



Patient and Care Team Rights and Responsibilities Agreement

Duffy Health Center's mission is to improve the quality of life for the people we serve through health care. Together with you, our goal is to provide quality, compassionate care in an environment that promotes comfort, healing and mutual respect between the Patient and Care Team (doctors, nurses, therapist, and case managers).

YOUR RIGHTS AS A PATIENT:

- You have a right to expect that your pain and symptoms will be assessed and treated with the goal of minimizing your experience of pain and discomfort, to the extent clinically possible, within our practice guidelines.
- You have a right to equitable, considerate, respectful care that includes consideration of your psychosocial, spiritual, cultural and personal values and beliefs.
- You have the right to know the identity and specialty of individuals involved in your care.
- You have a right to refuse to be observed, examined, or treated by students or by any other staff without jeopardizing your access to medical care.
- You have a right to prompt response to all reasonable requests.
- You have a right to receive prompt, life-saving treatment without delay and to receive the most appropriate medical treatment and care available without regard to your economic status or the source of payment.
- You have a right to confidentiality of all records and communications concerning your medical history and treatment to the extent provided by law.
- You have a right to participate or have your designated representative participate in the consideration of ethical issues, which arise in your care.
- You have a right to receive competent interpreter services when seeking care at Duffy Health Center.
- You have a right to report safety concerns.

- You have a right to obtain a copy of any rules and regulations of Duffy, which apply to your conduct as a patient, such as the No Smoking Policy.
- You have a right to file a complaint or grievance both internally and externally. Internally, you may file a complaint by contacting Duffy Health Center at 508-771-9599. Externally, you may file a complaint with MA Department of Public Health, Division of Healthcare Quality, at 800- 462-5540, or to the Board of Registration in Medicine at 800-377-0550.

YOUR RESPONSIBILITIES AS A PATIENT:

- To provide accurate and complete information about your present symptoms, past illness including pain and response to treatment, hospitalizations, medications, and other matters relating to your health.
- To report unexpected changes in your condition to those responsible for your care.
- To tell us if you do not understand the proposed plan of care and what is expected of you.
- To collaborate with medical and nursing staff to make a plan for tests and treatments with the goal of being as healthy as possible, and understand that your health may worsen if you choose not to follow a provider's recommendation.
- To accept responsibility for your actions if you refuse treatment or do not follow your provider's instructions.
- To ask questions if you do not understand instructions given to you at discharge about the treatment plan that you will use at home, including the medications that you will take and the activities that you can perform.
- To assure the financial obligations of your health care are fulfilled as promptly as possible; to give the Duffy Center all necessary information we will need about the payment of your care.
- To keep your appointment or cancel it so that another patient can be served.
- To follow Duffy's rules and regulations affecting patient care and conduct, including the No Smoking Policy.
- To behave in a manner that does not interfere with the care of well-being of patients and staff. Rude, threatening or demeaning comments; profanity; physically threatening or disruptive behavior as determined by the Care Team member may result in a temporary termination of services. The patient or friends and family on the premises will be asked to leave the building until Care Team members believe it is safe to resume care.
- To be considerate of the rights of other patients and Duffy's personnel by assisting with the control of noise and cleanliness of property.

- To respect the community by placing cell phones/pagers on silent mode, and talking on the phone outside or in the building stairwell.
- To respect the property of others and of the Center.
- To inform us immediately if you believe your rights have been violated, to express grievances, or to offer suggestions.

With my signature below, I affirm that I have read and understand my rights and responsibilities as a patient at the Duffy Health Center.

PRINT: Patient Name

Patient Signature

Date

Care Team Member

Date

Massachusetts Department of Public Health

Division of Health Care Quality
99 Chauncy Street, 2nd floor
Boston, MA 02111

800-462-5540

Massachusetts Board of Registration in Medicine

Patient Care Assessment Unit
560 Harrison Avenue, Suite G-4
Boston, MA 02118

800-377-0550