24 hours a day, 365 days a year at the main hospital location or at any off-site hospital location.

Please let us know if you have any questions, comments or concerns about this service by contacting the Interpreter Services Department at (413) 582-2203 or by writing to: Interpreter Services Department, Cooley Dickinson Hospital, 30 Locust St., Northampton, MA 01061-5001.

Life Support Decisions: Information About Your Choices

Patients facing serious illness and their families need excellent medical care, emotional support and understandable information so they can participate in and make informed decisions about their care. The following facts may help when making these difficult decisions.

Understanding Life Support

Life support replaces or supports a failing body function. In conditions that can be treated or cured, life support is used for a short time until the body can resume normal functioning. This information is meant to explain various life support terms and measures that our medical team may need to talk with you about while your loved one is in the hospital.

A treatment may be helpful if it eases suffering, improves the quality of life or restores functioning. The same treatment can be considered harmful or burdensome if it causes pain or prolongs the dying process without offering benefit. That treatment may actually increase suffering and decrease a person's quality of life.

The choice to forego life support is a deeply personal one. It is important that you talk to your physician regarding the risk and benefits of each therapy. All life support measures are optional treatments, and our team is dedicated to honoring the care preferences of patients and families.

The following is a life-support term: **No Code**. A No Code is an order written by your doctor that tells the rest of the team not to attempt cardiopulmonary resuscitation (CPR) in case of cardiac arrest (when the heart stops beating.) A person with a valid No Code order will not be given CPR under these circumstances. A No Code order does not mean "do not treat." Patients have the right to receive any and all treatments.

Comfort Care

End of life care (EOLC) guidelines are discussed when a patient and/or health care agent, in consultation with the patient's physician, have concluded that curative treatment is not in the best interest of the patient's overall health and quality of life. A decision may be made to maintain the patient on EOLC measures. The goal of EOLC is optimal comfort and dignity of the patient and family, also addressing social, emotional and spiritual needs. The patient or health care agent may rescind the decision either verbally or in writing, at any time.

Speak Up

At Cooley Dickinson Hospital we encourage our patients/families to report concerns about safety. All patients are provided with information about their rights and ways to report concerns about safety of the environment or in their care.

The Joint Commission Speak-Up program

Speak Up if you have questions or concerns. If you don't understand ask again.

Pay attention to the care you receive. Always make sure you are getting the right medications and treatments.

Educate yourself about your illness. Learn about medical tests and treatment plan.

Ask a trusted friend or family member to be your advocate.

Know what medicines you take and why you take them.

Medication errors are the most common health care mistake.

Use a health care organization that has been carefully checked out to be sure they are maintaining safe patient care standards and providing quality care.

Participate in all the decisions that involve your health care. You are the center (core) of the health care team.

- Educate your patients on hand hygiene practices, respiratory hygiene and precautions, as indicated.
- Educate patients on ways the hospital will prevent adverse events during surgery ("Time Out").

EVERYONE HAS A ROLE IN MAKING HEALTH CARE SAFE. ENCOURAGE YOUR PATIENTS AND FAMILIES TO BECOME AN ACTIVE AND INFORMED MEMBER OF THE HEALTH CARE TEAM AND "Speak-Up"

Ways You Can Help With Your Care

Here are some things you can do to ensure a safe hospital stay for you or your family:

