

Patient Handbook



Personalized
care for **you**

At Centracare – St. Cloud Hospital, we know you might be anxious about your stay. We hope this guide will help put your mind at ease. It covers services and amenities available to you here. However, we know every person is unique, so let us know if you have questions.



We're here for your whole life –
to listen then serve, to guide and heal –
because health means everything.

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Visitors

The hospital respects, protects and promotes patient rights. In support of patient- and family-centered care, patients are invited to have visitors 24 hours a day, 7 days a week with some limited exceptions as outlined in hospital policy. St. Cloud Hospital does not discriminate against visitors based on race, color, national origin, religion, sex, gender identity, sexual orientation or disability.

Patients may receive visitors of their choice, including spouse, domestic partner (including a same sex domestic partner), another family member or friend.

Dining Available

RIVERFRONT DINING

Riverfront Dining (located on level A) features a full-service cafeteria offering various stations for made to order breakfast, lunch and dinner options as well as a soup/salad bar station.

FRESH HARVEST CAFÉ

Fresh Harvest Café (located on level 1 near the Center elevators) features coffee, sandwiches, salads, snacks, beverages and more to enjoy as dine in or on-the-go.

SOUTH BISTRO

South Bistro (located on level 1 near the South Ramp elevator) features coffee, sandwiches, salad bar, hot entrees, snacks, beverages and more for on-the-go.

See CentraCare.com for hours of operation.

CentraCare - St. Cloud Hospital Pharmacy

The pharmacy is open to the public. For your convenience, we accept walk-ins and drive-through window visits. We carry many over-the-counter products and accept most insurance plans. The pharmacy is located outside the hospital across from Woods entrance. Visit CentraCare.com for hours of operation. Call **320-255-5670** or **ext. 53842** for more information. MyChart online prescription refill is available as well as prescription mailout.

MEDICATION SAFETY AND STORAGE

Prescription medication abuse is a serious problem in the United States. Keep your medications safe and locked up, and then get rid of them when you no longer need them. You can take advantage of community medication take-back or disposal programs by calling your sheriff's department or local police department to find one near you.

Sign up for MyChart

Online access to your medical information:

- Review summaries of your previous appointments and message your provider.
- View your medications and request a refill.
- View new lab results, as well as trends over time.
- Access your family members' medical records.
- View billing information and review statements.
- Patients can even pay their bill through MyChart.

Ask clinic staff or visit CentraCare.com/mychart to get started.

Please contact your nurse if you need assistance to sign up for MyChart.

Gift shop proceeds benefit St. Cloud Hospital programs through the St. Cloud Hospital Auxiliary.



Gift Gallery

Located near the North Lobby, the Gift Gallery is sure to have a special item or floral arrangement for a hospitalized loved one or friend, or a unique product for a variety of occasions. The Gift Gallery also has a selection of products available for purchase securely online. Items ordered online will be delivered free to St. Cloud Hospital patients or employees only. Delivery is not available outside of St. Cloud Hospital.

Gorecki Guest House - A Home Away From Home

When you or a loved one has a hospital stay far from home, it's stressful. Worrying about a place to stay near the hospital just adds to the strain. We can remove that burden with comfortable accommodations conveniently located across from St. Cloud Hospital. The guest house features private bathrooms, kitchens, dining rooms to accommodate family meals, large living spaces that promote recuperation and recharge, an exercise and laundry room, free parking and WiFi. Financial assistance is available to qualifying guests.



Spiritual Care Services

Hospital chaplains are available to listen, to reflect and to offer prayer as part of the healing process for our patients and their families. We respect the beliefs and traditions of all we serve and work with area faith leaders to meet the spiritual needs of each person.

All are welcome to the hospital chapel, located on the first floor between Center and Lakes entrance. Catholic mass is celebrated daily and may be viewed on your room television on channel 65. For mass times and days, visit centracare.com. If you would like a chaplain to visit, or if you would like to receive any of the sacraments or rites of your faith tradition, please tell your nurse or call **ext. 54621**.



Integrative therapies support your body's natural ability to heal.

Integrative Therapies

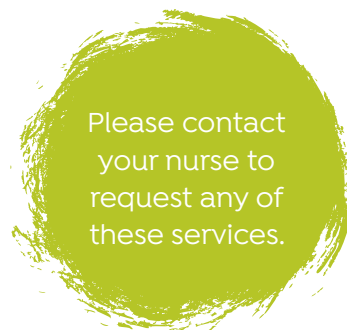
Integrative therapies are therapeutic treatments that support health and healing by promoting balance in body, mind and spirit. They are safe for all ages and work in harmony with standard medical care. Integrative therapies are offered to all St. Cloud Hospital patients at no additional charge.

Integrative therapies are used to:

- Reduce muscle and joint pain
- Reduce headaches
- Reduce nausea and vomiting
- Increase comfort during end-of-life care
- Help you cope with illness
- Improve sleep
- Reduce anxiety and stress

St. Cloud Hospital offers:

- Aromatherapy
- Acupuncture
- Acupressure
- Healing Touch
- Massage
- Animal-Assisted Therapy



Speak Up for Your Safety

Health care safety is a priority. We encourage you to speak up. To prevent health care errors, everyone has a role in making health care safe. You, as a patient or caregiver, play a vital role in making your care safe by being an informed and involved member of your health care team. Patients and caregivers who are active in their health care decisions and "Speak Up" are more likely to have better outcomes.



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.

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. We also have interpreters available for non-English speaking patients.

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. Ask your nurse if you have questions or would like more information about Health Care Directives. To access a Health Care Directive form, visit [CentraCare.com/services/home-care/](https://www.centracare.com/services/home-care/).



