

PATIENT RIGHTS AND RESPONSIBILITIES

As a patient, you and your family are key members of your health care team.

You have the right to:

- Receive quality care within the range of services the hospital provides
- Receive care and have visitation privileges without being discriminated against because of age, race, color, national origin, language, religion, culture, disability, sex, gender identity or expression, sexual orientation, or ability to pay.
- Be informed of the hospital's policies about your rights and health care.
- Be treated with respect and dignity and be protected from abuse, neglect and harassment.
- Know the names and roles of hospital staff caring for you.
- Choose who can and cannot visit you, without regard to legal relationship, race, color, national origin, religion, sex, sexual orientation, gender identity or disability. You may withdraw or deny consent for visitation at any time.
- Have a family member, support person, or other individual be present with you for emotional support during the course of your stay, unless the individual's presence infringes on others' rights, safety, or is medically or therapeutically contraindicated.
- Be informed when the hospital restricts your visitation rights for your health or safety, or the health or safety of patients, employees, physicians or visitors.
- Have a family member, support person, or other individual involved in treatment decisions or make health care decisions for you, to the extent permitted by law.
- Have a family member, support person, or other individual of your choice and your own physician notified promptly of your admission to the hospital.
- Be informed about your health problems, treatment options, and likely outcomes so you can take part in developing, implementing and revising your plan of care and discharge planning. Discharge planning includes deciding about care options, choice of agencies or need to transfer to another facility.
- Have information about the outcome of your care, including unanticipated outcomes.
- Request, accept and/or refuse care, treatment or services as allowed by hospital policy and the law
- To ask for a change of provider or a second opinion
- Have information provided to you in a manner that meets your needs and is tailored to your age, preferred language, and ability to understand.
- Have access to an interpreter and/or translation services to help you understand medical and financial information.
- Have your pain assessed and managed.
- Have privacy and confidentiality when you are receiving care.
- Practice and seek advice about your cultural, spiritual and ethical beliefs, as long as this does not interfere with the well-being of others.
- Request spiritual services.
- Request a consult from the Ethics Committee to help you work through tough decisions about your care.
- Consent or refuse to take part in research studies as well as recordings, films or other images made for external use.
- Be free from seclusion or restraints unless medically necessary or needed to keep you or others safe.
- Have a safe environment, including zero tolerance for violence and the right to keep and use your clothes and personal items.
- Take part in decisions about restricting visitors, mail or phone calls.
- Receive protective oversight while a patient in the hospital, and receive a list of patient advocacy services (such as protective services, guardianship, etc.)
- Have an Advance Directive (health care directive, durable power of attorney for health care, or living will) that states your wishes and values for health care decisions when you cannot speak for yourself.
- Review your medical record and receive answers to questions you may have about it. You may request amendments to your record and may request information on who has reviewed your record. You may obtain copies of your record at a fair cost in a reasonable time frame.
- Receive a copy of and details about your bill.
- Receive compassionate care at the end of life.

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- Donate, request or refuse organ and tissue donations.
- Have your records kept confidential. They will only be shared with your caregivers and those who can legally see them.
- Ask about and be informed of business relationships among payers, hospitals, educational institutions, and other health care providers that may affect your care.
- Know St. Mary's Hospital grievance process, share a concern or grievance about your care either verbally or in writing, and receive a timely notice of the resolution. If you have a grievance or concern, the following options are available to you:
 - Talk with your doctor or nurse
 - Talk with the charge nurse, unit/department director, or nursing supervisor
 - Complete a Patient and Family Feedback Form. These forms are located in patient rooms and waiting areas. Members of the staff will assist you as needed
 - Call the Patient and Family Feedback Line at (608) 259-5588
 - Call the Switchboard by dialing "0" and ask to speak to the Administrator on Call
- You also have the right to present concerns to:

**Wisconsin Department of Health
& Family Services**

Division of Quality Assurance

P.O. Box 2969

Madison, WI 53701-2969

(608) 266-8481

http://www.dhs.wisconsin.gov/rl_dsl/bqa.htm

The Joint Commission

One Renaissance Blvd

Oakbrook Terrace, IL 60181

1-800-994-6610

MetaStar, Inc. (Quality Improvement Organization for Medicare Recipients)

2909 Landmark Place

Madison, WI 53713

(608) 274-1940

For more information about your Patient Rights and Responsibilities, please ask to speak with the Unit/Department Director or Nursing Supervisor.

PATIENT RESPONSIBILITIES:

You and your family have the responsibility to:

- Provide correct and complete information about yourself and your health, including present complaints, past health problems and hospital visits, medications you have taken and are taking (including prescriptions, over-the-counter and herbal medicines), and any other information you think your care givers need to know.
- Speak up and share your views about your care/service needs and expectations, including your pain management needs and any perceived risk or safety issues.
- Provide correct and complete information about your Advance Directive if you have one and provide a current copy.
- Follow your agreed-upon care plan and report any unexpected changes in your condition to your doctor.
- Ask questions when you do not understand your care, treatment, and services or what you are expected to do. Express any concerns about your ability to follow your proposed care plan or course of care, treatment, and services.
- Accept consequences for the outcomes if you do not follow the care, treatment, and service plan.
- Follow all hospital rules and regulations, including respecting property and helping control noise
- Consider leaving your personal belongings at home, have your family members take them home, or have them placed in Security until you are discharged.
- Respect the rights, property, privacy, dignity, and confidentiality of patients & others in the hospital
- Respect hospital staff without regard to age, race, color, national origin, language, religion, culture, disability, sex, gender identity or expression, or sexual orientation,
- Keep our environment tobacco-free. You may not use any tobacco products while inside the hospital or while outside on hospital property.
- Keep a safe environment free of drugs, alcohol, weapons, and violence of any kind, including verbal intimidation.
- Provide correct and complete information about your financial situation as best you can and promptly meet any financial obligations agreed to with the hospital.