

## **As a child, parent or guardian participating in Care Coordination programs, you can expect to:**

1. Be partners with the PFK team members in the coordination of the care of your child.
2. Be called by your name and be given the names of the PFK team members and others who provide coordination.
3. Request a change in your PFK team member by calling the PFK Intake team at 855-562-4735 or via email at [PFKCareCoordination@nationwidechildrens.org](mailto:PFKCareCoordination@nationwidechildrens.org).
4. Receive coordination from PFK team members who respect your personal values, beliefs, and customs regardless of your race, ethnicity, gender, religion, sexual orientation, gender identity or expression, cultural background, income level (socioeconomic status), physical or mental disability, education or illness.
5. Have PFK team members take the time to listen to what you say, value your opinions and choices, and answer your questions. Know that you can express your feelings or fears and receive caring responses.
6. Have access to an interpreter if needed.
7. Receive assistance accessing your medical record unless restricted by law by making a formal request to the facility Health Information Management (HIM) department.
8. Have personally identifiable data and medical information kept confidential, including knowing what entities have access to your information, and understanding how PFK ensures your security, privacy, and confidentiality.
9. Have your complaints heard and resolved by calling the PFK Intake team at 855-562-4735 or via email at [PFKCareCoordination@nationwidechildrens.org](mailto:PFKCareCoordination@nationwidechildrens.org).
10. Have the right to consent to or refuse to take part in services provided.
11. Be informed of all Care Coordination services available, even if a service is not covered, and to discuss options with treating practitioners.
12. Have understandable information about our programs, services, partnerships and the PFK staff qualifications.

## **As a child, parent or guardian participating in Care Coordination Programs, it is your responsibility to:**

1. Give complete information about your health.
2. Follow the mutually agreed-on case management plan or notify the PFK team member if you cannot follow the plan.
3. Tell those who care for you when you do not understand your care or what is expected of you.
4. Notify the PFK team member and your usual care provider if you wish to disenroll from the program.

**PARTNERS  
FOR KIDS**

