Patient Handbook

OUR BEST FOR YOU

CentraCare
St. Cloud Hospital
The care and service we provide to our patients requires that all CentraCare employees bring the very best of themselves to each interaction, each connection. Behind every caregiver a patient or family member encounters, there are many more dedicated employees. Each of us is charged with doing our part to make sure the care you receive is the best it can be. Our Best for You is our promise to you.

We will strive to surpass your service expectations by:

• Taking ownership of your requests and seeing them through until met.
• Acknowledging call lights and phone calls promptly.
• Escorting visitors in search of their destinations.

We hope you will notice our attention to excellent patient centered care. If this handbook does not answer your questions, please ask an employee to help you, or call my assistant at ext. 55661. We always have time to assist you.

Following your visit, you may receive a patient survey in the mail. Your feedback is appreciated. Thank you for choosing us!

Sincerely,

Craig Broman, MHA, FACHE President

This handbook also is available in Spanish and Somali. Please ask your nurse for a copy.

Por favor pregunte a su enfermera sobre nuestro Manual de Paciente en Español.

Buuga gacan qabsiga isaga oo af Soomaali ah ayaad heli kartaa. Fadlan koobi weydiiso kalkaalisada/kalkaaliyaha caafimaadka.
Mission
As a Catholic regional hospital, we improve the health and quality of life for the people we serve in a manner that reflects the healing mission of Jesus.

St. Cloud Hospital
St. Cloud Hospital has a rich tradition of caring for the people of Central Minnesota. Since being founded by the Sisters of the Order of St. Benedict in 1886, we have grown from a small, community hospital to a comprehensive, high-quality regional medical center.

As the largest health care facility in the region, St. Cloud Hospital offers a full spectrum of inpatient and outpatient services. From state-of-the-art care for heart disease and cancer to preventive health screenings and behavioral health counseling, we have the technology and skilled professionals to meet the needs of the region.

Currently, the hospital has nearly 5,000 employees and a medical staff of 470 physicians.

CentraCare Health
CentraCare Health is a not-for-profit health care system that provides comprehensive, high-quality care to people throughout Central Minnesota. Our collaborative network includes hospitals in St. Cloud, Long Prairie, Melrose, Monticello, Paynesville and Sauk Centre; six nursing homes; senior housing in six communities; and 19 clinics.

CentraCare also operates numerous specialty services including the CentraCare Heart & Vascular Center, Coborn Cancer Center and CentraCare Neurosciences. CentraCare serves all who seek care with compassion, dignity and respect, while enhancing individual and community health.

CentraCare Health Foundation
A caring spirit is what makes us human. CentraCare Health Foundation accepts tax-deductible, charitable gifts for all CentraCare entities, including St. Cloud Hospital. Consider making a gift to the Foundation in honor or memory of loved ones, or in honor of doctors or staff who provided outstanding care. To make a gift, of any amount, contact the CentraCare Health Foundation by calling 320-240-2810. Or give online at centracare.com.
WiFi Internet Access
WiFi is available throughout the hospital.

Radio and Television
We provide radio and television in patient rooms at no additional charge. Closed-captioning is available for hearing-impaired patients by pushing the caption button on the lower, right front of the television. If you have any questions or difficulties with your television, please contact your nurse.

In-House Television Channel Directory

| 3 | CBS - WCCO |
| 4 | NBC - KARE |
| 5 | CW - WUCW |
| 6 | ABC - KSTP |
| 7 | FOX - KMSW |
| 8 | PBS - KTCP |
| 9 | MyTV - WFTC |
| 10 | WUMN - UNV |
| 11 | Weather Channel |
| 12 | WGN America |
| 13 | ESPN |
| 14 | ESPN2 |
| 15 | FS North |
| 16 | BTN |
| 17 | Fox Sports 1 |
| 18 | Golf Channel |
| 19 | MLB Network |
| 20 | NBC Sports Network |
| 21 | Fox News Channel |
| 22 | CNN |
| 23 | HLN |
| 24 | FS Plus |
| 25 | CNBC |
| 26 | MSNBC |
| 27 | TNT |
| 28 | TBS |
| 29 | FX |
| 30 | USA |
| 31 | A&E |
| 32 | AMC |
| 33 | Bravo |
| 34 | Oxygen |
| 35 | TLC |
| 36 | Spike |
| 37 | SyFy |
| 38 | Food Network |
| 39 | History |
| 40 | Lifetime |
| 41 | Hallmark Channel |
| 42 | HGTV |
| 43 | GSN |
| 44 | Turner Classic Movies |
| 45 | TV Land |
| 46 | Freeform |
| 47 | Travel Channel |
| 48 | truTV |
| 49 | Comedy Central |
| 50 | E! |
| 51 | Disney Channel |
| 52 | Nickelodeon |
| 53 | Cartoon Network |
| 54 | Animal Planet |
| 55 | Discovery Channel |
| 56 | National Geographic |
| 57 | EWTN |
| 58 | VH1 |
| 59 | CMT |
| 60 | BET |
| 61 | Investigation Discovery |
| 62 | Saint Cloud State Athletics |
| 63 | Patient Information & Spiritual Care |
| 65 | Patient Information & Spiritual Care |
| 67 | EWTN |
| 68 | Saint Cloud State Athletics |
| 69 | Patient Information & Spiritual Care |
| 70 | Patient Information & Spiritual Care |

