



FORT HEALTH CARE

PATIENT RIGHTS AND RESPONSIBILITIES POLICY

I. PATIENT RIGHTS AND RESPONSIBILITIES

Fort HealthCare informs all patients of their rights and responsibilities in writing. This document is in the Patient Services guide and is available throughout the facilities.

II. ACCESS TO CARE AND PERSONALIZED CARE

Patients are given reasonable access to care without regard to race, creed, color, national origin, ancestry, religion, sex, sexual orientation, marital status, age, newborn status, handicap or source of payment provided that the medical care needed is within the scope of services provided at Fort HealthCare and its affiliated organizations. Reasonable modifications and accommodations to policies, procedures and practices will be provided when requested by a patient with a disability or handicap to afford such a patient with the same services, privileges, goods, accommodations or advantages as non-disabled patients, unless the provision of the modification or accommodation would: 1) fundamentally alter Fort HealthCare's program, services, goods, privileges, advantages, or accommodations, 2) involve issues of medical treatment, or 3) compromise patient care.

An employee who receives a patient request for a program modification or accommodation should make every effort to grant and implement the request, unless the request, if granted, would violate the above-listed provisions. An employee with questions regarding a patient's request for accommodations should direct them first to the attending physician, and then to the employee's supervisor or department head if the physician is unavailable. The attending physician, supervisor or department head should make the final decision regarding the request.

Patients requiring care that is beyond the Fort HealthCare scope will be transferred in accordance with facility policies. Fort HealthCare and its affiliated organizations will be responsible for providing communication mechanisms with hearing impaired and non-English speaking patients.

Patients have a right to receive considerate and respectful care based on their individual psychosocial, spiritual, cultural needs and values. Cultural and spiritual beliefs may be exercised to the extent that they do not interfere with others well-being. Hospital and community resources are available through the Pastoral Care and Social Services staff of Fort HealthCare.

III. CONFIDENTIALITY AND PRIVACY

Patient health information will be kept confidential in accordance with HIPAA and Wisconsin law (Wisc.146.81-146.83, 51.30, 146.025 and 42 CFR 93-282). Patients and their designated representative* will be allowed reasonable access to the patient's medical record in accordance with statutes stated above. Patients will be given reasonable visual and auditory privacy and may request a transfer to another room when such accommodations are available.

Patients also have multiple rights related to their protected health information. Patients are informed of these rights via the Notice of Privacy Practices. These rights include the following:

- A. Availability of Fort HealthCare privacy notice
- B. Requesting restrictions on certain uses and disclosures of PHI
- C. Receiving confidential communication of PHI
- D. Access, inspection and copying of PHI
- E. Requesting amendments or corrections to PHI
- F. Receiving an accounting of disclosures of PHI
- G. Filing of complaints related to privacy issues

Please refer to the Confidentiality / Information Privacy Policy, the Notice of Privacy Practices Policy & the applicable policy and procedure for a full description of these rights.

FORT HEALTH CARE

PATIENT RIGHTS AND RESPONSIBILITIES POLICY

IV. CHARGES AND POLICIES

Patients have a right to receive information regarding fees and charges including the right to request a summarized list of charges and to obtain information about those charges. Every patient shall receive, upon request, information relating to financial assistance available through Fort HealthCare.

V. PATIENT/FAMILY INVOLVEMENT IN DECISION MAKING (Advanced Directives & Informed Consent)

The patient or their designated representative* has the right and responsibility to be involved in decision-making about their care. This includes acceptance or refusal of care. Advance directive document information, detailing any withholding or withdrawal of resuscitation or life sustaining measures, will be used by the Medical Staff in treatment plans and orders for patient care. Conflicts in the needs and wishes of patient's family members or designated representatives can be addressed informally through a social worker or formally through administration.

The medical staff will detail the benefits, significant risks and recognized alternatives of treatments and procedures prior to their performance. Expectations for recuperation and consequences of refusal will be discussed as well. The patient has the right to accept or refuse the treatment or procedure.