- ♦ For your safety, make sure all health care providers ask for your name and date of birth before administering any medication or performing a procedure.
- ♦ Don't be afraid to ask questions. Make sure you understand all aspects of your illness or medical treatment.
- ♦ Write down important questions and answers. Ask for information in writing that you can keep.
- ◆ Read all medical forms and make sure you understand them before you sign anything.
- ◆ Don't be afraid to tell the doctor or nurse if something doesn't seem quite right.
- ♦ Tell your doctor or nurse if you have any allergies.
- ♦ Know why you are having tests.
- ♦ Ask about safety. If you are having surgery or an invasive procedure, make sure the doctor marks the area so there is no confusion.
- ♦ Bring a list of your current medications with you to the hospital. Be sure to include any herbal medications or vitamins you are taking.
- ♦ Nurses check and double check medications before they are given. However, you can do things to help with your care.
- ♦ Each time a new medication is prescribed, make sure the doctor or nurse answers the following questions:
 - What are brand and generic names for this medication?
 - Why am I taking this medication?
 - What does the medication look like?
 - How much should I get and how often?
 - Does this medication have any side effects? What should I do if they occur?
 - Does this medication interact with other medications or with food?
 - ♦ Make sure your doctor or nurse checks your wristband before giving you medication.
 - Let your doctor or nurse know if a friend or family member is going to help make your health care
 - Ask this person to speak up for you if you are unable to speak for yourself.
 - Make sure this person understands your wishes about resuscitation and life support.
 - ♦ All health care workers should introduce themselves to you and wear an ID badge.
 - ♦ All health care workers should wash their hands before they touch you.

Condition H (**Help**) was created to provide our patients and families with a way to call for immediate help in an emergency or when a patient cannot get the attention of the health care team.

When should patients and/or families call a Condition H:

- ♦ When there is a noticeable change in a patient's medical condition that requires immediate attention and a member of the health care team is not immediately available.
- ♦ When there is a breakdown in care provided or confusion over what needs to be done for a patient in an emergent situation.

How to call a Condition H:

- ◆ Call **44** from any hospital phone. The hospital operator will answer.
- ♦ Give your name, patient's name and room number
- ♦ State the patient's and/or your concern to the operator (why you are calling).

The operator will immediately activate **Condition H**, and this will alert a team of medical professionals to come to the patient's room and assess the situation.

Ensuring Quality Care for Surgical Patients

You can play a vital role in making your surgical procedure safe by becoming an active, involved and informed member of the health care team.

- 1. You and your surgeon should agree on exactly what will be done during the operation.
- 2. The surgical site must be marked with a permanent marker, and you will be involved in marking the site. This means that the site cannot be easily overlooked or confused (for example, surgery on the right knee instead of the left knee). If you choose not to have your site marked, you will wear a purple bracelet.
- 3. Ask questions. You should speak up if you have concerns. It's okay to ask questions and expect answers that you understand.
- 4. Think of yourself as an active participant in the safety and quality of your health care. Studies show that patients who are actively involved in making decisions about their care are more likely to have good outcomes.
- 5. For your safety, the staff may ask you the same question many times. They will ask:
 - ♦ Your name and date of birth
 - What kind of surgery you are having
 - ♦ The part of your body to be operated on
 - They will also double-check the records from your doctor's office.

After your surgery

- ♦ Tell your doctor or nurse about your pain.
- ♦ Ask questions about medicines that are given to you, especially new medicines. What is it? What is it for? Are there any side effects? Tell your caregivers about any allergies you have to medicines. If you have more questions about a medicine, talk to your doctor or nurse before taking it.
- Ask your doctor if you will need therapy or medicines after you leave the hospital.
- ♦ Ask when you can resume activities like work, exercise and travel.

Make sure all of your questions have been answered. If you do not understand something, Please ask your doctor or nurse. You are the center of the Cooley Dickinson health care team and your safety is our highest priority.

Restraints and Bed Rails

Our staff is committed to keeping all of our patients free from restraints. We will use restraints only in emergency situations when there's a great chance that the patient will injure him or herself or injure others, and only after we have tried every available option to avoid using restraints.

As a patient or loved one, you should know that bed rails can be helpful in that they can:

- ♦ Help a patient turn or change position in bed.
- Provide a hand-hold for getting into or out of bed.
- ♦ Provide a feeling of comfort and security.
- Reduce the risk of patients falling out of bed when the bed is being moved.
- Provide easy access to bed controls and personal care items.
- If four side rails are required to keep you safe, they are considered a restraint.

