

Maple Street Clinic  
109 E. Maple  
Gillespie, IL 62033  
217-839-1526 – Medical/Behavioral  
217-839-4110 – Dental



Morgan Street Clinic  
1115 Morgan Street  
Carlinville, IL 62626  
217-854-3692 – Medical/Behavioral  
217-854-6823 – Dental

**Our staff looks forward to treating you and meeting your healthcare needs!**

**I acknowledge that I have read and understand the Patient Rights and Responsibilities.**

Patient Name (please print): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

***Please return this page to the front desk.***

***Remainder of page intentionally left blank.***

## ***Patient Rights and Responsibilities***

Maple Street and Morgan Street Clinic (MSC) patients are encouraged to read this document to understand your rights and responsibilities as a patient. If you have any concerns about your rights or responsibilities, please ask any staff member to contact an administrator directly for assistance.

**Interpretation Services will be provided upon request.**

### **Your Patient Rights**

#### **Civil Rights**

1. Patients have the right to considerate and respectful treatment in an environment free from harm.
2. Patients seeking services shall not be denied, suspended or terminated from services or have services reduced for exercising any of their rights.

#### **Discrimination**

1. Patients have the right to receive services regardless of age, sex, race, creed, color, religion, ethnic origin, ancestry, marital status, physical or mental disability, gender preference, sexual orientation, disability, veteran status or criminal record.
2. Patients may receive services without regard to one's ability to pay; if you are unable to pay the full fee for services, a sliding fee scale is available to you. You may examine and receive an explanation of your bill of services.
3. No recipient of services is presumed legally incompetent except as determined by a court.
4. Patients have the right to present any complaint or grievance on matters pertaining to services received, or any perceived or actual violation of rights.

#### **Treatment**

1. A recipient of services shall be provided with adequate and humane care and in the least restrictive environment, pursuant to an individualized service plan. When appropriate, a recipient's nearest kin or guardian shall be involved in the treatment/service plan.
2. Patients have the right to know of the variety of services that may be available and to participate in the planning of treatment.
3. Patients may refuse treatment at any time, and patients have the right to be informed of the consequences resulting from the refusal of treatment.
4. Seclusion will not be used as a means of intervention for any recipient services.

#### **Confidentiality**

1. Patients will receive confidential treatment; all clinical records and client information are protected by law, regulations and center policies. For the purposes of funding, certification, licensure, audit, research or other legitimate purpose, your clinical record may be used by the person conducting the review to the extent that is necessary to accomplish the purpose of the review.
2. Patient information released to or requested from other sources requires your written consent. Patient records can be subpoenaed by court order and do not require signatures for release of information.
3. Patients have the right to review and obtain a copy of their clinical record in accordance with MSC's policy.

### **Your Patient Responsibilities**

1. Give full information, to the best of your knowledge, about your condition, including symptoms, medications, previous health, etc.
2. Ask questions if you do not clearly understand information or instructions about your care and treatment.

3. Follow the treatment plan coordinated by your physician.
4. Follow through with all referrals given to you for other physician's care.
5. **Notify us immediately of any Emergency Room visits or Hospitalizations** by calling 1-217-839-1526 (leave a message if necessary).
6. **Be responsible for your own actions if you refuse treatment or refuse to follow your treatment instructions and directions. If you refuse to follow the treatment guidelines we provide, we will help you find another physician that may be more effective for you.**
7. **Be patient and be calm. Plan to arrive at the clinic 15 minutes earlier than your appointment time to allow time to complete paperwork that is needed.**
8. MSC has the right to terminate you from care should you routinely not show-up for appointments or not treat the MSC staff with courtesy and respect.
9. Ensure that payment for your care is made promptly and in full; this means understanding your insurance coverage and its limits and any added responsibilities you may have.
10. Follow MSC rules and regulations.
11. Be considerate of and respectful to your caregivers, other patients and visitors to the health center
12. Do not possess or use alcoholic beverages or "recreational" drugs in the Maple Street/Morgan Street Clinics or on MCPHD property.
13. Do not have firearms or other weapons in the Maple Street/Morgan Street Clinics or on MCPHD property.
14. Only certified Service Dogs are allowed in Maple Street/Morgan Street Clinics or on MCPHD property.

