

# Patient Handbook

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*Espanola & Area*

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**Family Health Team**



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# Welcome Message

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Welcome to the Espanola & Area Family Health Team (EAFHT).

As a patient-focused healthcare team, we aim to provide our community with the best possible Primary Care experience.

As part of our commitment to you, we emphasize the importance of our patients taking an active role in their health and wellness journey. Through our inclusive approach to care, we strive to support collaborative patient care pathways that allow for timely access to care and smooth, efficient service.

Thank you for choosing the Espanola & Area Family Health Team. We look forward to serving you.





# Vision, Mission & Values

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## Vision

The Espanola & Area Family Health Team is an integrated Primary Care team that supports primary care services for patients of all ages across the health care continuum. The Espanola & Area Family Health Team is committed to enhancing the health of its community, providing superior services to its patients; delivering outstanding value; embracing clinical innovations; providing exceptional medical and health education; and supporting a knowledgeable, skilled and caring team.

## Mission

The Espanola and Area Family Health Team is committed to improving the health of our community, by providing timely access to patient centered care and services to all the people it serves. We embrace discovery, teamwork, quality, integrity and excellence in all that we do.

## Values

Patients First  
Integrity  
Compassion  
Respecting Diversity  
Contribution of All



# Code of Conduct

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## Patient Responsibility

To ensure the Espanola & Area Family Health Team environment is a safe place to access and deliver care, there are several patient responsibilities that need to be adhered to.

- As a patient, you acknowledge that you are responsible for your own behaviour.
- As a patient, that you are observing rules of conduct that are normally accepted as standard in a healthcare setting.
- As a patient, that your actions are consistent with this Code and that you abide other applicable facility policies, laws and regulations.
- As a patient, you acknowledge and abide by our zero tolerance for workplace violence and abuse across the Espanola & Area Family Health Team and Espanola Regional Hospital & Health Center campus.

### **Tell Us Your Views**

All concerns and complaints should be directed to:

**Patient Relations Program**  
patientrelations@esphosp.on.ca  
705 869 1420 ext. 3048

# Code of Conduct

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## Patient Expectations

- Be polite and respect the privacy of other patients, visitors and members of the health care team.
- Avoid offensive or abusive language.
- Conduct yourself in a respectful and courteous manner towards all staff, volunteers, students and other patients.
- Attend appointments unimpaired by alcohol and drugs.
- Respect EAFHT physical property, rules, and regulations.
- Refrain from the use of profane, threatening or abusive language, innuendos, sexual advances and any other form of verbal interaction that ought to be known to be unwelcome and/or disrespectful.
- Refrain from physical and/or verbal abuse, violence, threats of violence, aggression, bullying or intimidating behavior, unwanted or unnecessary physical contact and any other behaviour that ought to be known to be unwelcome and/or disrespectful.
- Treat all staff (including all doctors, nurses, allied health professionals and administrative staff), other patients and visitors with consideration and respect.
- Work with the clinicians to build a relationship that is based on trust, honesty, respect and a mutual desire to improve your health outcomes.

# Code of Conduct

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## Patient Expectations

- Refrain from discriminatory comments or actions regarding sexism, racism, ableism, classism, homophobia, biphobia, transphobia and any other behavior that is derogatory to a marginalized person.
- Be prepared to be seen by other EAFHT staff, medical learners, and locum physicians when your usual provider is not available or be willing to wait until they are available.
- Understand that EAFHT works with many individuals with many levels of need and staff may need to prioritize their time to deal with emergency or high need situations.
- Understand that EAFHT has limitations regarding the services we provide. Understand that posting comments on social media that harass, bully or defame a staff member is unacceptable and could result in immediate dismissal.
- Understand there are established ways to bring forward concerns and complaints that ensure respectful communication of any dissatisfaction with services.
- Treat others in a considerate, respectful manner regardless of race, culture, religion, sex, age, mental or physical ability, economic status, sexual orientation, gender identity, diagnosis or legal status.
- Respect other patients right to privacy.

# Health Card Policy

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At the Espanola & Area Family Health Team we have a health card policy to comply with OHIP (Ontario Health Insurance Plan) guidelines which require you to have a valid health card to receive Primary Care Services.

If you present for an appointment with a Physician, Nurse Practitioner, Nurse or Allied Health Professional and do not have a valid health card, there will be a \$60.00 charge for the appointment and all future visits with an expired health card. You may not be permitted to book another appointment until your health card is renewed.

***Please note that our office can only accept cash payments at this time.***

To renew your health card, please visit our local Service Ontario office at 148 Fleming St Unit 2, Espanola, ON P5E 1R8, or renew it online at:

**<https://www.ontario.ca/page/health-card-renewal#section-0>**

We aim to provide you with the best patient experience during every visit and appreciate your participation in your healthcare journey.





# Cancellations & Missed Appointments



## IMPORTANT INFORMATION FOR PATIENTS:

- If you miss an appointment you will be reminded at the next visit of the “no show” without cancellation with our office.
- You will be booked at the next available appointment and will not be accommodated for an earlier appointment.
- If you miss a second appointment you will receive written notice along with an invoice of \$60.00 for the missed appointment. Payment will be required prior to being rebooked.
- If you miss a third appointment your case will be reviewed and may result in you being discharged from the practice.
- We require 24 hours notice for your cancellation.