If restraints become necessary, here are some things you can expect from us:

- ♦ We will contact you if restraints become necessary.
- ♦ You will be given the reason for the restraints.
- We will apply restraints safely and in a manner that maintains your loved one's dignity and well-being.
- We will vigilantly watch to see that your loved one is kept safe, free from harm and treated with dignity and respect.
- ♦ You and your loved one will be taught how the call bell works when you need help or assistance.
- The nurses and their team will check on your loved one often.
- We will encourage your loved one to tell the nurses when they are having pain, are hungry, thirsty or need to use the bathroom.
- We will continue to try all measures to end restraints at the earliest possible time.
- The nurses and their team will tell you and your loved one what you can do to help end using restraints as early as possible.

What can families do? To reduce having to use restraints, here are some things you can do to help:

- Be sure to share important information with our team, especially if your loved one is confused. Tell the team about the medications your loved one takes, including those they buy over the counter without a prescription.
- ♦ Do not insist on using restraints or seclusion for your loved one until our team has tried every available measure to prevent having to use restraints to keep your loved one safe.
- ♦ Understand that most patients can be in bed safely without bed rails. Talk to our team to determine if your loved one needs bed rails. In many cases, patients can sleep safely without bed rails.
- ♦ Consider staying with the patient, even overnight, when they are hospitalized. They will be able to rest more comfortably.

Preventing Falls

Our health care team takes seriously our obligation to provide you with care that is safe and aimed at restoring your health to the very best level possible. An accidental fall in the hospital could complicate your recovery and prolong your hospital stay.

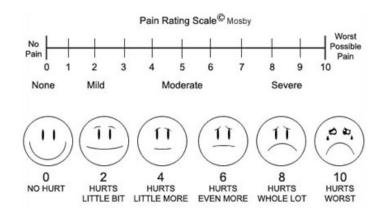
Since we know that the most common causes of falls are waking up during the night and forgetting where you are; being weak due to illness or having difficulty with balance; taking medications that make you feel sleepy or drowsy; and urgently needing to use the bathroom, you can help us protect you from falls by:

- Use the Nurse Call bell when help is needed to get out of bed.
- ♦ Call the nursing staff for assistance to go to the bathroom.
- Bed/chair alarms are used to keep patients safe. Please do not turn them off.
- ♦ Call for help before getting up. Use your call bell.
- ♦ Calling for help when you first feel the urge to use the bathroom. Please don't attempt to use the bathroom by yourself.
- ♦ Kindly waiting for the nurse or nursing assistant. They are here to help you.
- ♦ Sitting up slowly before getting out of bed.
- ♦ Making sure you have enough light at night when getting out of bed.
- ♦ Watching out for wet floors or objects that might cause you to trip or fall.
- ♦ Wearing well-fitting non-slip footwear.
- Being careful when reaching for objects from your bed or chair. If something is out of reach, call for help and wait for someone to move it for you.
- Making sure that your walker, cane or crutch is within reach and is firm and secure before you attempt to put your weight on them.
- ◆ Do not attempt to stand up if you are in a chair or wheelchair. Call for help.
- Asking your family members and visitors to let the nursing staff know when they are leaving so that staff can come and check on you.
- ♦ Keeping your bed alarm on.

What You Should Know About Pain Management

We are your partners in pain management. You can help by:

- 1. Telling us as soon as soon you begin to feel uncomfortable. Don't wait until your pain is "out of control" before asking for help. It is better to prevent pain from increasing instead of playing "catch-up." Let's work together to relieve your pain.
- 2. This is an example of a pain scale below. You will be asked to describe your pain as best you can. You may use numbers, words or point to a face.



3. Knowing that you might need pain medication is important. Less pain means that you will heal faster, become active faster, get your strength back and go home sooner. If you have had problems with drug or alcohol use in the past, let your doctor or nurse know. Some people fear that they will become addicted to their pain medication. Your doctor will prescribe a safe medication and dosage.

