



### WE RESPECT YOUR RIGHT TO:

#### High Quality Care

- Receive care with dignity, respect and appreciation of the beliefs and values of each patient. Care is provided without regard to: age, race, ethnicity, religion and other spiritual services, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression.
- Know the names of your caregivers and who has overall responsibility for your care.
- Be informed about your illness, the care you will receive including course of treatment and your prognosis for recovery in words you understand.
- Have your pain evaluated and managed.
- Know when something goes wrong with your care.
- Be given a list of all your current medicines.
- Be in a clean, safe environment.
- Receive safe care by staff trained in safe practices in a safe setting.
- Privacy in treatment.
- Be free of all forms of physical or mental abuse including harassment.
- Be free from restraint or seclusion unless you could harm yourself or others.
- Participate in end-of-life decisions.

#### Involvement in Your Care

- Get information in a way that you best understand.
- Get information about your care in your preferred language.
- Get information in a way that will meet your needs if you have vision, speech, hearing or mental impairments.
- Make decisions about your care including the development and implementation of your plan of care.
- Formulate an advance directive with staff and providers who will honor the directive.
- Except in the case of emergencies, you (or your legally authorized representative) will be asked to consent before treatment or participation in research.
- Refuse care to the extent permitted by law, and be informed of the medical consequences of refusal.
- Express your thoughts and be heard.
- Identify family members, representatives of your choice and a physician to be notified of your medical care.
- Have a support person, also called an advocate, with you during your stay. Your support person may be a family member or friend of your choice to provide emotional support.

#### Protection of Your Privacy

- Decide who may or may not visit you.
- Understand that we store and protect your medical records. These records are kept private. You must make a written request for us to share your records with others.
- Review your records and have them explained in words you understand. You may have a copy of your record. A fee for copies may apply.
- Request a copy of the Notice of Privacy Practices at 715-284-5361.

#### Help When Leaving the Hospital or Clinic

- Understand what medicine to take, why it is needed and when to take it.
- Receive help in arranging for follow-up care.
- Except in emergencies, receive a full explanation of any transfer and continuing care plan including transfers to and acceptance by the receiving facility.
- Understand options of skilled care in the home or alternative care, such as a nursing home or assisted living facility.

#### Help with Your Bill

- Ask for an explanation of your charges.
- Understand the cost of your care.



- Request financial assistance or advice for places to apply for help. Black River Health Patient Financial Advocates can assist patients with billing information and concerns. To set up an appointment or to obtain more information, please call 715-284-1368 or 715-284-3691.

## **YOUR RESPONSIBILITIES AS A PATIENT:**

- Become involved in your own care in an open respectful partnership.
- Give your provider a complete and accurate medical history.
- Comply with the organization's rules.
- Be respectful of other patients, staff and property.
- Provide required information concerning payment of charges.

## PATIENT CONCERNS AND COMPLAINTS

To ensure all patients receive the best care possible, our patients and/or their family have the right to make a complaint. All complaints will be acknowledged, reviewed and followed up on without fear of discrimination, reprisal, or unreasonable interruption of care.

When patients have an immediate problem or concern, they may:

- Notify any staff member of a grievance or complaint.
- Ask to speak to a department leader.
- Ask to speak with the Vice President of Patient Care Services.
- Billing complaints should be referred to a Patient Financial Advocate

In addition, patients and/or their family may express their complaints to any of the following licensing agencies.

If you have a quality of care concern regarding:	Who to Contact
<ul style="list-style-type: none"> <li>Any department of the hospital</li> <li>Krohn Clinic Surgery, Nursing, Treatment Area, Imaging, Podiatry</li> </ul>	<b>The Joint Commission</b> (1-800-994-6610)
<ul style="list-style-type: none"> <li>Behavioral Health at Krohn Clinic or Black River Healthcare Clinic</li> </ul>	<b>The Compliance Team, Inc. (888-291-5353) or</b> <b>The Division of Quality Assurance Wisconsin (800-642-6552)</b> (Leave a voicemail message and your call will be returned by the next working day)
<ul style="list-style-type: none"> <li>Family Practice at Krohn Clinic or Black River Healthcare Clinic</li> <li>Krohn Clinic Lab</li> </ul>	<b>The Compliance Team, Inc. (888-291-5353)</b>

### Additional Contacts:

Black River Health recognizes and respects patient rights, as it has shown to encourage patients to become more informed and involved in their own care. Empowered patients ask questions and develop better relationships with their caregivers. Acknowledgment of patient rights also helps patients feel supported by the people directly involved in their care, treatment and services.