PATIENTS' BILL OF RIGHTS AND RESPONSIBILITIES

PUBLIC HEALTH CLIENTS BILL OF RIGHTS/RESPONSIBILITIES

As a Public Health client you have the right to:

- 1. Be given information about your rights and responsibilities for receiving health care.
- 2. Receive a timely response regarding your request for health care.
- 3. Be given information of the Public Health policies and procedures and charges for services, ncluding your eligibility for third party reimbursement.
- 4. Be given appropriate and professional quality health care services without discrimination against your race, creed, color, religion, sex, national origin, sexual preference, handicap, or age.
- 5. Be treated with courtesy and respect by all who provide health care services to you.
- 6. Be free from physical and mental abuse and/or neglect.
- 7. Be given proper identification by name and title of everyone who provides health care services to you.
- 8. Be given the necessary information so you will be able to give informed consent for your treatment prior to the start of any treatment.
- Be given complete and current information concerning your diagnosis, treatment, alternatives, risks and prognosis as required by your physician's legal duty to disclose, in terms and language you can reasonably be expected to understand.
- 10. A plan of health care that will be developed to meet your unique health care needs.
- 11. Participate in the development of your health care plan.
- 12. Be given as assessment and update of your developed health care plan.
- 13. Be given data privacy and confidentiality.
- 14. Review your clinical record at your request.
- 15. Be given information regarding anticipated transfer of your health care to another health care facility and/or termination of health care services to you.
- Voice grievance with and/or suggest change in health care services and/or staff without being threatened, restrained, and discriminated against.
- 17. Refuse treatment within the confines of the law.
- 18. Be given information concerning the consequences of refusing treatment.

As a Public Health client you have the responsibility to:

- 1. Give accurate and complete health information concerning your past illnesses, hospitalization, medication, allergies, and other pertinent items.
- 2. Assist in developing and maintaining a safe environment.
- 3. Inform the Health Care Agency when you will not be able to keep a visit.
- 4. Participate in the development and update of your health care plan.
- 5. Adhere to your developed/updated health care plan.
- 6. Request further information concerning anything you do not understand.
- 7. Give information regarding concerns and problems you have to a health care agency staff member.

I have reviewed and understand my bill of rights/responsibilities as described above.	
SIGNATURE OF CLIENT	DATE OF SIGNATURE
SIGNATURE OF WITNESS	DATE OF SIGNATURE