Often people will have less pain if they use these methods. Like pain medicine, each method works differently for different people. Ask your nurse for help with these pain reduction methods. Remember, you and your health care team need to work together to help you manage your pain.

What else can you do to reduce pain?

- ♦ Breathe in slowly and deeply and count to three. Slowly let all the air out while relaxing your muscles. Do this several times. Say the word "peace" or "relax" to yourself each time you exhale.
- ♦ Listen to music, watch TV, read or work on a puzzle.
- Change positions turn in bed, sit-up, walk or elevate your legs or arms on a pillow. Tell your nurse if you need help.
- ♦ Cold packs or warm compresses can help. Ask your doctor or nurse.
- ♦ Tell us if you need a blanket, pillow, cool drink or pain medicine.
- ♦ Studies show that prayer and meditation can help.
- ♦ Think positive. Most pain will go away or be reduced using some of the above options.

Palliative Care/Comfort Care

Palliative care is a team-based approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.

The CDH Ethics Committee

Patients or their representatives, family members and friends and health care providers can request an ethics consultation. The Ethics Committee at Cooley Dickinson Hospital is available 24 hours a day, seven days a week for consults. The Cooley Dickinson Hospital Ethics Committee is committed to community outreach.

When a patient or family member is struggling with a difficult decision, or a situation feels uncomfortable, an ethics consult can be requested to clarify the ethical issues involved and facilitate a forum in which every person can be heard without judgment.

An ethics consultation can help when:

- ♦ Making end-of-life decisions.
- You want to know what is enough treatment and what is too much.
- ♦ You or a loved one feel your wishes are not being considered or you are not understood.

There are three ways to arrange a consult:

- ♦ Ask your nurse.
- ♦ Call a representative of the Ethics Committee at extension 2248 between 7:30 a.m. and 4 p.m. Monday through Friday.
- ♦ Call the Cooley Dickinson Hospital switchboard. If the consult is an emergency, the operator will contact committee members at home, and they will work with you to begin the consult as soon as possible.
- ♦ Contact an Ethics Committee member. A list of current committee members is at the hospital switchboard and located on many units.

The Adult and Pediatric Hospitalist Programs

The Cooley Dickinson Hospitalists are highly qualified, board-certified medical providers who specialize in providing 24-hour-a-day care to adults who are hospitalized. We also have pediatric hospitalists who care for children and intensivists who are trained to care for critically ill patients. Our hospitalists only care for patients in the hospital and do not have patients outside of the hospital that they treat.

Hospitalists are team leaders within the hospital, coordinating your care amongst the doctors, nurses, subspecialists and other key clinical staff from the time you are admitted until you go home. We have doctors in the hospital 24 hours a day to handle any emergencies.

Your hospitalist will communicate with your family as you desire and will keep your primary doctor informed as to your condition, progress and discharge. Your hospitalist provider will keep your primary doctor informed as to your condition, progress and discharge. A full summary of your hospital stay is sent to your doctor the day you are discharged.

If a rehabilitation or nursing facility transfer is required, your hospitalist will discuss this with you and will coordinate with the therapists and your case manager. You should feel free to ask your hospitalist any questions regarding your plan of care.

For more information on the hospitalist program, please call (413) 582-2731.

Preventing Infections

At Cooley Dickinson Hospital, we want to keep you and your family and visitors healthy by preventing the spread of infections.