Telephones and Cell Phones
To make an outside local call from the bedside phone, please dial “9” plus the number. To make a call within the hospital, dial the five-digit extension or contact the switchboard by dialing “0.”

We ask that visitors and family members of patients please remember that quiet promotes healing. Please use discretion when using your cell phone. Avoid sharing cell phones to help stop the spread of infections.

Comments
We want your visit to be as pleasant as possible. If you have complaints, comments or suggestions, please call our Quality Resources department at 320-255-5651.
Dining Facilities for Guests

Riverfront Dining Room (Located on Floor A) is a full-service cafeteria open 6:30 a.m. to 2 a.m. seven days per week.

6th Avenue Bistro (Located on Floor 1) has a coffee shop atmosphere and is open 6:30 a.m. to 4 p.m. Monday – Friday.

South Bistro (Located on Floor 1) near the surgery waiting area atrium, offers both cold and hot menu items and is open 6:30 a.m. to 4 p.m. Monday – Friday.

Spiritual Care Services

Hospital chaplains are available to serve the spiritual care needs of patients and visitors of all religious traditions. If you would like a chaplain to visit, or if you would like to receive any of the sacraments or rites of your particular faith tradition, please contact your nurse or call ext. 54621.

Volunteers

Volunteers serve patients at St. Cloud Hospital in many ways. They are available to help with reading, writing letters, shopping at the Gift Gallery and many other tasks. A volunteer may visit you to make sure your stay is comfortable. To contact Volunteer Services, please call ext. 55638.

Financial Arrangements

If you have questions about making financial arrangements or about bills received after your hospital stay, please call the Business Office at 320-255-5622.

Gift Gallery

In need of flowers, balloons or other gifts to uplift and inspire? Find something for all ages at the Gift Gallery located near the North lobby. It is open from 8 a.m. to 7 p.m. Monday – Friday, and 10 a.m. to 5 p.m. Saturday and Sunday. The Gift Gallery provides free delivery within the hospital. You also may purchase selected gifts online at centracare.com. The St. Cloud Hospital Volunteer Auxiliary uses Gift Gallery proceeds to provide for charitable and educational hospital projects.
Your Stay

Gorecki Guest House
Conveniently located across the street from St. Cloud Hospital, the Gorecki Guest House welcomes family members of patients who are receiving medical care in the St. Cloud community. The house offers a comfortable, homelike atmosphere that allows families the opportunity to stay close to their loved ones.

This beautiful home is maintained by a caring group of St. Cloud Hospital volunteers and staff, who are available to assist guests with their stay. To check availability, talk to your nurse or social worker, or call ext. 51774.

Cheer Cards
Visit centracare.com for information on sending e-greetings, get-well wishes or a gift from the Gift Gallery to a hospital patient.

Sign-up for MyChart
MyChart is a secure, online tool that connects clinic patients electronically to portions of their medical record allowing them to:

• Review past appointments
• Request an appointment
• View their health summary, current list of medications and test results as released by their provider
• Access information on a broad range of health-related topics
• View their or their child’s immunizations and medication allergies
• Receive e-mail messages when a new result is released to MyChart

To access MyChart, you will need computer access, an e-mail account and an Internet connection. Access to health information in MyChart is secured by a personalized ID and password, known only to the user. To register for MyChart access, visit centracare.com.

