

Responsibilities

As a patient/family member at CHS, you are an important part of the healthcare team. Therefore, we ask that you are *responsible* for doing the following:

- ◆ Participate in your care by working together with the medical team and following the instructions you and your provider agree upon.
- ◆ Participate in the teaching/learning process so that you will learn the things you can do to get well and stay well.
- ◆ Keep appointments, be on time and call CHS when you are unable to do so.
- ◆ Do not engage in verbal or physical threats to self or others and do not bring weapons to CHS.
- ◆ Respect the privacy of other people who use CHS services and premises.
- ◆ Pay any charges billed to you, or make other arrangements with our staff.
- ◆ Provide the information we need to help you pay your bill. This may mean telling us about address changes, when your family status changes or financial information.
- ◆ Respect and promote safety on CHS property by always being respectful of people and property. This includes not smoking or using illegal drugs, verbally or physically assaulting anyone or stealing/damaging any property belonging to clients, staff or management of CHS.
- ◆ Please follow our Code of Conduct. Failure to do so may result in removal from CHS, discharge from care and/or exclusion from CHS premises in the future.



VISITOR CODE OF CONDUCT

At Community Health Services, we strive to provide a safe and caring environment for staff, visitors, patients and their families. We ask and expect that visitors, patients and accompanying family members will help us with this by treating staff and other visitors with courtesy and respect and by refraining from behaviors that are disruptive or pose a threat to the rights or safety of other patients and staff.

The following conduct is prohibited at CHS:

- ◆ Possession of firearms or weapons of any kind
- ◆ Physical violence of any kind
- ◆ The use of profanity or abusive language
- ◆ Making threats to harm another individual or destroy property
- ◆ Intentionally damaging equipment or property
- ◆ Making offensive comments related to an individual's race, ethnicity, color, gender, sexuality, age, medical condition or other personal characteristic

If you witness or are subjected to one of these behaviors, please report it to Security or another staff member. Individuals who violate this Code of Conduct are subject to removal from CHS, discharge from care and/or exclusion from CHS premises in the future.

Community Health Services, Inc

500 Albany Avenue
Hartford, CT 06120
Phone: 860-249-9645
www.chshartford.org

Patient Rights and Responsibilities





Rights

Community Health Services (CHS) has a mission and a vision that includes providing access to comprehensive and quality healthcare to our community. We are committed to providing professional, affordable care with compassion that involves our patients and their families. Knowing your rights and responsibilities as a patient is an important part of this involvement.

As a patient at CHS, your rights include the following:

- ◆ The right to respectful and considerate care, regardless of your age, race, color, sex, religion, sexual orientation, marital status, national origin, immigration status or ability to pay for services.
- ◆ The right to timely, high quality health care from clinicians who are experienced and trained to meet your healthcare needs.
- ◆ The right to have your personal and medical information and records treated confidentially and to be able to approve or refuse the release of information to a third party, except as required by law.
- ◆ The right to information in your medical record.
- ◆ The right to participate in your care, including decisions about procedures, treatment or research.
- ◆ The right to obtain another medical/dental opinion prior to any procedure.
- ◆ The right to an explanation of your diagnosis, treatment and prognosis in terms you can understand.
- ◆ The right to refuse treatment to the extent permitted by law, and to be informed of the medical consequences of your decision.
- ◆ The right to know the name and the role of all CHS staff providing care to you. You may request information about your providers' education and experience.
- ◆ The right to know how to access care after hours.
- ◆ The right to receive an itemized copy of your account upon request and to be informed of your eligibility for free care, reduced cost care, or third party reimbursement.
- ◆ The right to have your personal privacy respected by all CHS staff.
- ◆ The right to express a safety or quality concern about any aspect of your care at CHS. The reporting will in no way negatively impact current or future care. To address concerns, please speak to an Eligibility Specialist or Contact Director of Grants and Outreach at 860-808-8748. If you would like to make a grievance to an outside agency, you may contact the following:

Joint Commission
One Renaissance Blvd.
Oakbrook Terrace, IL
www.jcaho.org
(800)9946610

CT DPH
410 Capitol Ave
Hartford, CT
www.dph.ct.state.us
(860)509-7400