We ask you to partner with us in your care. Here are some ways to help prevent infections:

- Cleaning hands is the most important step everyone can take to prevent the spread of infection.
- ♦ Clean your hands before you eat and after you use the bathroom.
- ♦ Have your visitors clean their hands before and after their visit.
- ♦ All hospital staff ~ your nurse, doctor, therapist, chaplain and case manager ~ should clean their hands when entering and leaving your room. If you don't see this happen, we want you to ask staff to clean their hands.
- ♦ Places to clean hands:
 - o A dispenser with hand sanitizer is at the door of every patient room. Squirt, rub hands together and let dry.
 - o You can also use the sink in the bathroom.
- Family and friends who are sick with a fever, cough or flu symptoms, or nausea, vomiting and diarrhea or other contagious illness should wait to visit until after they are better.
- It is especially important to stop the spread of antibiotic-resistant germs.
- ♦ Infections that are caused by resistant (hard to kill) germs are becoming more and more common. One that we see the most is MRSA (Methicillin Resistant *Staphylococcus aureus*). We also sometimes see VRE (Vancomycin Resistant *Enterococcus*).
- ♦ To keep these germs from spreading, we take the following steps:
 - o We screen all patients on admission to see if they have MRSA. Some people may have it and not know it.
 - o If a patient has MRSA, VRE or some other resistant infection, the patient will be placed on appropriate precautions.
 - o Do not bring any personal belongings into the room.
 - o Do not wear isolation attire out of the room.
 - o Always clean hands before putting on isolation attire and after taking it off. Take off the gown and gloves when leaving the patient room. Do not wear them in the hall.

Preventing Infections after Surgery

A surgical site infection is an infection that can happen where you have your operation. This happens very rarely in I-3 people out of I00 who have surgery. The infections are treated with antibiotics. Some people may need another operation to treat the infection.

Signs of infection are:

- ♦ Redness and pain around the area where you had your surgery
- ♦ Cloudy fluid coming from the wound
- ♦ Fever

Things hospital staff do to prevent surgical site infections:

- ♦ Scrub their hands and arms with antiseptic (special soap that kills germs) before the operation.
- ♦ Wear hair covers, gowns, gloves and masks during the operation.
- Clean your skin at the surgical site with an antiseptic before the procedure.

Preventing Infections

- ♦ If necessary, use electric clippers instead of a razor to remove hair.
- Give you an antibiotic right before your surgery starts. The antibiotic will be stopped within 24 hours.
- ♦ Clean their hands before and after caring for you.

Things you can do to prevent an infection:

♦ Before your surgery:

- o Tell your doctor about any medical problems you have, such as diabetes, MRSA or allergies.
- o Do not shave where you are going to have surgery.
- o Shower the night before your operation if you are able to.
- o Ask if you will get antibiotics before surgery.
- o Ask hospital staff to clean their hands if you don't see them do it.

♦ After your operation:

- o Don't touch the wound or bandages.
- o Ask hospital staff and visitors to clean their hands if you don't see them do it.
- o You may have tubes such as catheters or an IV. Ask your doctor when they can come out.
- o Make sure you understand how to care for your wound and when to call the doctor.

♦ When you get home:

- o Follow the doctor's directions for caring for your wound.
- o Clean your hands before changing your bandages.
- o Call your doctor right away if you have signs of an infection: redness, pain, cloudy drainage or a fever

Talk to your doctor or nurse if you have any questions.

Patient Feedback

We want to hear about your experience at Cooley Dickinson Hospital while you are here. If you have positive comments to share about your caregivers, ask your nurse for a CareGram to fill out.

We also want to hear if you feel that your care was lacking in some respect. We want to resolve your concerns and complaints as quickly as possible. Concerns or complaints about the quality of patient care or the operations of the hospital can be made by an individual in one of three ways:

- **Directly to any hospital personnel**. Staff have been trained to listen to and respond to your concerns. If they are unable to help resolve your concern, they will direct your concerns to their supervisor or manager.
- ♦ If you feel your concern is not resolved by hospital personnel, feel free to ask to speak with a unit supervisor or manager.
- ♦ If you continue to require assistance to resolve your concern, please call Patient Relations at (413) 582-2827
- ♦ Direct written complaints to Risk Management, Cooley Dickinson Hospital, 30 Locust St., Northampton, MA 01060.