My Healthy News
Sign up today for MyHealthyNews, a free, monthly e-newsletter from CentraCare Health at centracare.com/newsletter. You choose the topics and services that matter to you. Then we send up-to-date health-related information that is personalized to your needs and interests.
CentraCare Pharmacy
at St. Cloud Hospital
Open to the public, pharmacy hours are:
  9 a.m. to 5:30 p.m. Monday – Friday
  9 a.m. to 3:00 p.m. Saturday
  Closed Sunday

For your convenience, we accept walk-ins and drive-through window business. We carry many over-the-counter products and accept most insurance plans. The pharmacy is located outside the hospital across from the Woods entrance. Call 320-255-5670 or ext. 53842 for more information. Online prescription refill is available.

Medication Safety and Storage
Prescription medication abuse is a serious problem in the United States. More than half of people age 12 and older who abuse prescription medications get them or steal them from friends or family. Strangers who abuse or illegally sell prescription drugs may target you or your home to get these medications. You play a big role in keeping these medications out of the hands of people who should not have them. Keep medications safe, keep them secure, and then get rid of them when you no longer need them.

Keep them safe:
• It is dangerous and illegal for anyone but you to use your medications
• Keep your medications in a safe and secure place so that a child, a teenager, or even a stranger, does not get into them

Keep them secure:
• Medications that are controlled substances — painkillers, anxiety medications and stimulants — should be kept in a locked cabinet, safe or container

Then get rid of them:
• Follow disposal instructions on the prescription drug labeling. Do not flush medicine down the sink or toilet unless instructed to do so
• Take advantage of community medication take-back or disposal programs: call your county sheriff’s department or local police department to find one near you

Pharmaceutical Medication Drop Box
The goal of the medication drop box program is to keep unused/unwanted medications out of our water supply as well as out of the hands of individuals who might abuse them. To find a medication drop box near you visit centracare.com/services/pharmacy/.
Visitors During Your Stay
We believe families and support persons are an important part of your care. Our goal is to meet the needs of you and your family by providing flexible, open visiting hours. We invite you to have visitors, whom you designate, 24 hours a day, 7 days a week. To provide the best patient care, sometimes it is necessary to limit visitors, such as:
• When you are undergoing care interventions or procedures
• When there may be infection control issues
• When visitors may interfere with the care of other patients

St. Cloud Hospital does not discriminate against visitors based on race, color, national origin, religion, sex, gender identity, sexual orientation or disability. To have a healthy balance of mind, body and spirit, you are welcome to have the presence of family and friends. You have a right to choose who may or may not visit you during hospitalization.

We encourage you to discuss your preferences for visitation with your nurse and care team. If you have questions about visiting, please contact your nurse.

Speak Up for Your Safety
Health care safety is a priority. We urge you to speak up! To prevent health care errors, everyone has a role in making health care safe — doctors, health care executives, nurses and technicians. You, as the patient, play a vital role in making your care safe by becoming an active, involved and informed member of your health care team. The “speak up” initiative provides simple advice on how you, as the patient, can make your care a positive experience. After all, research shows that patients who take part in decisions about their health care are more likely to have better outcomes.

Speak up if you have questions or concerns, and if you don’t understand, ask again. It’s your body and you have a right to know.
Pay attention to the care you are receiving. Make sure you’re getting the right treatments and medications by the right health care professionals. Don’t assume anything.
Educate yourself about your diagnosis, the medical tests you are undergoing and your treatment plan.
Ask a trusted family member or friend to be your advocate.
Know what medications you take and why you take them. If you think we’ve made an error, please notify your nurse immediately. Medication errors are the most common health care mistakes.
Use a hospital, clinic, surgery center or other type of health care organization that has undergone a rigorous on-site evaluation such as that provided by The Joint Commission.
Participate in all decisions about your treatment. You are the center of the health care team.
Interpretation Services
Free American Sign Language (ASL) interpreters, Text Telephone (TTYs) and other communication devices are available at St. Cloud Hospital to deaf and hard-of-hearing patients and their families when necessary for effective communication.

Health Care Directives
It is your right to have a Health Care Directive, a written document that informs others of your wishes about your health care. This document can assist your health care providers if you should become unable to make health care decisions for yourself. Please ask your nurse if you have questions or would like more information about Health Care Directives. To access a Health Care Directive form, visit www.centracare.com/services/home-care/.

