



LOMA LINDA
UNIVERSITY
MEDICAL CENTER

LOMA LINDA UNIVERSITY MEDICAL CENTER OPERATING POLICY

CATEGORY: PATIENTS' RIGHTS

CODE: P-1

SUBJECT: PATIENTS' RIGHTS AND RESPONSIBILITIES

EFFECTIVE: 05/2018

REPLACES: 06/2015

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Philosophy:

LLUMC is committed to protecting and promoting each patient's rights. As part of this commitment, LLUMC shall advise each patient, or the patient's representative, of his/her rights. Patients shall not, under any circumstances, be asked to waive any of their rights as a condition of treatment. LLUMC shall inform each patient, or when appropriate the patient's representative, of the patient's rights in advance of furnishing or discontinuing patient care whenever possible.

Related policies:

[Communication with Patients who have Limited English Proficiency and/or Are Hearing, Speech, or Vision Impaired \(M-113\)](#)

[Patients Leaving Against Medical Advice \(M-131\)](#)

[Clinical Ethics Consultations \(M-138\)](#)

[Pain Management \(M-140\)](#)

[Patient Consent \(P-2\)](#)

[Code Status/Limitation of Treatment For Adults \(P-4\)](#)

[Emergency Treatment When Consent is Unobtainable \(P-8\)](#)

[Patients' Rights Regarding Advance Directives and Acceptance/ Refusal of Medical Care \(P-10\)](#)

[Conflict Resolution Regarding Patient Care \(P-12\)](#)

[Patient Complaints and Grievances \(P-13\)](#)

[Code Status/Limitation of Treatment For Patients Between Birth and The Eighteenth Birthday \(P-15\)](#)

[Protection of Patient Privacy \(P-16\)](#)

[Notice of Privacy Practices \(P-18\)](#)

[Communication with Patients Following an Unexpected Outcome, Adverse Event or Medical Error \(P-20\)](#)

[Important Message from Medicare \(P-21\)](#)

[Family/Representative/Personal Physician Notification of Admission \(P-22\)](#)

[Access Control for LLUMC Hospitals \(S-2\)](#)

[Sleeping and Waiting Accommodations for Patient Visitors \(OG V-3\)](#)

1. LLUMC patients shall have certain rights as stated below. LLUMC will provide (and explain if requested) the Patient's Rights in a language or manner that the patient and/or the patient's representative can understand.

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- 1.1 Considerate and respectful care, and to be made comfortable. The patient has the right to respect for cultural, psychological, spiritual, and personal values, beliefs and preferences.
- 1.2 Have a family member (or other representative of his/her choosing) and his/her own physician notified promptly of the patient's admission to LLUMC.
- 1.3 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 the patient's care, and the names and professional relationships of other physicians and non-physicians who will see him/her.
- 1.4 Receive information about health status, diagnosis, prognosis, course of treatment, prospects for recovery and outcomes of care (including unanticipated outcomes) in terms he/she can understand. The patient has the right to effective communication and to participate in the development and implementation of the plan of care. He/she has the right to participate in ethical questions that arise in the course of care, including issues of conflict resolution, withholding resuscitative services, and forgoing or withdrawing life-sustaining treatment.
- 1.5 Make decisions regarding medical care, and receive as much information about any proposed treatment or procedure as is needed 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.
- 1.6 Request or refuse treatment, to the extent permitted by law. However, this does not include the right to demand inappropriate or medically unnecessary treatment or services. He/she has the right to leave LLUMC even against the advice of members of the medical staff, to the extent permitted by law.
- 1.7 Be advised if the LLUMC/licensed health care practitioner acting within the scope of his or her professional licensure proposes to engage in or perform human experimentation affecting the patient's care or treatment, and the right to refuse to participate in such research projects.
- 1.8 Reasonable responses to any reasonable requests made for service.
- 1.9 Appropriate assessment and management of pain, information about pain, pain relief measures and to participate in pain management decisions. The patient may request or reject the use of any or all modalities to relieve pain, including opiate medication, if he/she suffers from severe chronic intractable pain. The doctor may refuse to prescribe

the opiate medication, but if so, must inform the patient that there are physicians who specialize in the treatment of pain with methods that include the use of opiates.

- 1.10 Formulate advance directives. This includes designating a decision maker in the case that he/she becomes incapable of understanding a proposed treatment or become unable to communicate wishes regarding care. LLUMC staff and practitioners who provide care in the hospital shall comply with these directives. All patient rights apply to the person who has legal responsibility to make decisions regarding medical care on the patient's behalf.
- 1.11 Have personal privacy respected. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. The patient has the right to be told the reason for the presence of any individual. He/she has the right to have visitors leave prior to an examination and when treatment issues are being discussed. Privacy curtains shall be used in semi-private rooms.
- 1.12 Confidential treatment of all communications and records pertaining to care and stay in LLUMC. The patient shall be given the "Notice of Privacy Practices" that explains the privacy rights in detail and how LLUMC may use and disclose protected health information.
- 1.13 Receive care in a safe setting, free from mental, physical, sexual or verbal abuse and neglect, exploitation or harassment. The patient has the right to access protective and advocacy services including notifying government agencies of neglect or abuse.
- 1.14 Be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience, or retaliation by staff.
- 1.15 Reasonable continuity of care and to know in advance the time and location of appointments as well as the identity of the persons providing the care.
- 1.16 Be informed by the physician, or a delegate of the physician, of continuing health care requirements and options following discharge from the hospital. The patient has the right to be involved in the development and implementation of the discharge plan. Upon the patient's request, a friend or family member may be provided this information also.
- 1.17 Know which hospital rules and policies apply to conduct while a patient.
- 1.18 Designate a support person as well as visitors of his/her choosing, if the patient has decision-making capacity; whether or not the visitor is related by blood, marriage, or registered domestic partner status unless:

- a. No visitors are allowed because of clinical or environmental reasons, which may include:
 - 1) The patient is undergoing care interventions,
 - 2) Infection control issues,
 - 3) Interference with the care of other patients.
- b. LLUMC reasonably determines that the presence of a particular visitor would endanger the health or safety of a patient, a member of LLUMC's staff, or other visitor to LLUMC, or would significantly disrupt the operations of LLUMC.
- c. The patient has told LLUMC staff that he/she no longer wants a particular person to visit.

