

Patient rights and responsibilities



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

- Considerate and respectful care, and to be made comfortable.
- Have your cultural, psychosocial, spiritual, and personal values, beliefs and preferences respected.
- Have a family member (or other representative of your choosing) and your own physician notified promptly of your admission to the hospital.
- Know the name of the licensed health care practitioner acting within the scope of his or her professional licensure who has primary responsibility for coordinating your care, and the names and professional relationships of physicians and nonphysicians who will see you.
- Receive information about your health status, diagnosis, prognosis, course of treatment, prospects for recovery and outcomes of care (including unanticipated outcomes) in terms you can understand. You have the right to effective communication and to participate in the development and implementation of your plan of care.
- Participate in ethical questions that arise in the course of your care, including issues of conflict resolution, withholding resuscitative services, and forgoing or withdrawing life-sustaining treatment, or to request an ETHICS consult by calling 310-794-6219 or paging ID# 38442.
- Make decisions regarding 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 nontreatment 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. You have the right to leave the hospital even against the advice of members of the medical staff, to the extent permitted by law.
- Be advised if the hospital/licensed health care practitioner acting within the scope of his or her professional licensure proposes to engage in or perform human experimentation affecting your care or treatment. You have the right to refuse to participate in such research projects.
- Reasonable responses to any reasonable requests made for service.
- Appropriate assessment and management of your pain, information about pain and pain relief measures and participation 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 pain with methods that include the use of opiates.
- Formulate advance directives. This includes designating a decision-maker if you become incapable of understanding a proposed treatment or become unable to communicate your wishes regarding care. Hospital staff and practitioners who provide care in the hospital shall comply with these directives. 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. Privacy curtains will be used in semiprivate rooms.
- Confidential treatment of all communications and records pertaining to your care and stay in the hospital. You will receive a separate "Notice of Privacy Practices," which explains your privacy rights in detail and tells how we may use and disclose your protected health information.
- Receive care in a safe setting, free from mental, physical, sexual or verbal abuse and neglect, exploitation or harassment. You have the right to access protective and advocacy services, including notifying government agencies of neglect or abuse.
- Be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience or retaliation by staff.

- Reasonable continuity of care and to the degree feasible to 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, or delegate of the physician, of continuing health care requirements and options following discharge from the hospital. You have the right to be involved in the development and implementation of your discharge plan. Upon your request, a friend or family member may be provided this information also.
- Know which hospital rules and policies apply to your conduct while you are a patient.
- Designate a support person as well as visitors of your choosing, if you have decision-making capacity, whether or not the visitor is related by blood, marriage or registered domestic partner status unless:
 - No visitors are allowed.
 - The facility reasonably determines that the presence of a particular visitor would endanger the health or safety of a patient, a member of the health facility staff or other visitors to the health facility, or would significantly disrupt the operations of the facility.
 - You have told the health facility staff that you no longer want a particular person to visit.

However, the health facility may establish reasonable restrictions upon visitation, including restrictions upon the hours of visitation and number of visitors. The health facility must inform you (or your support person, where appropriate) of your visitation rights, including any clinical restrictions or limitations. The health facility is not permitted to restrict, limit or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation or disability.

- Have your wishes considered, if you lack decision-making capacity, for the purposes of determining who may visit. The method of that consideration will comply with federal law and be disclosed in the hospital policy on visitation. At a minimum, the hospital shall include any persons living in your household and any support person pursuant to federal law.
- Examine and receive an explanation of the hospital's bill regardless of the source of payment.