Acute Response Team
If you are worried and have immediate concerns about the current condition of your loved one, you may activate our Acute Response Team (ART) or Children’s Acute Response Team (CART). A critical care nurse and respiratory care practitioner will arrive at the bedside to complete an assessment and recommend further actions. Talk to your loved one’s nurse to activate ART or if you have other concerns.

Safe Patient Handling
CentraCare Health makes patient and employee safety our top priority. During your stay, you may not be able to move as you did when you were feeling better. Our staff is here to help you with repositioning and moving until you feel stronger. Minnesota law requires that we move you in a manner that is safe for both you and our staff members. Your caregivers will help keep you safe by using safe patient handling equipment if you cannot fully move yourself. We may use several forms of equipment from slider sheets to mechanical lifts.

No matter your age or size, the lifts may be used to help move you up in bed, turn you, or assist you to sit in a chair. These devices are used to provide a safe and comfortable transfer for you, as well as protect our staff from injury. Talk with a member of your health care team if you or your family members have questions or concerns regarding any equipment we use.

Patient and Family Partner Program
You can help improve health care in our communities. If you or a loved one recently were hospitalized or seen by a CentraCare Health provider, please consider joining the Patient and Family Partners Program. Patient and Family Partners serve voluntarily and give valuable feedback and ideas on improving the patient experience. Partners may get involved by:

- Sharing their CentraCare Health experience at a meeting or event
- Participating on an improvement project
- Serving on a hospital or clinic committee
- Participating on a Patient and Family Advisory Council

Please call 320-255-5638 with any questions you have about the Patient and Family Partner Program.
CentraCare Health Home Care

Home Care is available to patients of any age who have health care needs at home after discharge. Services are provided by highly trained nurses, therapists, social workers and aides. Home care provides assessment, disease management, pediatric care, wound care, personal care, infusion therapy, home exercise, home telemonitoring, palliative care and more. To learn more about these services, contact a case manager or social worker, or call 320-259-9375.

CentraCare Health Hospice

When patients have a terminal illness, hospice provides special care to them and their families in their homes. We provide comfort and dignity and respect human life from beginning to end. We use a team approach to assist individuals with symptom control and offer spiritual and emotional support so they can concentrate on living life as fully as possible. For more information, contact a case coordinator or social worker, or call 320-259-9375.

Palliative Care

Do you or a loved one have a serious illness and need relief from its symptoms, pain and stress?
Palliative care is specialized medical care for people with serious and life-limiting illnesses. The goal is to improve quality of life for both you and your family. Palliative care is appropriate at any age and at any stage in a serious illness, and it can be provided together with curative care. It offers:
- Spiritual, emotional and physical support
- Management of pain and symptoms
- Guidance with complex medical decisions
- Help in navigating the health care system

For more information about our inpatient services or to make an appointment at our outpatient clinic, call 320-656-7117 for adults and 320-229-4935 for children. For care within your home, call 320-259-9375.

Care Management

Care management offers patients and families assistance with coordinating care, accessing resources and taking an active role in achieving health care goals. Care management supports communication and collaboration between patients, nurses, social workers, physicians, other practitioners, caregivers and community resources. Our RN case managers and social workers are here to help coordinate your hospital care and ensure a smooth transition out of the hospital. If you are interested in learning more about our care management services, please speak with your nurse.
Home Delivered Meals
We provide well-balanced meals to anyone 60 years of age or older or to the homebound, handicapped and those recently discharged from the hospital or nursing home within St. Cloud, Sartell, Sauk Rapids or Waite Park city limits. This program serves as a daily check-in that also allows people to stay in their home longer. For more information, call 320-255-5646.

CentraCare Health Medical Alert Service
Independence, health and safety are important priorities for people of all ages. Whether you are worried about your own — or a loved one’s health or safety — CentraCare Health Medical Alert Service can provide peace of mind and comfort knowing that help is available at the press of a button.

CentraCare Health Medical Alert Service offers in-home and mobile Personal Emergency Response Systems, Fall Detector Buttons and medication dispensers (monitored and non-monitored). To learn more, call 320-255-5700.

St. Benedict’s Senior Community
The spectrum of health care and housing options at St. Benedict’s Senior Community includes long-term care, short stay care, respite care, memory care, hospice, assisted living and retirement apartments.

The Short Stay Care Program at St. Benedict’s Senior Community offers comprehensive health services for patients who no longer require the acute care provided in hospitals, but still need therapy, nursing care or other services. The program offers many unique features and services that are unmatched in the Central Minnesota area, including a team of physicians and heart failure certified nurses. Because many of the short stay patients need intense levels of physical therapy, therapy is available 7 days a week based on your personal care plan.