Demand for services is ever increasing for many reasons, and it is inexcusable for patients not to attend their scheduled appointments. Even short-notice cancellations can be filled quite quickly with someone that could use the time slot for their health concerns. Someday you could potentially benefit from such a cancellation with a timely appointment for yourself.

It is your responsibility to make sure you attend all of your appointments. For your convenience we send out reminders via text and email for all your appointments. If you are not receiving these reminders, please stop at front reception and update your information.

# Prescription Renewals

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## IMPORTANT INFORMATION FOR PATIENTS:

Be proactive in your health care and ask your pharmacist to send a renewal request to your provider at least two weeks before you need it.

### **WE ALL FORGET SOMETIMES - AND THAT'S OKAY!**

If this is one of your regular medications, the pharmacist may be able to extend it for you. This will help get you by until the renewal process is completed. Please contact your pharmacy for more information.

***If you are looking to start a new medication, or change an existing one - you may need to book an appointment with your healthcare provider. Give us a call to schedule an appointment to ensure the medication is right for you.***



# AutoScribe

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The Espanola & Area Family Health Team is always evolving and introducing new ways to ensure you receive the best quality of care.

Your healthcare providers may use a technology called AutoScribe to help them with their clinical documentation. AutoScribe uses speech recognition software and artificial intelligence to help reduce the amount of time that healthcare providers spend documenting in your electronic medical record. The goal of AutoScribe is to allow healthcare providers to spend more time with their patients and to improve quality of care.

***This is a tool used to aid in your appointment. If you wish to opt out, please advise your healthcare provider prior to beginning your appointment.***

You can find more information on AutoScribe at the follow website:



**About AutoScribe | Revolutionizing Clinical Documentation**

Learn more about AutoScribe, the AI-driven solution that transforms clinical documentation. Discover o...

 [mutuohealth.com](https://mutuohealth.com)



# Ocean Emails

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The Espanola & Area Family Health Team is always evolving and introducing new ways to ensure you receive the best quality of care.

Your healthcare provider may use email to communicate with you. Ocean is a secure platform through which providers can send emails that are encrypted to maintain your confidentiality. The purpose of Ocean emails are to allow healthcare providers to communicate with their patients in a timely manner in situations where they can not attend in person, or when attending in person may not be necessary,

***This is a tool used to aid in your care. If you wish to opt out, please advise your healthcare provider at any time.***

Patient Email Address

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You can find more information on Ocean emails at the follow website:

## **Information for Patients**

If your doctor or clinic uses Ocean and you want to learn more about how our technology works while keeping your health information safe and secure,...

[www.oceanmd.com/patients-guide-to-ocean/](http://www.oceanmd.com/patients-guide-to-ocean/)  
OceanMD / Aug 12



# Patient Privacy Acknowledgement

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As health care providers we take patient confidentiality and privacy very seriously. All of our employees and health care providers have signed a confidentiality pledge to ensure your private health information is only shared with those who are in your circle of care.

As a patient of the EAFHT you are expected to respect the privacy of others when you enter our facility. Many patients and families access care in our facility and have interactions with our health care providers and staff. These interactions are part of that patient's care experience and are not to be shared.

***By signing below, you agree to keep information confidential pertaining to patient care, both directly and indirectly.***

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Patient Name

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Employee Name

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Patient Signature

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Employee Signature

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Date of Signature

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Date of Signature



# Patient Bill of Rights & Responsibilities

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## RIGHTS

### CARE AND COMMUNICATION

- To receive high quality patient care that is free from discrimination, abuse or harm.
- To be treated with compassion and respect.
- To give input about your plan of care and to get the information you need to make informed decisions.
- To have your privacy respected.
- To know the name and role of the members of your health care team.
- To expect that the members of your health care team will talk with one another to make sure you get consistent care.
- To get the right information and education about your diagnosis, treatment and prognosis in a language you understand.
- To share your concerns and get answers to your questions.

### CHOICE

- To accept, ask for or refuse treatment, to the extent permitted by the law.
- To expect that your values and wishes for end of life care will be followed.
- To have visitors, unless this interferes with the well-being, rights or safety of you or others.

## RESPONSIBILITIES

### CARE AND COMMUNICATION

- To understand that verbal or physical abuse of staff, patients and visitors will not be tolerated.
- To be respectful of other patients, visitors, and staff.
- To take part in your treatment plan to the best of your ability.
- To understand that a treatment you ask for may not be provided if it is medically or ethically inappropriate.
- To understand that the needs of other patients may sometimes be more urgent than your own.
- To understand that EAFHT promotes student and resident placements, supervised students/residents will be helping to care for you.
- To be honest about your personal health information.

### CHOICE


- To give valid Power of Attorney documentation to your health care team, in case you become incapable of making treatment decisions for yourself.
- To take part in your discharge planning and in your transfer to another facility if you require an alternate level of care.
- To keep track of and look after your personal property and valuables.




# PATIENTS FIRST

Take charge of your health care. Let's work together.

## Contact Information

 (705) 862-7991

 [www.erhhc.on.ca](http://www.erhhc.on.ca)

 801 McKinnon Drive, Espanola ON P5E 1T2