Patient Bill of Rights and Responsibilities in Wound Prevention and Care

WoundsCANADA.ca

1 Right to timely skin-related risk assessment upon accessing health care in any setting*

Patients have the right to have their skin assessed for their level of risk of developing a wound as part of the overall health assessment, and if they are at risk, their care providers must take action to protect their skin or prevent wounds and/or related complications and connect them to the right services.

Responsibility: To seek care promptly when serious changes on their skin, wounds or health are noticed, and to share this information with their care providers.

2 Right to timely referral to skin-health and wound-related care services

Patients have the right to timely referral to preventative and wound care services that match their level of risk, ensuring complications are addressed early before they escalate.

Responsibility: To seek care promptly when skin changes appear or wounds worsen. Request early referrals to specialized care, especially if wounds show no sign of healing within four weeks.

3 Right to high-quality, consistent, co-ordinated, evidence-based care in every setting

Patients have the right to receive, in all health-care settings, safe, high-quality, evidence-based wound prevention and care that is co-ordinated across providers, services and settings.

Responsibility: To learn about and participate in wound prevention and care, with support from care partners and others as needed, and to share concerns about continuity of care if they arise.

4 Right to clear and accessible communication

Patients, care partners,** family members** and substitute decision makers have the right to clear, plain-language updates on health and wound status, the care plan and treatment options, as well as access to education at every stage of care, from prevention of wounds to treatment and post-healing. Interpreter services and communication tools should be available when needed.

Responsibility: To ask questions when something is unclear, request updates, share needs and provide updated information with care providers to support continuity. To designate a principal contact person, either patient, care partner or substitute decision maker, to connect with the care team to help co-ordinate care and communication. To identify a main contact person in the care team to answer their questions or report issues about access to care when needed.

5 Right to be included as part of the wound care team

Patients, care partners,** family members** and/or substitute decision makers have the right to be included in all decision-making and care planning.

Responsibility: To actively participate in care planning with the health-care team.

6 Right to personalized, person-centred care

Patients have the right to receive individualized, person-centred care plans that respect their personal needs and preferences.

Responsibility: To actively share information, needs, values, concerns, preferences and health goals with the rest of the care team.

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Right to respectful, compassionate, empathetic, dignified and culturally safe care

Patients have the right to person-centred care that is respectful, compassionate, empathetic, dignified and culturally safe, and that honours identity, traditions, beliefs and preferences.

Responsibility: To communicate respectfully and share personal and cultural values with care teams. To speak up if care feels disrespectful or unsafe.

8

Right to pain assessment and management

Patients have the right to regular wound-related pain assessment and involvement in decisions about pain management.

Responsibility: To report pain levels, participate in planning and follow agreed-upon pain management strategies.

9

Right to receive support for navigation and care transitions

Patients and their care partners/family members have the right to receive support for system navigation and care transitions to ensure continuity of wound prevention and care in any setting.

Responsibility: To share challenges and concerns about continuity and transitions of care with health-care providers, especially when facing delays in system navigation.

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Right to mental, emotional and trauma-informed support

Patients should be offered holistic and trauma-informed care, including psychosocial and psychological services that are mindful of experiences and complications that affect a person's well-being and quality of life during wound prevention and care.

Responsibility: To request and access emotional or mental health support, including the psychosocial and psychological resources available in the local community.

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Right to supportive resources and rehabilitation across all health-care settings

Patients have the right to rehabilitation services, peer support and self-management resources.

Responsibility: To request and use supportive resources, follow up on referrals and communicate needs.

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Right to work, financial security and employer and community support

Patients should be supported, as appropriately and to the extent that is possible by their health-care teams, to maintain employment, financial stability and community support while receiving wound care or preventative care. They should be referred to appropriate professionals to ensure understanding of benefits, workplace accommodation and legal rights.

Responsibility: To communicate with the health-care teams and employers about work-related needs and accommodation if/as required and to actively follow up with referrals and resources that can help maintain employment, financial stability and community support.

* "Any setting" may refer to remote or virtual access where in-person services are not available in the patient's immediate community.

** For inclusion in these rights, care partners and family members must be approved by the patient or substitute decision maker.

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