Call 320-252-0010 for the St. Cloud Campus or 763-295-4051 for Monticello or 320-654-2352 for Sartell.

Senior Living – CentraCare Health
The design of our campuses is a unique blend of home and community, keeping your desires and enjoyment in mind. The living options include:

- Retirement apartments
- Memory care housing
- Assisted living apartments
- Income-based apartments
- Nursing home (long-term care)
As a patient, you are responsible for:

- **Providing information.** The patient is responsible for providing, to the best of his or her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other matters relating to his or her health. The patient and family are responsible for reporting unexpected changes in the patient’s condition. The patient and family help the hospital improve its understanding of the patient’s environment by providing feedback about service needs and expectations.

- **Asking questions.** Patients are responsible for asking questions when they do not understand what they have been told about their care or what they are expected to do.

- **Following instructions.** The patient and family are responsible for following the care, service or treatment plan developed. They should express any concerns they have about their ability to follow and comply with the proposed care plan or course of treatment. Every effort is made to adapt the plan to the patient’s specific needs and limitations. When such adaptations to the treatment plan are not recommended, the patient and family are responsible for understanding the consequences of the treatment alternatives and not following the proposed course.

- **Accepting consequences.** The patient and family are responsible for the outcomes if they do not follow the care, service or treatment plan.

- **Following rules and regulations.** Patients are responsible for following the hospital’s rules and regulations concerning patient care and conduct. They are responsible for being considerate of other patients, helping control noise and disturbances, following smoking policies and respecting others’ property.

- **Showing respect and consideration.** Patients and families are responsible for being considerate of the hospital’s personnel and property. This includes refraining from harsh language and physical violence.

- **Meeting financial commitments.** The patient and family are responsible for promptly meeting any financial obligation agreed to with the hospital.

Patients are educated about their responsibilities during the admission, registration or intake process and as needed thereafter.

The patient’s family or surrogate decision-maker assumes the above responsibility for the patient if the patient has been found by his or her doctor to be incapable of understanding these responsibilities, has been judged incompetent in accordance with law or exhibits a communication barrier.

The hospital informs each patient of his or her responsibilities verbally, in writing or both, based on hospital policy.
The hospital prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression.

2015 Minnesota Statute 144.651 Health Care Bill of Rights

**Legislative Intent (Subd. 1):** It is the intent of the legislature and the purpose of this section to promote the interests and well-being of the patients of health care facilities. No health care facility may require a patient to waive these rights as a condition of admission to the facility. Any guardian or conservator of a patient, or in the absence of a guardian or conservator, an interested person, may seek enforcement of these rights on behalf of a patient. An interested person may also seek enforcement of these rights on behalf of a patient who has a guardian or conservator through administrative agencies or in district court having jurisdiction over guardianships and conservatorships. Pending the outcome of an enforcement proceeding the health care facility may, in good faith, comply with the instructions of a guardian or conservator. It is the intent of this section that every patient’s civic and religious liberties, including the right to independent personal decisions and knowledge of available choices, shall not be infringed and that the facility shall encourage and assist in the fullest possible exercise of these rights.

**Definitions (Subd. 2):** For the purposes of this section, “patient” means a person who is admitted to an acute care inpatient facility for a continuous period longer than 24 hours for the purpose of diagnosis or treatment bearing on the physical or mental health of that person. “Patient” also means a minor who is admitted to a residential program as defined in Section 253C.01. For purposes of subdivisions 1, 3 to 16, 18, 20 and 30 “patient” also means any person who is receiving mental health treatment on an outpatient basis or in a community support program or other community-based program.

**Public policy declaration (Subd. 3):** It is declared to be the public policy of this state that the interests of each patient be protected by a declaration of a patient’s bill of rights, which shall include, but not be limited to, the rights specified in this section.

**Information about rights (Subd. 4):** Patients shall, at admission, be told that there are legal rights for their protection during their stay at the facility or throughout their course of treatment and maintenance in the community and that these are described in an accompanying written statement of the applicable rights and responsibilities set forth in this section. In the case of patients admitted to residential programs as defined in Section 253C.01, the written statement shall also describe the right of a person 16 years old or older to request release as provided in Section 253B.04, Subdivision 2, and shall list the names and telephone numbers of individuals and organizations that provide advocacy and legal services for patients in residential programs. Reasonable accommodations shall be made for people who have communication disabilities and those who speak a language.
other than English. Current facility policies, inspection findings of state and local health authorities, and further explanation of the written statement of rights shall be available to patients, their guardians or their chosen representatives upon reasonable request to the administrator or other designated staff person consistent with Chapter 13, the Data Practices Act, and Section 626.557, relating to vulnerable adults.

