

WEST WICHITA FAMILY PHYSICIANS, P.A.
Patient Rights and Responsibilities Policy

As a patient of West Wichita Family Physicians, the patient has the right to:

- Become informed of their rights as a patient in advance of their appointment. They may appoint a representative to receive this information should they so desire. These rights will apply to the person legally responsible for health care decisions on their behalf.
- Be treated with dignity, considerate and respectful care, given by competent personnel and provided in a safe environment, free from all forms of discrimination, abuse, neglect, harassment, and/or exploitation.
- Receive, to the degree known, complete information concerning their diagnosis, evaluation, proposed treatment or procedures to be performed, potential complications, and prognosis as they may need in order to give informed consent or to refuse the course of treatment. This information may be given to a legally authorized person or to a person designated by them.
- Participate in the development and implementation of their plan of care and actively participate in decisions regarding their medical care. To the extent permitted by law, this includes the right to request and/or refuse treatment and be informed of the medical consequence of refusal.
- Maintain personal privacy and security of self and belongings during the delivery of patient care services.
- Receive information in a manner that they understand. WWFP will make a reasonable response to the need/request for assistance in effective communication, regardless of language or disability.
- Access information contained in their medical record at WWFP within a reasonable time frame within the limits of state law.
- Request a Good Faith Estimate for expected services in accordance with federal guidelines.
- Receive a copy of the Notice of Rights to Privacy.
- Have their health information treated with confidentiality and are given the opportunity to approve or refuse the release of such information except when required by law.
- Be informed of their responsibilities as a patient prior to receiving care.
- Change their provider if other qualified providers are available.
- Information concerning: their rights as a patient, patient conduct and responsibilities, services

available at WWFP, provisions for after-hours and emergency care, fees for services, payment policies, credentials of WWFP healthcare professionals, and policies on advance directives.

- Be informed of policies and procedures that relate to their care, treatment, and resources for resolving disputes, grievances, and conflicts within WWFP, and procedures for expressing suggestions, and exercising their rights without being subjected to discrimination or reprisal.
- Voice grievances regarding treatment or care that is (or fails to be) furnished.
- Refuse to participate in research.
- Choose another facility.
- Formulate advance directives, under Kansas statute this includes, Living Will Declaration, Durable Power of Attorney for Health Care or Do Not Resuscitate Directive. More information including forms on advance directives are available upon request.
- Bring a service animal as defined by the ADA.

As a patient of West Wichita Family Physicians, the patient has the responsibility to:

- Be respectful of all the health care providers and staff, as well as other patients and visitors.
- Provide complete and accurate information to the best of their ability about their health, any medications, including over-the-counter products and dietary supplements and any allergies or sensitivities.
- Follow the treatment plan prescribed by their provider.
- Inform their provider about any advance directives including living will, durable power of attorney for healthcare, or other directives that could affect their care.
- Provide accurate and complete information in order for WWFP to receive payment for services.
- Accept personal financial responsibility for any charges not covered by their insurance and abide by the Financial Policy.
- Follow Appointment Policy.
- Refrain from taking photos and/or videos while on WWFP property without proper permission.
- Make their concerns and complaints known.

- Promote the safety of other patients and staff by following the Code of Conduct.

Patient Code of Conduct

In an effort to provide a safe and healthy environment for staff, visitors, patients and their families, West Wichita Family Physicians, P.A. expects visitors, patients, and accompanying family members to refrain from unacceptable behaviors that are disruptive and pose a threat to the rights or safety of others, patients, and staff.

The following behaviors are prohibited:

- Physical assault, arson, or inflicting bodily harm
- Throwing objects
- Climbing on furniture or toys*
- Making verbal threats to harm another individual or destroy property
- Intentionally damaging equipment or property
- Making menacing gestures
- Attempting to intimidate or harass other individuals
- Making harassing, offensive or intimidating statements, or threats of violence through phone calls, letters, voicemail, email or other forms of written, verbal or electronic communication
- Racial or cultural slurs or other derogatory remarks associated with, but not limited to, race, language or sexual orientation
- Requests that constitute illegal or unethical behavior on the part of clinicians or staff

**Adults are expected to supervise children in their care.*

Reporting of Abuse, Neglect or Exploitation

The administrator of WWFP shall be responsible for reporting any incidents of abuse, neglect, or exploitation of any patient including children.

Grievances/Complaints

A process for handling complaints or grievances pertaining to their healthcare service at WWFP is strictly followed by WWFP. They may direct grievances/complaints to the Compliance Manager.