If you have any concerns, talk to your doctor or nurse.

Medical Alert Service

Independence, health and safety are important to all of us. Whether you are worried about your health, your safety at home or on the go, or are a family member worried about a loved one, CentraCare Medical Alert Service can provide comfort that help is available at the press of a button. For more information, call [320-255-5700](tel:320-255-5700) or visit CentraCare.com.

Home Delivered Meals

The Home Delivered Meals program strives to bring properly balanced, nutritious meals to elderly, sick and handicapped homebound people within St. Cloud, Monticello, Sartell, Sauk Rapids and Waite Park city limits. For more information, call [320-255-5646](tel:320-255-5646) or visit CentraCare.com.

Mental Health/Suicide Hotline Resources

We can all help prevent suicide. The Lifeline provides free and confidential support for people in distress as well as prevention and crisis resources for you or your loved ones. Connect with support by calling the [National Suicide Prevention Lifeline at 1-800-273-8255 \(TALK\)](tel:1-800-273-8255) or [Crisis Text "MN" to 741741](tel:1-800-273-8255).

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](tel:320-255-5622).

Patient and Family Partner Program:
If you or a loved one recently were hospitalized or seen by a CentraCare provider, please consider joining this program. Patient and Family Partners serve voluntarily and give valuable feedback and ideas on improving the patient experience. Call [320-255-5638](tel:320-255-5638) or visit CentraCare.com if you would like to learn more.



Minnesota Patients' Bill of Rights

Legislative Intent

It is the intent of the Legislature and the purpose of this statement 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 probate court or county 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 civil 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

For the purposes of this statement, "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 7, Laws of Minnesota 1986, Chapter 326. For purposes of this statement, "patient" also means any person who is receiving mental health treatment on an out-patient basis or in a community support program or other community-based program.

Public Policy Declaration

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 statement.

1. Information about Rights

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 7, 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 those with communication impairments, and those who speak a language other than English. Current facilities 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.

2. Courteous Treatment

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.

3. Appropriate Health Care

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.

4. Physician's Identity

Patients shall have or be given, in writing, the name, business address, telephone number, and specialty, of 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 his or her representative.

5. Relationship with Other Health Services

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 his or her representative.

6. Information about Treatment

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 his or her 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.

7. Participation in Planning Treatment

Notification of Family Members:

(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 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 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.

8. Continuity of Care

Patients shall have the right to be cared for with reasonable regularity and continuity of staff assignment as far as facility policy allows.

9. Right to Refuse Care

Competent patients shall have the right to refuse treatment based on the information required in Right No. 6. 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 conditions and circumstances shall be fully documented by the attending physician in the patient's medical record.

10. Experimental Research

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.

11. Freedom from Maltreatment

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 shall also 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.

12. Treatment Privacy

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.

13. Confidentiality of Records

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 144.335. 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.

14. Disclosure of Services Available

Patients shall be informed, prior to or at the time of admission and during their stay, of services which are included in the facility's 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.

15. Responsive Service

Patients shall have the right to a prompt and reasonable response to their questions and requests.

16. Personal Privacy

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.

17. Grievances

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 for 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 in-patient facility, every residential program as defined in Section 7, and every facility employing more than two people that provides out-patient 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 7 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.

18. Communication Privacy

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. 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 the Vulnerable Adults Protection Act, Section 626.557, Subdivision 14, Paragraph (b), this right shall also be limited accordingly.

19. Personal Property

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.

20. Services for the Facility

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.

21. Protection and Advocacy Services

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.

22. Right to Communication Disclosure and Right to Associate

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 the patient shall consider the opinions of the patient regarding the disclosure of the patient's presence in the facility

The patient has the right to visitation by an individual the patient has appointed as the patient's health care agent under chapter 145C and the right to visitation and health care decision making by an individual designated by the patient under paragraph 22.

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 may also be identified as such by the patient or by the patient's family.

Additional rights in residential programs that provide treatment to chemically dependent or mentally ill minors OR IN FACILITIES PROVIDING SERVICES FOR EMOTIONALLY DISTURBED MINORS ON A 24-HOUR BASIS:

23. Isolation and Restraints

A minor patient who has been admitted to a residential program as defined in Section 7 has the right to be free from physical restraint and isolation except in emergency situations involving 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 consulting psychologist, only when less restrictive measures are ineffective or not feasible and only for the shortest time necessary.

24. Treatment Plan

A minor patient who has been admitted to a residential program as defined in Section 7 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 his or her parents or guardian shall be involved in the development of the treatment and discharge plan.

Inquiries or complaints regarding medical treatment or the Patients' Bill of Rights may be directed to:

Minnesota Board of Medical Practice
2829 University Ave. SE, Suite 400
Minneapolis, MN 55414-3246
612-617-2130
800-657-3709

Office of Health Facility Complaints
P.O. Box 64970
St. Paul, MN 55164-0970
651-201-4201
800-369-7994

Inquiries regarding access to care or possible premature discharge may be directed to:

Ombudsman for Long-Term Care
P.O. Box 64971
St. Paul, MN 55164-0971
800-657-3591
651-431-2555 (metro)

Text provided by the Minnesota Hospital and Healthcare Partnership. Translation financed by the Minnesota Department of Health. For more information on this translation, contact the Minnesota Department of Health at 651-201-3709.

Minnesota Department of Health
Health Regulation Division
P.O. Box 64900
St. Paul, Minnesota 55164-0900
651-201-4101
health.fpc-licensing@state.mn.us

To obtain this information in a different format, call: 651-201-3709.



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[CentraCare.com](https://www.centracare.com)