

# Patient Rights and Responsibilities

## PATIENT RIGHTS

BCH respects the right to treatment and care of all our patients and their families. You or your designated proxy have the right to:

### Decision Making

- Be informed of your rights before patient care is given or discontinued, whenever possible
- Have persons of your choice and your physicians promptly notified of admission
- Receive complete and current information regarding your health status including diagnosis, treatment, risks and benefits of treatment, serious side effects, alternatives to treatment and consequences of not receiving treatment in terms you can understand
- Participate in care planning, treatment and discharge arrangements, and costs
- Give or withhold informed consent regarding care and treatment
- Participate in managing your pain effectively
- Request a specific treatment
- Have a family member, friend or other individual be present for emotional support during the course of your stay. You will be informed if a restriction or limitation is in place for your health or safety.
- Refuse or discontinue a treatment to the extent permitted by law and to be informed of the consequences of such refusal
- Have information about the outcomes of care, treatment and services that have been provided, including unanticipated outcomes
- Request a second opinion
- Choose or change your health care provider
- Create an advance directive, which includes your wishes relating to end-of-life decisions, and be informed if these cannot be honored
- Donate organs
- Be protected and have your rights respected during research, investigation, and clinical trials involving human subjects
- Consent to records or films made for purposes other than patient care
- Receive care and/or referral according to the urgency of your situation. When medically stable, you may be transferred to another facility after the need has been fully explained.

### Quality of Care

- Respectful treatment which recognizes and maintains your dignity, values, beliefs and preferences
- Care in a safe setting
- Be free from mental, physical, sexual and verbal abuse, neglect and exploitation
- Know who is primarily responsible for your care and receive adequate information about the professional status of person(s) responsible for the delivery of your care, treatment and services
- Pastoral and other spiritual support services
- Access to protective and advocacy services
- Information about continuing health care requirements following discharge

### Confidentiality and Privacy

- Personal privacy including the right to be interviewed and examined in surroundings designed to assure reasonable audio and visual privacy
- Personal information being shared only with those who are involved in your health care
- Confidentiality of your Protected Health Information and access to disclosures of your information.

### Access to Medical Records

- Review and get a copy of your medical records at any time (behavioral health records are an exception)
- Request an amendment to your medical record



# Patient Rights and Responsibilities

## Grievance Process

- Voice a complaint to your health care providers and administrators without fear of reprisal
- Contact the Patient Representative to file a complaint/grievance and/or access protective and advocacy services. (At Boulder Community Health dial 303-415-7054, at Boulder Heart dial 303-415-3813, for Physician Clinics contact the Senior Administrator at 303-415-7855 and for Boulder Community Health Administration contact 303-415-7430)
- Receive a timely response with the results of your complaint. Unresolved complaints are directed to a hospital's vice president who responds within 7 days. Appeals may be made at any time to the Colorado Department of Public Health and Environment, 4300 Cherry Creek Drive South, Denver, CO 80246-1530, 303-692-2000 or 303-692-2827; the Joint Commission Office of Quality Monitoring, [complaint@jointcommission.org](mailto:complaint@jointcommission.org), 1 Renaissance Boulevard, Oakbrook, IL 60181, 800-994-6610; or to Colorado Department of Regulatory Agencies (DORA), Division of Registration, 1560 Broadway, Suite 1350, Denver, CO 80202, [www.dora.state.co.us](http://www.dora.state.co.us).
- Grievances involving behavioral health services should be directed to the Colorado Department of Human Services Division of Behavioral Health at 3824 West Princeton Circle, Denver, CO 80236-3111, 303-866-7400 or 800-811-7648
- Request an ethics consultation if there are questions of value judgments or moral conduct
- Grievances involving discrimination on the basis of disability, or retaliation under Section 504 or Title II of the ADA, may file a grievance by contacting the Patient Representative who is also the BCH 504/ADA Coordinator or by contacting the Office for Civil Rights, Region VIII, U.S. Department of Health and Human Services, 1961 Stout Street, Room 1426, Denver, CO 80294, 303-844-2024, Fax 303-844-2025, TDD 303-844-3439.

## Accommodations

- Interpreters and/or communication tools to assist language needs tailored to age, languages and understanding
- Obtain information as to the existence and location of services, activities, and facilities that are accessible to and usable by all interested parties.
- Request reasonable accommodations

## Seclusion and Restraints

- Be free of any sort of restraint unless medically necessary
- Be free from seclusion or restraint for behavioral management unless there is a need to protect your physical safety or the safety of others

## Billing

- An itemization of your bill and charges within 7 days of your request

## Psychotherapy

- I understand that if seen by a psychologist, counselor or social worker at BCH, I have the right to receive information about that person's credentials, methods, duration of the therapy and fee structure. I understand that I may seek a second opinion or terminate therapy at any time. I understand information I may provide in counseling is confidential and exceptions that arise during the therapy will be discussed with me. Sexual intimacy within a professional relationship is never appropriate and should be reported to the State Grievance Board at 1560 Broadway, Suite 1550, Denver, CO 80202 or 303.894.7855.

## PATIENT RESPONSIBILITIES

You and your representative(s) have the responsibility to:

### Provide Information

- Provide accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other health-related matters
- Report perceived risks in your care and unexpected changes in your condition
- Understand your treatment plan, ask questions when needed
- Provide accurate and updated information for insurance and billing

### Involvement

- Actively participate in your treatment by following your recommended treatment plan
- Express any concerns about your ability to follow the treatment plan
- Accept consequences of outcomes if you do not follow the treatment plan
- Speak up about concerns you may have about the quality of your care and treatment

### Respect and Consideration

- Act in a respectful and considerate manner toward health care providers, other patients and visitors. Physical or verbal threats are not tolerated
- Follow the hospital's rules and regulations
- Respect the property of others
- Be mindful of noise levels

### Insurance and Billing

- Know the extent of your insurance coverage
- Know your insurance requirements such as preauthorization, deductibles and co-payments
- Call the hospital's billing office with questions or concerns
- Fulfill your financial obligations as promptly as possible