

Rights and Responsibilities / Grievance Procedure

Your Client's Rights Specialist

Children's Wisconsin
Patient Relations
PO Box 1997, MS 939
Milwaukee, WI 53201
(414) 266-7848 or (800) 556-8090
TTY (414) 266-2465
Fax (414) 266-6669
patientrelations@childrenswi.org

Rights information taken from Wisconsin Statute sec. 51.30 and 51.61(1) and HFS 92 and 94 of the Wisconsin Administrative code.



Kids deserve the best.

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You or your child have the right to:

- Fair, timely and appropriate care.
- Care that respects you or your child's age, cultural, emotional, developmental and social needs.
- Care in a setting free from prejudice, harassment, neglect or abuse.
- Be treated in the least restrictive manner and setting necessary.
- Participate in care, care planning and consent.
- For children receiving mental health services:
 - If you are less than 14 years old a parent or guardian must agree in writing to you receiving treatment.
 - If you are 14 years or older:
 - You and your parent or guardian must agree to you receiving outpatient treatment.
 - If you want treatment and your parent or guardian does not agree to it you can petition the county Mental Health Review Officer (MHRO) for a review.
 - If you do not want treatment but your parent or guardian does, the treatment director for the clinic where you are receiving your treatment must petition the MHRO for a review.
 - If you want more information about the MHRO, please let a staff member know.
- Participate in medication management as needed.
- Information about treatment and care, including alternatives and possible side effects of treatment.
- Give written, informed consent to all treatment or medications unless needed in an emergency to prevent serious physical harm to you or others, or if a court orders it.
- Only be filmed, taped or photographed if you agree to it.

- Written information of any costs of your care and treatment for which you may have to pay.
- Privacy about your care unless law permits disclosure.
- Consent for records to be released, unless the law specifically allows for it.
- See your records. Staff may limit what you see while you are receiving services. You must be told reasons for any limits. See your entire treatment record upon request after discharge.
- Challenge your records accuracy through the grievance process.
- Be informed of your rights and how to use the grievance process.
- File a formal grievance without threat or penalty.

You or your child is responsible to:

- Give truthful and complete health information.
- Tell the provider if you do not understand any part of your or your child's care.
- Help with your or your child's care as you have agreed to.
- Follow the care plan and instructions.
- Pay for bills for care provided.
- Follow the rules.
- Respect the rights of others including staff and property.
- Not take pictures or video of your child, other people or staff.
- Know that the use of tobacco, illegal drugs, alcohol, guns or weapons of any kind are not allowed.

Grievance Resolution Stages

Informal Discussion (Optional)

- If you feel your rights have been violated you are encouraged to first talk with staff or management about any concerns you have.

Grievance Investigation – Organization Level Review

- File a grievance within 45 days of the time you become aware of the problem. We may grant an extension.
- We will investigate your grievance and attempt to resolve it.
- We will give you written communication within 30 days from the date you filed the formal grievance.
- If your concern has not been resolved you can escalate your concern for a final administrative review.

County Level Review

- If you are receiving services through county support you may appeal the organization's decision to the county agency director. You must make this appeal within 14 days of the day you receive the organizational decision.
- The county agency director must issue his or her written decision within 30 days after you request this appeal.

State Level Review

- You may appeal the organization and county level review to the state grievance examiner.
- You must appeal to the state grievance examiner within 14 days of receiving the decision from the previous appeal level.

State Grievance Examiner, DSL
P.O. Box 7851, Madison, WI 53707-7851
(608) 266-9369
dhs.wisconsin.gov/clientrights/contacts.htm

Final State Review

- Any party has 14 days after receipt of the written decision of the state grievance examiner to request a final state review by the administrator of the Division of Supportive Living or designee.
DSL Administrator, DSL
P.O. Box 7851, Madison, WI 53707-7851
(608) 266-9369
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