VI. CUSTOMER FEEDBACK

- A. All Fort HealthCare employees have the responsibility of handling complaints, compliments and contacts in a responsive and competent manner.
- B. The submission of a complaint, compliment, or contact by a patient, family member or significant other will not compromise any patient's present or future access to care, nor will it have a negative impact on the quality of care or service provided.
- C. The complaint, compliment or contact will be discussed only with appropriate members of the hospital staff and/or physicians. Confidentiality of information and sources will be maintained, per the wishes of the customer.
- D. All persons receiving service at Fort HealthCare facilities will be informed of their right to present a complaint, compliment or contact and how to do so.
- E. Each customer making a complaint, compliment or contact will receive a response when requested and feasible.

In the event this is unsatisfactory, the manager or designee of the department should be contacted. If the manager/designee is not available, the department director or administration are available at FAMHS facilities to assist you. After hours, shift coordinators are available to assist.

Complaints regarding care and/or discrimination will be handled with compassion and understanding by any employee of Fort HealthCare or the facility department manager and will not cause recrimination or denial to present or future access to care. Patients are provided information to access the complaint process during the registration/admission process, including the address where complaints may be filed. Patients with complaints regarding discrimination on the basis of a handicap should be referred to the VP of Patient Services. Unresolved complaints may be forwarded to the Department of Health and Human Services, Office of Civil Rights.

VII. PROTECTIVE SERVICES

Fort HealthCare supports the right of patients and families to live in a safe environment. Patients have the right to access protective services. Assistance is provided and referrals are made by FAMHS employees as per state law. Resource information can be provided on request.

FORT HEALTH CARE

PATIENT RIGHTS AND RESPONSIBILITIES POLICY

VIII. RESEARCH STUDIES INVOLVING MEDICAL INVESTIGATION

Any person who is requested to consent to participate as a subject in a research study involving a medical investigation, or who is requested to consent on behalf of another, has the right to:

- Be informed of the nature and purpose of the investigation.
- Be given an explanation of the procedure to be following in the medical investigation, and the name of any drug or device to be used.
- Be given an explanation of the potential benefits or anticipated outcomes the patient may possibly expect from participating in the research.
- Be given a description of any accompanying discomforts and risks reasonably to be expected from the investigation, if applicable.
- Be given a disclosure of any appropriate alternative procedure, drugs or devices that might be advantageous to the person, and their relative risks and benefits.
- Be informed of the avenues of medical treatment, if any, available to the subject after the investigation if complications should arise.
- Be given an opportunity to ask questions concerning the investigation or the procedure involved.
- Be instructed that a consent to participate in the medical investigation may be withdrawn at any time, and the person may discontinue participation in the medical investigation without prejudice.
- Be given a copy of a signed and dated written consent form when one is required.
- Be given the choice to consent or not to consent to a medical investigation without the intervention of any element of force, fraud, deceit, duress, coercion, or undue influence on the person's decision.

IX. TERMINALLY ILL PATIENTS

Pain management and grief counseling services are available for terminally ill patients and their families as part of the integrated health care plan through Nursing Services, Social Services and Pastoral Care.

X. VIOLATION OF RIGHTS

Suspected violations of patient rights will be investigated by the appropriate manager. Disciplinary action for employees or referral to the Medical Staff Executive Committee for Medical Staff/Allied Health staff may result.

XI. PATIENT RESPONSIBILITIES

Patients will be informed of their responsibilities including:

- Providing information about their health, including past illnesses, hospital stays, and use of medicine.
- Asking questions to clarify information or instructions when they do not understand the treatment course or care decision
- Providing information for insurance and working with Fort HealthCare and its affiliates to arrange payment, when needed.

FORT HEALTH CARE

PATIENT RIGHTS AND RESPONSIBILITIES POLICY

- Abiding by all Fort HealthCare rules and regulations including but not limited to complying with the “No Smoking” policy; treating staff, other patients and visitors with courtesy, and respecting other patients’ privacy.
- Providing Fort HealthCare with a copy of any Advance Directives (i.e. Living Will or Power of Attorney).

* “Designated Representative” Definition - Parent of an unemancipated minor, guardian, and when patient condition or choice invokes a durable power of attorney for health care surrogate decision-maker or in the absence, next of kin.