You may also file a complaint with:

- ♦ The Commonwealth of Massachusetts, Board of Registration in Medicine, 200 Harvard Mills Square Suite 330, Wakefield, MA 01880 at (781) 876-8200; Massachusetts Department of Public Health, Division of Healthcare Quality, 99 Chauncy St., 2nd Flr., Boston, MA 02111; (800) 462-5540.
- ♦ Joint Commission, One Renaissance Blvd., Oakbrook Terrace, IL 60181, (800) 994-6610.

Patient satisfaction is of the utmost importance to us. All efforts will be made to make your hospital stay a positive one. After your discharge, you may receive a confidential patient satisfaction survey to complete and return. Please make every effort to complete this to help us improve the quality of care we provide our patients.

Cafeteria, Coffee Shop, Gift Shop and Visiting Hours

Our cafeteria is located on the ground floor. Ask any member of our staff to direct you there, and they will be glad to show you the way.

In our Cafeteria and Coffee Shop, we offer healthy and satisfying meals and refreshments for family members. Hours are as follows:

Cafeteria:

Monday through Friday, 6:15 a.m. to 3 p.m. Saturday and Sunday, 4:30 - 6:30 p.m.

Coffee Shop:

Monday through Friday, 8 a.m. to 7 p.m. Saturday and Sunday, Noon to 4 p.m.

Gift Shop:

Monday thorough Friday, 8 a.m. to 8 p.m., and Saturday and Sunday Noon to 4 p.m.

Visiting Hours:

Cooley Dickinson Hospital welcomes patient families, friends and visitors. There are no set visiting hours, but visitors are asked to respect patients' needs for a restful atmosphere. In some cases, in the critical care unit or Childbirth Center, or at the patient's request, visitors may be limited.

For the safety of our patients and staff, visitors should not visit if they have symptoms of flu or upper respiratory disease. All visitors are asked to wash or sanitize their hands before and after visiting a patient. Thank you.

Our Chapel

The chapel, located on the second floor (turn right off the three-bank Gallery Elevators) is open 24 hours a day for patient, family and staff use for quiet reflection, prayer or meditation. For pastoral care, dial 2869 from within the hospital; (413) 582-2869 if outside the hospital when calling.

How You Can Help

Blood Donation

Donating blood saves lives. It may not be your neighbor or co-worker or best friend who needs your blood today, but someone does. In fact, blood donated at Cooley Dickinson Hospital stays in our community to help local people. The CDH Blood Bank provides more than 2,000 units of blood each year to patients at CDH and the VA Medical Center as well as the Hampshire Dialysis Center.

Hours in our Blood Bank are Monday, Wednesday, Thursday and Friday from 8:30 a.m. to 3 p.m. and Tuesday from 1 to 8 p.m.

Call (413) 582-2162 to make an appointment or stop by the North Building, basement level, on the campus of Cooley Dickinson Hospital.

Bloodmobile

Our Cooley Dickinson Bloodmobile brings the blood donation center closer to you, visiting sites around the Pioneer Valley each week. Check the Cooley Dickinson Web site at www.cooley-dickinson.org for the Bloodmobile schedule.

Charitable Gifts

When you give to Cooley Dickinson, your gift has a significant impact on our ability to provide the highest quality of care to you, your family and friends in our community. Your continued support helps retain a skilled and experienced medical staff, acquire the latest state-of-the-art technology, maintain our facilities and assist our compassionate, caring staff in their every day commitment.

Most gifts are made as unrestricted gifts, yet opportunities exist to support specific programs, name physical spaces and purchase bricks to be placed in the Healing Garden to be landscaped in 2009. Gifts can also be made in honor of a loved one, friend or caregiver.