Courteous treatment (Subd. 5): Patients have the right to be treated with courtesy and respect for their individuality by employees of or persons providing service in a health care facility.

Appropriate health care (Subd. 6): Patients shall have the right to appropriate medical and personal care based on individual needs. This right is limited where the service is not reimbursable by public or private resources.

Physician’s identity (Subd. 7): Patients shall have or be given, in writing, the name, business address, telephone number, and specialty, if any, of the physician responsible for coordination of their care. In cases where it is medically inadvisable, as documented by the attending physician in a patient’s care record, the information shall be given to the patient’s guardian or other person designated by the patient as a representative.

Relationship with other health services (Subd. 8): Patients who receive services from an outside provider are entitled, upon request, to be told the identity of the provider. Information shall include the name of the outside provider, the address, and a description of the service which may be rendered. In cases where it is medically inadvisable, as documented by the attending physician in a patient’s care record, the information shall be given to the patient’s guardian or other person designated by the patient as a representative.

Information about treatment (Subd. 9): Patients shall be given, by their physicians, complete and current information concerning their diagnosis, treatment, alternatives, risks and prognosis as required by the physician’s legal duty to disclose. This information shall be in terms and language the patients can reasonably be expected to understand. Patients may be accompanied by a family member or other chosen representative, or both. This information shall include the likely medical or major psychological results of the treatment and its alternatives. In cases where it is medically inadvisable, as documented by the attending physician in a patient’s medical record, the information shall be given to the patient’s guardian or other person designated by the patient as a representative. Individuals have the right to refuse this information. Every patient suffering from any form of breast cancer shall be fully informed, prior to or at the time of admission and during her stay, of all alternative effective methods of treatment of which the treating physician is knowledgeable, including surgical, radiological or chemotherapeutic treatments or combinations of treatments and the risks associated with each of those methods.

Participation in planning treatment; notification of family members (Subd. 10):

(a) Patients shall have the right to participate in the planning of their health care. This right includes the opportunity to discuss treatment and alternatives with individual caregivers,
the opportunity to request and participate in formal care conferences, and the right to include a family member or other chosen representative, or both. In the event that the patient cannot be present, a family member or other representative chosen by the patient may be included in such conferences. A chosen representative may include a doula of the patient’s choice.

(b) If a patient who enters a facility is unconscious or comatose or is unable to communicate, the facility shall make reasonable efforts as required under paragraph (c) to notify either a family member or a person designated in writing by the patient as the person to contact in an emergency that the patient has been admitted to the facility. The facility shall allow the family member to participate in treatment planning, unless the facility knows or has reason to believe the patient has an effective advance directive to the contrary or knows the patient has specified in writing that they do not want a family member included in treatment planning. After notifying a family member but prior to allowing a family member to participate in treatment planning, the facility must make reasonable efforts, consistent with reasonable medical practice, to determine if the patient has executed an advance directive relative to the patient’s health care decisions.

For purposes of this paragraph, “reasonable efforts” include:

1. examining the personal effects of the patient;
2. examining the medical records of the patient in the possession of the facility;
3. inquiring of any emergency contact or family member contacted under this section whether the patient has executed an advance directive and whether the patient has a physician to whom the patient normally goes for care; and
4. inquiring of the physician to whom the patient normally goes for care, if known, whether the patient has executed an advance directive. If a facility notifies a family member or designated emergency contact or allows a family member to participate in treatment planning in accordance with this paragraph, the facility is not liable to the patient for damages on the grounds that the notification of the family member or emergency contact or the participation of the family member was improper or violated the patient’s privacy rights.

(c) In making reasonable efforts to notify a family member or designated emergency contact, the facility shall attempt to identify family members or a designated emergency contact by examining the personal effects of the patient and the medical records of the patient in the possession of the facility. If the facility is unable to notify a family member or designated emergency contact within 24 hours after the admission, the facility shall notify the county social service agency or local law enforcement agency that the patient has been admitted and the facility has been unable to notify a family member or designated emergency contact. The county social service agency and local law enforcement agency shall assist the facility in identifying and notifying a family member or designated emergency contact. A county social service agency or local law enforcement agency that assists a facility in implementing this subdivision is not liable to the patient for damages on the grounds that the notification of the family member or emergency contact or the participation of the family member was improper or violated the patient’s privacy rights.

