



CLIENT'S RIGHTS AND RESPONSIBILITIES.

STATEMENT OF PURPOSE: It is anticipated that observance of these rights and responsibilities will contribute to more effective care and greater satisfaction for the client as well as the staff. The rights will be respected by all personnel and integrated into AFC Program. A copy of these rights will be given to Client and their families or designated representative. The client or their designated representative has the right to exercise these rights. In case of a client adjudged incompetent, the rights of the client are exercised by the person appointed by law to act on the client's behalf. In the case of a client who has not been adjudged incompetent, any legal representative may exercise the client's rights to the extent permitted by law.

Procedure:

1. Prestige AFC will maintain a written form of rights for individual receiving services and those requesting services.
2. Client rights are communicated in a way that is understandable at admission and annually for clients that are in a program for longer than one year.
3. Clients will sign an acknowledgment that she/he has been informed and received copy of these rights. If the client is unable or unwilling to sign, it should be noted such.
4. Prestige AFC will display client rights in a conspicuous place in the building. The posted rights will contain information on to an individual may obtain a copy of them.
5. If required, the material will be provided via alternate means to accommodate language or communication barriers: translated to his/her primary language of communication; large print; or spoken word to ensure that the language is understandable.
6. Prestige AFC will decide to provide translation, interpreters, assistive devices and/or sign language as needed upon reasonable accommodation requests.
7. All staff members, interns and caregivers will be trained during orientation as well as annually in regards to client rights.
8. Each client will receive a written statement of his/her rights that contains at minimum the following:

THE CLIENT HAS THE RIGHT:

1. To be fully informed and knowledgeable of all rights and responsibilities before providing pre-planned care and to understand that these rights can be exercised at any time.
2. To appropriate professional care relating to Physicians orders.
3. To choose a healthcare provider.
4. To request services from the Agency of their choice and to request full information from their Agency before care is given concerning services provided alternatives available, Licensure and certifications required, organization Ownership and control.
5. To be informed in advance about care, and to be notified of any changes regarding care.
6. To Information necessary to give informed consent prior to start of services or any changes made.
7. To participate in the development and periodic revision of the plan of care/services.
8. To confidentiality and privacy of all information contained in the client record of the protected health information.
9. To information necessary to refuse service within the confines of the law and to be informed of the consequences.
10. To service with utmost dignity and respect by all Agency representatives, regardless of the client's chosen lifestyle, cultural morals, political, religious, ethical beliefs, having or not having executed an advance directive and source of payment without regard to race, creed, color, sex, age or handicap.
11. To have their property and person treated with respect, consideration and recognition of client dignity and individually.



12. To receive access services consistently and in a timely manner from the Agency to their request for service.
13. To be admitted for service only if the Agency has the ability to provide safe professional care at the level of intensity needed and to be informed of the Agency's limitations.
14. To reasonable continuity of care.
15. To an individualized plan of care and teaching plan developed by the entire health team including client and family.
16. To be informed within a reasonable time of anticipated termination of service or plans for transfer to another Agency.
17. To be free of abuse.
18. To voice grievances regarding treatment or care that is (or fails to be) furnished, or regarding the lack of respect of property or recommend changes in policy, staff, or service/care without restraint, interference, coercion, discrimination, or reprisal.
19. To be referred to another Agency if he/she is dissatisfied with the Agency or the cannot meet the client's needs.
20. To be able to identify visiting staff members through proper identification.
21. To be informed orally or in writing of any changes in payment information as soon as possible, but no later than 30 days from the date that the Agency becomes aware of changes.
22. To education, instruction and list of requirements for continuity of care when the services of the agency are terminated.
23. To be informed of the Toll-free Abuse Hotline 1-800-922-2275.
24. To be advised of the Toll-free home health agency hotline for the State of Massachusetts and the purpose of the hotline, to receive complaints e concerns which is 1-800-462-5540. Operation hours from 8 A.M to 5 P.M daily.

Additional client rights include:

- Right to confidentiality and privacy;
- Freedom from abuse, neglect, financial or other exploitation, retaliation, humiliation.
- Access to records, legal entities for appropriate representation, self-help and advocacy support services;
- Informed consent or refusal or expression of choices regarding services provided, release of information, concurrent services, composition of the service team, involvement in research process, when applicable;
- Adherence to research guidelines and ethics when persons served are involved, if applicable;
- Investigation and resolution of alleged infringement of rights, and other legal rights.

THE PATIENT HAS THE RESPONSIBILITY:

- To provide to the best of their knowledge, accurate and complete information about:
- Past and present medical history,
- Unexpected changes in their condition,
- whether they understand a course of action selected
- To comply with the plan of care.
- To respect the rights of staff providing services.
- To notify staff of all Physician appointments and visits in advance.
- Comply with rules and regulations established by the agency.
- Ensuring financial obligations of health care are promptly fulfilled.



THE PROVIDER RESPONSIBILITIES:

- To provide orientation and ongoing training for direct care staff
- To support and supervise direct care staff
- To provide ongoing monitoring of the clients' health status and support needs
- To coordinate medical and social service referrals To maintain accurate records and documentation
- To terminate participation in the program of client when they are no longer appropriate for services
- Understand that services will begin upon the completion of the application process.

Client Signature: _____

Date: _____