To make a gift by mail, please make your check payable to Cooley Dickinson Health Care Corporation (CDHCC) and send your contribution to:

Cooley Dickinson Hospital Development Office P.O. Box 329 Northampton, MA 01061-0329

To make a gift online, please visit www.cooley-dickinson.org/giving.

Volunteer Program

Volunteers at Cooley Dickinson Hospital are a valuable part of our organization and represent many segments of our community: young and old, male and female, retired and employed, students and homemakers. People work as hospital volunteers because they want to be involved in their community, stay active, meet new people, explore career opportunities and enjoy helping others.

Nearly 300 volunteers annually offer critical support to our Gift and Coffee Shops, information desks, mail delivery; Surgical Day Care, Endoscopy, Central Sterile Supply and Emergency departments. The CDH Auxiliary also offers opportunities to assist with annual fundraisers such as the Trees of Love and Thanksgiving, Gift Wrap or Fashion Show.

Hospital volunteers work in many different areas of the hospital and, to the extent possible, we try to match volunteer interests and skills with the needs of the hospital. For more information, call (413) 582-2251.

VNA & Hospice of Cooley Dickinson

The Hospice program of the Visiting Nurse & Hospice (VNA&H) of Cooley Dickinson cares for terminally ill patients and their families, primarily at home. Our goal is to improve each patient's quality of living during his or her final stage of life. Hospice care does not hasten or postpone death but helps patients and families live life fully, prepare for death and maintain personal control over their lives for as long as possible.

The Program

Patients and families facing the challenge of a life-limiting illness often feel overwhelmed. Hospice can help. The hospice program offers a medically-supervised, nurse-coordinated team of professionals, home health aides and volunteers who provide for the psychological, physical, social and spiritual needs of the patient/family throughout the illness and bereavement experience.

Hospice offers comfort at the end of life and a dignified death for patients. Pain and symptom control are of primary importance. Spiritual care and counseling are also provided. Hospice allows people to maintain comfort, independence and dignity.

Hospice staff is available by phone seven days a week, 24 hours a day, wherever the patient lives. Visits are made by staff according to the patient's condition and needs. At the time of death, a hospice staff member will pronounce and provide support to loved ones.

Quality

Visiting Nurse & Hospice of Cooley Dickinson is a member of NHPCO (National Hospice and Palliative Care Organization) and the Hospice Federation of Massachusetts, organizations which are committed to improving end-of-life care and expanding access to hospice and palliative care in the United States. As an agency, we track and monitor outcome and satisfaction measures on hospice patients and their caregivers through NHPCO and the Fazzi Company.

Services

The hospice program offers an array of services including:

- ♦ Skilled Nursing Care
- ♦ Physician Collaboration
- ♦ Medications
- ♦ Medical Supplies and Equipment
- ♦ Volunteer Support
- ♦ Home Health Aide
- ♦ Social Work Counseling
- ♦ Spiritual Care
- Physical and Occupational Therapy Consultation
- ♦ Inpatient Hospitalizations and Respite Care
- ♦ Bereavement Support Services

VNA & Hospice of Cooley

Eligibility

- ♦ The patient has a terminal illness with a limited life expectancy of six months or less.
- The patient/family realize that the goals of hospice is to provide comfort care and symptom management to enhance the patient's quality of life.
- Consent from the patient's primary care physician and the hospice medical director is established before admission to the program.
- ♦ Hospice provides care to the residents of Hampshire County and its bordering cities and towns.

Admission to hospice is based on the patient/family need, and the organizations' ability to provide quality services. Hospice does not discriminate on the basis of sex, race, age, religion, creed, color, national origin, martial status or sexual preference.

Funding Sources

Reimbursement for hospice services may come from Medicare, Medicaid, health insurance plans or direct patient payments. Hospice staff is available to discuss financial concerns, and applications for financial assistance are available. Hospice depends greatly on the generosity of families, friends and businesses to help support its services. General contributions and memorial gifts are always welcome and are tax-deductible to the full extent provided by law.