Continuity of care (Subd. 11): Patients shall have the right to be cared for with reasonable regularity and continuity of staff assignment as far as facility policy allows.
Patient’s Bill of Rights (cont.)

Right to refuse care (Subd. 12): Competent patients shall have the right to refuse treatment based on the information required in subdivision 9. In cases where a patient is incapable of understanding the circumstances but has not been adjudicated incompetent, or when legal requirements limit the right to refuse treatment, the condition and circumstances shall be fully documented by the attending physician in the patient’s medical record.

Experimental research (Subd. 13): Written, informed consent must be obtained prior to patient’s participation in experimental research. Patients have the right to refuse participation. Both consent and refusal shall be documented in the individual care record.

Freedom from maltreatment (Subd. 14): Patients shall be free from maltreatment as defined in the Vulnerable Adults Protection Act. “Maltreatment” means conduct described in Section 626.5572, Subdivision 15, or the intentional and nontherapeutic infliction of physical pain or injury, or any persistent course of conduct intended to produce mental or emotional distress. Every patient also shall be free from nontherapeutic chemical and physical restraints, except in fully documented emergencies, or as authorized in writing after examination by a patient’s physician for a specified and limited period of time, and only when necessary to protect the patient from self-injury or injury to others.

Treatment privacy (Subd. 15): Patients shall have the right to respectfulness and privacy as it relates to their medical and personal care program. Case discussion, consultation, examination and treatment are confidential and shall be conducted discreetly. Privacy shall be respected during toileting, bathing and other activities of personal hygiene, except as needed for patient safety or assistance.

Confidentiality of records (Subd. 16): Patients shall be assured confidential treatment of their personal and medical records, and may approve or refuse their release to any individual outside the facility. Copies of records and written information from the records shall be made available in accordance with this subdivision and Section 144.291 to 144.298. This right does not apply to complaint investigations and inspections by the Department of Health, where required by third party payment contracts or where otherwise provided by law.

Disclosure of services available (Subd. 17): Patients shall be informed, prior to or at the time of admission and during their stay, of services which are included in the facilities basic per diem or daily room rate and that other services are available at additional charges. Facilities shall make every effort to assist patients in obtaining information regarding whether the Medicare or medical assistance program will pay for any or all of the aforementioned services.
Responsive service (Subd. 18): Patients shall have the right to a prompt and reasonable response to their questions and requests.

Personal privacy (Subd. 19): Patients shall have the right to every consideration of their privacy, individuality and cultural identity as related to their social, religious, and psychological well-being.

Grievances (Subd. 20): Patients shall be encouraged and assisted, throughout their stay in a facility or their course of treatment, to understand and exercise their rights as patients and citizens. Patients may voice grievances and recommend changes in policies and services to facility staff and others of their choice, free from restraint, interference, coercion, discrimination or reprisal, including threat of discharge. Notice of the grievance procedure of the facility or program, as well as addresses and telephone numbers of the Office of Health Facility Complaints and the area nursing home ombudsman pursuant to the Older Americans Act, Section 307(a)(12) shall be posted in a conspicuous place.

Every acute care inpatient facility, every residential program as defined in Section 253C.01, and every facility employing more than two people that provides outpatient mental health services shall have a written internal grievance procedure that, at a minimum, sets forth the process to be followed; specifies time limits, including time limits for facility response; provides for the patient to have the assistance of an advocate; requires a written response to written grievances; and provides for a timely decision by an impartial decision-maker if the grievance is not otherwise resolved. Compliance by hospitals, residential programs as defined in Section 253C.01 which are hospital-based primary treatment programs and outpatient surgery centers with Section 144.691 and compliance by health maintenance organizations with Section 62D.11 is deemed to be in compliance with the requirement for a written internal grievance procedure.