- Exercise these rights without regard to sex, economic status, educational background, race, color, age, religion, ancestry, national origin, sexual orientation, gender identity/ expression, disability, medical condition, marital status, registered domestic partner status, genetic information, citizenship, primary language, immigration status (except as required by federal law) or the source of payment for care.
- File a grievance. If you want to file a grievance with UCLA Health, you may do so in writing, or by calling:
 - Ronald Reagan UCLA Medical Center, Office of the Patient Experience (Inpatient/Ambulatory Care): 310-267-9113
 - UCLA Medical Center, Santa Monica, Office of the Patient Experience (Inpatient/Ambulatory Care): 424-259-9120
 - Stewart and Lynda Resnick Neuropsychiatric Hospital at UCLA, Patient Relations: 310-267-9092

The grievance committee will review each grievance and provide you with a written response within 30 days. The written response will contain the name of a person to contact at the hospital, the steps taken to investigate the grievance, the results of the grievance process and the date of completion of the grievance process. Concerns regarding quality of care or premature discharge will also be referred to the appropriate Utilization and Quality Control Peer Review Organization (PRO).

- File a complaint with the California Department of Public Health (CDPH) regardless of whether you use the hospital's grievance process, by calling 916-552-8700 or Toll Free: 800-236-9747, or writing to: CDPH, Health Facilities Inspection Division, Los Angeles District Office, 3400 Aerojet Avenue, Suite 323, El Monte, CA 91731
- You may file a grievance with The Joint Commission (TJC) by calling 800-994-6610, faxing 630-792-5636 or emailing: patientsafetyreport@jointcommission.org. You can also write to: Office of Quality and Patient Safety, The Joint Commission, One Renaissance Boulevard Oakbrook Terrace, IL 60181
- File a grievance regarding the conduct of a physician by calling the Medical Board of California at 800-633-2322 or 916-263-2382, or by fax 916-263-2435 or writing to: Medical Board of California, Central Complaint Unit 2005 Evergreen Street, Suite 1200, Sacramento, CA 95815.

As a patient of UCLA Health, you have the following responsibilities:

Health care is a shared responsibility. Engaging in discussion, asking questions, seeking information and exploring alternatives improves communication and understanding of one's health and treatment.

- To respect the rights and property of other patients and UCLA Health personnel. Just as you want privacy, a quiet atmosphere and courteous treatment, so do other patients. You have the responsibility to follow the organization's rules and regulations, limit your visitors, follow smoking regulations, and use the telephone, television and lights courteously so that you do not disturb others.
- To report to your physician, and other health care professionals caring for you, accurate and complete information to the best of your knowledge about present complaints, past illness, hospitalizations, medications, unexpected changes in condition and other matters relating to your health, as well as to provide a copy of your advance directive or POLST to be filed in your medical record, if applicable.
- To seek information about your health and what you are expected to do. Your health care provider may not know when you're confused or uncertain, or just want more information. If you don't understand the medical words used, ask for a simpler explanation.
- The most effective plan is the one to which all participants agree and that is carried out exactly. It is your responsibility to tell your health care provider whether or not you can and want to follow the treatment plan recommended for you.
- To ask your health care provider for information about your health and health care. This includes following the instructions of other health team members, including nurses and physical therapists who are linked to this plan of care. The organization makes every effort to adapt a plan specific to your needs and limitations.
- To continue your care after you leave UCLA Health, including knowing when and where to get further treatment and what you need to do at home to help with your care.
- To accept the consequences of your own decisions and actions, if you choose to refuse treatment or not to comply with the care, treatment and service plan offered by your health care provider.

- To keep appointments with your health care provider. If you need to cancel an appointment, you should do so at least 24 hours before your appointment time.
- To ensure that your financial obligations for your health care are fulfilled by paying bills promptly. Late payments increase overall charges. You are responsible for working with your account representative to make payment arrangements and for providing the information necessary to determine how your hospital bill will be paid.
- To follow UCLA Health rules and regulations affecting patient care and conduct.
- To be considerate of UCLA Health facilities and equipment and to use them in such a manner so as not to abuse them.

If you have any questions regarding these Patient Responsibilities, please contact:

- Ronald Reagan UCLA Medical Center, Office of the Patient Experience (Inpatient/Ambulatory Care): 310-267-9113
- UCLA Medical Center, Santa Monica, Office of the Patient Experience (Inpatient/Ambulatory Care): 424-259-9120
- Stewart and Lynda Resnick Neuropsychiatric Hospital at UCLA, Patient Relations: 310-267-9092