Telephone Directory for CDH Programs and Services

Cooley Dickinson, your local, award-winning health care provider, offers an outstanding team of experienced and highly qualified professionals backed by state-of-the-art technology. We hold ourselves to the highest standards when it comes to delivering personalized, compassionate care to the residents of the Upper Pioneer Valley. We're making a great community better by offering the following programs and services:

24-hour Emergency Department with Fast Track services	582-2108
Admitting and Patient Registration	582-2202
Behavioral Health (outpatient)	586-8550
(inpatient)	582-2151
Response Team (Intake and Assessment)	582-2000
Addiction Services/Substance Abuse	
AIDS Care, Education and Support	586-8288
Anti-coagulation/Coumadin Clinic	582-2816
Billing	582-2222
Cafeteria	582-2326
Cancer Care Program	582-2028
Oncology Social Work	
Patient Navigator Program	
Cancer Registry	582-2358
Cardiology	582-2117
Electrocardiograms (EKGs)	
Holter Monitoring	
Routine Stress Testing	
30-day Event Monitoring	
Cardiopulmonary Rehabilitation	582-2404
Congestive Heart Failure Program	582-4767
Cardiovascular Services Suite	582-4701
Diagnostic Cardiac Catheterization	
Heart Rhythm Studies	
Implantable Pacemakers and Defibrillators	
Case Management	582-2248
CD Practice Associates	582-2440
Center for Midwifery Care	584-8953
Chaplain	582-2869
Childbirth Center	582-2125
Childbirth preparation and refresher classes	582-2736
Clinical Units	
West 2	582-2121
West 3/Telemetry	582-2112
Critical Care Unit	582-2186
West 5	582-2151
North 3	582-4901
Pod A (Rooms 301A-307A, 330A-332A)	582-4902
Pod B (Rooms 308B-313B,324B-329B)	582-4903
Pod C (Rooms 314C-323C)	582-4904
Joint Replacement Center	582-2535
Medical Day Stay	582-2920
Coffee Shop	582-2253
Compliance "Hot-Line"	582-2218

Telephone Directory for CDH Programs and Services

Development Office	582-2255
Education Department	582-2400
Emergency Department	582-2108
Diabetes Education	585-0039
Endoscopy	582-2017
Environmental Services	582-2417
Food and Nutrition Services	582-2324
Gift Shop	582-2254
Hampshire Health Connect	582-2848
Health Information Management	582-2282
Hospice/Home care	584-1060
Hospitalist program (24/7 coverage)	582-2731
Human Resources	582-2241
Infection Control	582-2135
Intensivist/Critical Care program	582-2186
Laboratory Department	582-2161
Nutrition Services	582-2322
	582-2379
Medical and Surgical services	
Neurology	582-2117
Routine EEG	
24-hour ambulatory EEG	F02 2120
Nuclear Medicine	582-2120
Occupational Health Services	582-2480
Parent Education	582-2736
Pastoral Care	582-2869
Patient Access Services	582-2202
Patient complaints	582-2212
ED Patient Complaints	582-2363
Pediatric Services/Pediatric Hospitalist program	582-2792
Physician Referral Service	(888) 554-4234
Pulmonary Clinic	582-2119
Quality Improvement	582-2004
Radiation Oncology	582-2107
Radiology/Imaging Services	582-2101
Rehabilitation Therapy	582-2113
Resources for the Uninsured and Underinsured	582-2848
Respiratory Care	582-2119
Risk Management	582-2027
Safety Management	582-2311
Security/Lost and Found	582-2726
Telemetry Unit	582-2112
Ultrasound	582-2077
Echocardiography	
Transesophageal Echocardiography	
Vascular and Special Interventions	582-2554
VNA Hospice of Cooley Dickinson	584-1060
Volunteer Opportunities	582-2251
Wound Care/Ostomy Clinic	582-2866
Tround Card Ostorny Clinic	302-2000