### **MSC Responsibilities**

1. In the case of suspected child abuse or neglect, MSC is required by the Abused and Neglected Child Reporting Act to report any suspected incidents of neglect or abuse. MSC also has the ethical obligation to report suspected maltreatment of senior citizens or adults.
2. If at any time patients present a clear and present danger to yourself or to others, MSC's staff may release information that is required to protect you or others.
3. MSC may restrict or terminate delivery of services to patients who have been evaluated and determined as posing a serious physical threat to staff or others.
4. **We will contact you as soon as your results are available. Please, do not call the clinic repeatedly for results.**
5. **Our staff is consistently busy with patients and has a set schedule to work from. Do not expect to have immediate access to a physician, dentist, or other staff when you walk in or call on the phone.**
6. The MSC staff will work with you on your most urgent health care needs first. We will not always solve all of your health care needs with one visit. If you have chronic illnesses, expect to visit your doctor at MSC on a regular basis.
7. We will schedule you for your next regular check-up during your visit. Remember, the one sure way to stay healthier is to take good care of yourself, keep your medical appointments, and follow your health care team's advice for maintaining your health!

### **Your Comments and Concerns Are Important to MSC**

We want to hear from you regarding your satisfaction with our care and services, as well as suggestions for improvement. We conduct random patient surveys on an ongoing basis. If you are asked to participate during a visit, please consider taking the time to complete a survey for us. Your comments will help us improve the way we provide care. We also welcome and encourage your comments at any time. All information is used to support our efforts to **continually improve the quality** of your care and safety. Should you have a concern that is unresolved, you have the right to contact the Illinois Department of Financial & Professional Regulations, 320 West Washington Street, Springfield, IL 62786 or by calling 1-888-473-4858.

**Should you have questions or concerns regarding your visit to the Maple Street Clinic or the Morgan Street Clinic, please call our Office Manager at 217-839-4141. Please leave your name, phone number, the day and time you called, and a short message regarding your concern. Our Office Manager will return your call as quickly as possible.**

### **After Hours Contacts**

*If you need assistance after business hours, please contact our after-hours service at 217-839-1526 or 1-877-543-7751. The after-hours service will assess your call and direct in to the correct person. You will be told that you will be receiving a call from a staff member from MSC or for non-emergencies, the after-hours service will hold your call for the office the following business day.*

### **Current Office Policies for the Maple Street Clinic and the Morgan Street Clinic**

**Appointments:** please arrive on time for your appointments. If you are more than 15 minutes late for an appointment, you may be required to reschedule your appointment.

Our waiting room has limited space; please only bring those who will be seen at the appointment. Children are not allowed in the treatment room while their parent is with the dentist and are not permitted to remain unattended in the waiting room area. **Parents are expected to remain in the waiting room area while their children are with the dentist. IF you have any questions or concerns, please speak with the dental assistant.**

**Appointments for Dental and Behavior Health:** Due to the high volume of patients wanting appointments for these services, we require that you confirm your appointment no later than 2 business days before your scheduled appointment time. If your appointment is not confirmed 2 business days before your scheduled appointment time, we will cancel your appointment.

**We have a strict cancellation/no show policy. All cancellations must be made at least 24 hours before your appointment time.** If you cancel three times within six months or if you fail to cancel at least 24 hours in advance or if you do not show up without notifying us twice within 6 months, you will be placed on the Sit and Wait list. You will be notified by mail of your placement onto the Sit and Wait list. Placement on the Sit and Wait list means that you will not be able to schedule appointments for six months. Any appointments you had scheduled will be cancelled. You will be encouraged to come on Tuesdays and Wednesdays from 9 a.m. to 1 p.m. to sit and wait to see if the dentist has an opening to see you. All appointments must be confirmed at least 2 business days before your appointment date. If your appointment is not confirmed, your appointment will be canceled, and that time will be given to the next patient in line.

**Messages:** When you call to speak with the dental or medical staff, please leave a message if prompted to do so. Please leave your name, phone number, date of birth, and a brief message and we will return your call as soon as possible. Your phone call will be returned in the order in which it was received.

**Insurance:** All eligible patients must have their current insurance card to be seen by our medical or dental staff. If we cannot confirm eligibility, we may need to reschedule your appointment.

**Co-pays:** Co-pays are expected at the time of service. To check to see if you have a co-pay, look at the front side of the insurance card. You may be required to reschedule if you do not have the co-pay.

**Signed consent to treatment:** Our office requires a signed consent form from a parent/legal guardian that gives us permission to perform treatment on the child or adult patients who have a power of attorney or guardian assigned. **Guardians must accompany patients to initial Dental exams, recall Dental appointments and initial appointment with Medical and Behavior Health Staff.** However, another adult may accompany minors for subsequent visits if permission is stated on the consent form.

**Treatments not performed:** At this time, the Maple Street/Morgan Street Dental Clinics are not able to provide the following services:

Dental - Implants and orthodontics

Medical – Court Ordered Substance Abuse Evaluation