Communication privacy (Subd. 21): Patients may associate and communicate privately with persons of their choice and enter and, except as provided by the Minnesota Commitment Act, leave the facility as they choose. Patients shall have access, at their expense, to writing instruments, stationery and postage. Personal mail shall be sent without interference and received unopened unless medically or programmatically contraindicated and documented by the physician in the medical record. There shall be access to a telephone where patients can make and receive calls as well as speak privately. Facilities which are unable to provide a private area shall make reasonable arrangements to accommodate the privacy of patients’ calls. Upon admission to a facility, where federal law prohibits unauthorized disclosure of patient identifying information to callers and visitors, the patient or the legal guardian or conservator of the patient shall be given the opportunity to authorize disclosure of the patient’s presence in the facility to callers and visitors who may seek to communicate with the patient. To the extent possible, the legal guardian or conservator of a patient shall consider the opinions of the patient regarding the disclosure of the patient’s presence in the facility. This right is limited where medically inadvisable, as documented by the attending physician in a patient’s care record. Where programmatically limited by a facility abuse prevention plan pursuant to Section 626.557, subdivision 14, paragraph (b), this right shall also be limited accordingly.
Personal property (Subd. 22): Patients may retain and use their personal clothing and possessions as space permits, unless to do so would infringe upon rights of other patients, and unless medically or programmatically contraindicated for documented medical, safety or programmatic reasons. The facility may, but is not required to, provide compensation for or replacement of lost or stolen items.

Services for the facility (Subd. 23): Patients shall not perform labor or services for the facility unless those activities are included for therapeutic purposes and appropriately goal-related in their individual medical record.

Right to associate (Subd. 26):
(a) Upon admission to a facility where federal law prohibits unauthorized disclosure of patient identifying information to callers and visitors, the patient or the legal guardian or conservator of the patient shall be given the opportunity to authorize disclosure of the patient’s presence in the facility to callers and visitors who may seek to communicate with the patient. To the extent possible, the legal guardian or conservator of a patient shall consider the opinions of the patient regarding the disclosure of the patient’s presence in the facility.
(b) Upon admission to a facility, the patient or the legal guardian or conservator of the patient must be given the opportunity to designate a person who is not related who will have the status of the patient’s next of kin with respect to visitation and making a health care decision. A designation must be included in the patient’s health record. With respect to making a health care decision, a health care directive or appointment of a health care agent under Chapter 145c prevails over a designation made under this paragraph. The unrelated person also may be identified as such by the patient or by the patient’s family.

Protection and advocacy services (Subd. 30): Patients shall have the right of reasonable access at reasonable times to any available rights protection services and advocacy services so that the patient may receive assistance in understanding, exercising, and protecting the rights described in this section and in other law. This right shall include the opportunity for private communication between the patient and a representative of the rights protection service or advocacy service.

Isolation and restraints (Subd. 31): A minor patient who has been admitted to a residential program as defined in Section 253C.01 has the right to be free from physical restraint and isolation except in emergency situations involving a likelihood that the patient will physically harm the patient’s self or others. These procedures may not be used for disciplinary purposes, to enforce program rules, or for the convenience of staff. Isolation or restraint may be used only upon the prior authorization of a physician, psychiatrist, or licensed psychologist, only when less restrictive measures are ineffective or not feasible and only for the shortest time necessary.
Treatment plan (Subd. 32): A minor patient who has been admitted to a residential program as defined in Section 253c.01 has the right to a written treatment plan that describes in behavioral terms the case problems, the precise goals of the plan, and the procedures that will be utilized to minimize the length of time that the minor requires inpatient treatment. The plan shall also state goals for release to a less restrictive facility and follow-up treatment measures and services, if appropriate. To the degree possible, the minor patient and the minor patient’s parents or guardian shall be involved in the development of the treatment and discharge plan.

For questions or concerns regarding your care, please call our Quality Resources department at 320-255-5651.

Or contact:
Office of Quality Monitoring
The Joint Commission
One Renaissance Boulevard
Oakbrook Terrace, IL 60181
800-994-6610
complaint@jointcommission.org

Inquiries or complaints regarding medical treatment or the Patient’s Bill of Rights may be directed to:
Minnesota Board of Medical Practice
2829 University Ave. S.E., Suite 500
Minneapolis, MN 55414-3246
612-617-2130 or 800-657-3709

Office of Health Facility Complaints
P.O. Box 64970
St. Paul, MN 55164-0970
651-201-4201 or 800-369-7994
health.ohfc-complaints@state.mn.us

Inquiries regarding hospital access to care or discharge concerns may be directed to:
Ombudsman for Long-Term Care
P.O. Box 64971
St. Paul, MN 55164-0971
651-431-2555 or 800-657-3591