FACULTY PRACTICE GROUP – Ambulatory Operations STANDARDS AND GUIDELINES		UCLA Health System
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PURPOSE:

To inform staff of the rights and responsibilities of patients receiving care at our facility.

POLICY:

As a patient of UCLA Health System, you have the right to:

- Considerate and respectful care, in an environment that preserves dignity and contributes to a positive self-image. You have the right to respect for your personal values and beliefs and to access pastoral care to meet your spiritual needs.
- Request the services of an interpreter if needed, at no cost to you.
- Have a family member or other representative of your choosing and your physician notified promptly of your admission to the hospital.
- Know the name of the physician/provider who has primary responsibility for coordinating your care and the names and professional relationships of other physicians and non-physicians who will see you.
- Receive information about your health status, course of treatment, prospects for recovery, and outcomes of care (including unanticipated outcomes) in terms you can understand. You have the right to participate in the development and implementation of your plan of care. You have the right to participate in ethical questions that arise in the course of your care, issues of conflict resolution, withholding resuscitative services, and forgoing or withdrawing life-sustaining treatment.
- Participate actively in decisions regarding your medical care, and receive as much information about any proposed treatment or procedure as you may need in order to give informed consent or to refuse a course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved, alternate courses of treatment or non-treatment and the risks involved in each, and the name of the person who will carry out the procedure or treatment.
- Request or refuse treatment, to the extent permitted by law. However, you do not have the right to demand inappropriate or medically unnecessary treatment or services and to leave the health facility against the advice of physicians, to the extent permitted by law.

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 Be advised if the physician/provider proposes to engage in or perform research and clinical trials affecting your care or treatment, you have the right to refuse to participate in such research projects and your decisions will not affect your right to receive care.

- Reasonable responses to any reasonable requests made for service.
- Have an appropriate assessment and management of your pain, information about pain and pain relief measures, and participate in pain management decisions. You may request or reject the use of any or all modalities to relieve pain, including opiate medication if you suffer from severe chronic intractable pain. The doctor may refuse to prescribe the opiate medication, but if so, must inform you that there are physicians who specialize in the treatment of severe chronic intractable pain with methods that include the use of opiates.
- Formulate advance directives. You have the right to give instructions about your own healthcare. You also have the right to name someone else to make decisions for you, including designating a health care decision-maker. You may designate a decision-maker if you wish to have someone else make treatment decisions for you or in the event you become incapable of understanding a proposed treatment or become unable to communicate your wishes regarding care. Physicians/providers who provide care in the health facility shall comply with these directives. All patients' rights apply to the person who has legal responsibility to make decisions regarding medical care on your behalf.
- Have personal privacy respected. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly.
- You have the right to be told the reason for the presence of any individual. You have the right to have visitors leave prior to an examination and when treatment issues are being discussed.
- Confidential treatment of all communications and records pertaining to your care.
 Except in psychiatry, basic information may be released to the public unless you request otherwise. Written authorization shall be obtained before medical records are made available to anyone not directly concerned with your care, except as otherwise required or permitted by law.
- Access information contained in your records within a reasonable time frame, except in certain circumstances specified by law.
- Receive a written "Notice of Privacy Practices" that explains how your protected health information (PHI) will be used and disclosed.
- Receive care in a safe setting, free from abuse or harassment. You have the right to access protective and advocacy services including notifying government agencies of neglect or abuse.

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 Be free from physical or mental abuse, and corporal punishment. Be free from sexual and verbal abuse, neglect, and exploitation. Also, to be free from restraint or seclusion of any form, imposed as a means of coercion, discipline, convenience, or retaliation by staff.

- Receive reasonable continuity of care and know in advance the time and location of your appointments, as well as the identity of the persons providing the care.
- Be informed by the physician/provider of continuing health care requirements following discharge from the hospital. Upon your request, a friend or family member may also be provided this information.
- Know which rules and policies apply to your conduct while a patient.
- Designate visitors of your choosing, if you have decision-making capacity, whether or not the visitor is related by blood or marriage, unless:
 - No visitors are allowed, or you have told the health facility staff that you no longer want a particular person to visit.
 - The health facility reasonably determines that the presence of a particular visitor would endanger the health or safety of a patient, a member of the staff or other visitor to the health facility, or would significantly disrupt the operations of the facility.
 - However, the health facility may establish reasonable restrictions upon visitation, including restrictions upon the hours of visitation and number of visitors.
- Have your wishes considered, if you lack decision-making capacity, for the purposes of determining who may visit. At a minimum, the hospital shall include any person living in your household. The method of that consideration will be disclosed in the hospital policy on visitation.
- Examine and receive an explanation of your medical bill regardless of the source of payment.
- Exercise these rights without regard to sex, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation, marital status, or the source of payment for care.
- Express concerns or complaints about your care with the assurance that the quality of your care or future access to care will not be compromised.
- You have the right to expect a reasonable and timely response to your concerns.
- You have the right to file a grievance with UCLA Hospital System by calling

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- UCLA Medical Center Patient Relations (310) 825-7271
- Outpatient/Ambulatory Care (310) 794-1276
- Santa Monica-UCLA Medical Center (310) 319-4670
- UCLA Neuropsychiatric Hospital (NPH) Ombudsperson (310) 825-6962
- You have a right to be informed of the outcome of the grievance investigation.
- File a grievance with the Los Angeles County Department of Health Services by calling (800) 228-1019. You may also file a grievance by writing to:
 - Los Angeles County Department of Health Services, Los Angeles District Office
 5555 Ferguson Drive, Third Floor, City of Commerce, CA 90022
 - or with the Joint Commission on Accreditation of Healthcare Organizations by faxing (630) 792-5636 or emailing complaint@jcaho.org.
 - or write to: Division of Accreditation Operations, Office of Quality Monitoring-Joint Commission on Accreditation of Healthcare Organizations-One Renaissance Blvd.-Oakbrook Terrace, Il 60181