



521 4<sup>th</sup> Street Havre Montana 59501 • Phone: 406-395-4305 • Fax: 406-395-5643 • [www.bullhook.com](http://www.bullhook.com)

---

## POLICY

### PATIENT RIGHTS AND RESPONSIBILITIES

2011

A copy of the Patient Rights and Responsibilities will be posted in the reception area. The staff will offer patient complaint forms to patients according to Patient Grievance Policy 2009.

#### **BULLHOOK COMMUNITY HEALTH CENTER PATIENT RIGHTS:**

Bullhook Community Health Center believes your rights and responsibilities are an important part of providing quality health care. We consider you a partner in your health care. When you are well informed, participate in treatment decisions, and communicate openly with your doctor and other health professionals, you help make your care as effective as possible.

#### **YOUR RIGHTS AS A PATIENT OF BULLHOOK COMMUNITY HEALTH CENTER:**

1. You have the right to receive appropriate care, regardless of race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, genetic information, disability or veteran status and ability to pay.
2. You have the right to considerate and respectful care.
3. You have the right to participate in the development and implementation of your plan of care. You or your representative has the right to make informed decisions regarding your care. This includes being informed of your health status, being involved in care planning and treatment, and being able to request or refuse treatment.
4. You have the right to personal privacy to the extent practical while receiving treatment or care.
5. You have the right to receive care in a safe setting.
6. You have the right to be free from all forms of abuse or harassment.
7. You have the right to the confidentiality of your medical records.
8. You have the right to access information contained in your medical records within a reasonable time frame.
9. You have the right to request a consultation with another health care provider, but you may be responsible for payment for this service.
10. You have the right to be informed about Bullhook Community Health Center's mechanism for the initiation, review, and resolution of you concerns/complaints.

Contact: Bullhook Community Health Center  
521 4<sup>th</sup> Street  
Havre, MT 59501

**PATIENT REPONSIBILITIES:**

You also have responsibilities that are an equally important part of providing quality health care.

**YOUR REPONSIBILITIES AS A PATIENT OF BULLHOOK COMMUNITY HEALTH CENTER:**

1. You are responsible for following clinic rules and regulations affecting patient care and conduct.
2. You are responsible for providing, to the best of your ability, a complete and accurate medical history.
3. You are responsible for making it known whether you clearly comprehend a contemplated course of action and the things you are expected to do.
4. You are responsible to be considerate of the rights of other patients, clinic personnel and the treatment of clinic property.
5. You are responsible for providing the clinic with accurate and timely information concerning your income and for meeting your financial responsibilities to the best of your ability.

**If you have any questions about your Rights and Responsibilities as a patient of Bullhook Community Health Center, you can ask your nurse, doctor, or case manager.**

  
 \_\_\_\_\_  
 CHIEF EXECUTIVE OFFICER

Date: 2-12-18

  
 \_\_\_\_\_  
 CHAIR, BOARD OF DIRECTORS

Date: 2/12/2018

Date first adopted	08/18/2010
Date Revised/QI Board approval	08/18/2010, 02/25/2015, 3/22/2016, 01/31/2018
New date adopted/Board of Directors approval	08/27/2010, 03/09/2015, 4/11/2016, 02/12/2018