



Patient Rights and Responsibilities

Vitalité Health Network is committed to providing quality health care services that are responsive to your needs and those of your family.

Because you play an important role on your health care team, we encourage you to become familiar with your rights and responsibilities, and refer to the Code of Ethics of the Network.

Care and services

Rights

We will offer you quality health care and services in the official language of your choice.

We will inform you on the care and services available, where to obtain them, how to access them, and the expected wait time.

We want you to participate in the decisions about your care and services. In the event you refuse care or services, we will respect your choice while trying to understand your reasoning and ensuring that we meet the needs you have expressed.

Responsibilities

You are a partner in your care and services. You will participate actively with staff, medical professionals and students to assess and improve your health within a climate of trust.

You will follow the directives received about the various aspects of your care. You will participate in the care and services offered to you by talking openly about yourself, your life experience and your needs, while participating in your treatment plan.

You will report to your appointments on time and notify us in the event of absence.

Dignity and respect

Rights

We will offer you the most appropriate care and services to meet your needs, taking into account your personal characteristics and your preferences. We will treat you with respect, courtesy, understanding and compassion. We will respect your dignity and needs while providing you with a safe care environment.

We respect your autonomy and your knowledge of your health condition and we acknowledge you as a partner in care. From this stems the importance of your participation in the care and services provided to you. If your condition does not allow you to make decisions, a designated person, decision-maker or next of kin can do so on your behalf, respecting your advance medical directives and your best interests.

We recognize your need to be surrounded and supported by your loved ones and family caregivers.

When you are vulnerable, we commit to being even more attentive to your needs.

We will respect your privacy and treat your information confidentially, in accordance with legal limitations. Therefore, your information, including the fact that you are here and the reason for your visit, is confidential information that is shared only with the people you have authorized to access it and the people who are providing care and services to you.

Responsibilities

You will be polite and understanding toward other patients, staff, medical professionals, students and volunteers by adopting respectful, non-threatening behaviour toward them.

You will discuss with your physician, care team, family and loved ones your wishes with respect to the care and services that you wish to receive in the event you could no longer make decisions yourself.

You will provide us with a copy of your advance health care directives (living will) as well as a copy of your power of attorney for personal care so that we can respect them.

At the end of life, we will respect your dignity by supporting you in this phase of your life.



Information

Rights

We will give you all the information required so you can consent to your care and services, especially the alternatives and the potential consequences of refusal. When possible, we will provide you with this information in writing so that you can refer to it. We will ensure that you understand the information provided, so that you may give your free and informed consent, without obligation.

We will respect your decision for a person of your choice to accompany you when you receive information or begin the process of receiving care or services.

We acknowledge your loved ones as partners in care. The involvement of your loved ones in your decisions about your treatments and in your follow-up is important for your overall wellness. However, we will respect your preference regarding their level of participation.

Responsibilities

You will share information on your health (illnesses, hospitalizations, medications, etc.) that can help us determine the care and services you need.

Informed consent requires a communication process between you or your substitute decision-maker and a member of the health care team. Following this discussion, you will be in a position to accept or refuse a given intervention or procedure.

Consent is informed if, before accepting treatment, you have received the information required to make an informed decision and you have received responses to your requests for additional information about treatment.

In the event your change your mind or decide to refuse care, services or treatment, please inform us.



You are an important member of your health care team and we are here to help!

If you have any questions or concerns about the care or services you received or are receiving or regarding your rights or responsibilities, please let us know. We will suggest first discussing the matter with a member of your care team, including the unit manager.

If you do not receive a satisfactory response to your questions or concerns or if you would like to file a complaint, you can contact the Quality and Patient Safety Department for your area:

- Moncton and area
 506-862-3767
- Edmundston and area 506-739-2221
- Campbellton and area 506-789-5023
- Bathurst and Acadian Peninsula 506-544-2057
- Toll-free number (elsewhere in Canada) 1-877-286-1311
- Email: Qualite.Quality@vitalitenb.ca

You may view the Code of Ethics online:

www.vitalitenb.ca/sites/default/files/documents/codeofethics.pdf