NOTE: LLUMC may establish reasonable restrictions upon visitation, including restrictions upon the hours of visitation and number of visitors pursuant to the items above or to facilitate the operations of a specific location of care. LLUMC shall inform the patient (or support person, where appropriate) of his/her visitation rights, including any clinical restrictions or limitations. LLUMC does not restrict, limit, or otherwise deny visitation privileges on the basis of race, ethnicity, national origin, religion, sex, gender identity, sexual orientation, disability, or domestic partner status (reference Policy [Access Control for LLUMC Hospitals \(S-2\)](#)).

- 1.19 Have his/her wishes considered, if he/she lacks 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 LLUMC's policies on visitation. At a minimum, LLUMC shall include any persons living in the patient's household and any support person pursuant to state and federal law.
- 1.20 Examine and receive an explanation of LLUMC's bill regardless of the source of payment.
- 1.21 Exercise these rights without regard to sex, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation, gender identity, disability, medical condition, marital status, registered domestic partner status or the source of payment for care.
- 1.22 File a grievance. If the patient wants to file a grievance with LLUMC, he/she may do so by writing or by calling the following:

Patient Relations Specialist
Loma Linda University Medical Center
Patient Relations Department
11234 Anderson Street, Room 1120

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Loma Linda, CA 92354
(909) 558-4647

Email: patientrelations@llu.edu
Fax: (909) 558-0312

The Patient Relations Department shall review each grievance and provide a written response within seven (7) days (some grievances might require extended time for review [see Policy P-13], and the initial response shall include information as to when the final response is anticipated). The written response shall contain the name of the person to contact at LLUMC, 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 may also be referred to the appropriate Quality Improvement Organization (QIO). For Medicare beneficiaries, the patient has specific rights which are detailed in the "Important Message" which is provided on admission and prior to discharge.

- 1.23 File a complaint with the California Department of Public Health (CDPH) or the Office of Civil Rights (OCR), regardless of whether he/she uses LLUMC's grievance process.
2. LLUMC may not require individuals to waive their rights under 45 C.F.R. §160.306 *Complaints to the Secretary*, the Privacy Rule, or the Breach Notification Rule, as a condition of the provision of treatment, payment, enrollment in a health plan, or eligibility for benefits as indicated by 45 C.F.R. §164.530(h).
3. LLUMC will take reasonable steps to determine the patient's wishes concerning designation of a representative. Those steps are:
 - 3.1 When a patient who is not incapacitated has designated, either orally or in writing, that another individual is to be his/her representative, LLUMC shall provide the designated individual with the required notice of Patient's Rights in addition to the patient.
 - 3.2 The explicit designation of a representative shall take precedence over any non-designated relationship and continues throughout the patient's inpatient stay or outpatient visit, unless expressly withdrawn, either orally or in writing by the patient.
 - 3.3 In the case of a patient who is incapacitated who presents with an advance directive, medical power of attorney or similar document executed by the patient and designating an individual to make medical decisions for the patient when incapacitated, staff shall provide the Patient's Rights to the designated representative (reference Policy "[Patients' Rights Regarding Advance Directives and Acceptance/ Refusal of Medical Care \(P-10\)](#)").

- 3.4 If a patient is incapacitated or otherwise unable to communicate his/her wishes, and there is no written advance directive on file or presented, and an individual states that he/she is the patient's spouse, domestic partner (whether or not formally established and including a same-sex domestic partner), parent (including someone who has stood in loco parentis for the patient who is a minor child), or other family member and thus is the patient's representative, LLUMC shall accept this statement, without requesting supporting documentation and provide the required Patient's Rights notice to the individual.
- 3.5 LLUMC shall ask each patient and or the patient's representative if he/she would like to have a family member (or other representative of his/her choosing) or their own personal physician notified promptly of their admission to LLUMC.
4. Each LLUMC patient shall retain the right to be an active participant in his or her own medical care and be precluded from having his or her actions infringe upon the rights of other patients or upon the rights and responsibilities of LLUMC. Patients shall be responsible for:
- 4.1 Cooperating with the treatment plan recommended by the physician responsible for his or her care, including instructions by nurses and allied health personnel as they facilitate the responsible physician's plan of care.
- 4.2 Accepting responsibility when refusing treatment or not following the physician's instruction.
- 4.3 Showing respect for other patients by appropriate use of telephone, television, and light; limiting of visitors; respecting visiting hours; following smoking regulations.
- 4.4 Being considerate of hospital, facilities, and equipment.
- 4.5 Being respectful to hospital employees and Medical Staff and avoiding the use of obscene language, threatening remarks or other inappropriate or disruptive behavior.
- 4.6 Understanding his or her illness and treatment; if not, questioning physician/other practitioner regarding illness and treatment.
- 4.7 Notifying appropriate personnel if language barrier exists so services of an interpreter can be secured.
- 4.8 Providing accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to medical problems.
- 4.9 Reporting unexpected changes in condition, if possible, to the responsible physician.

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- 4.10 Informing appropriate personnel if he or she does not understand a contemplated course of action and what is expected.
- 4.11 Keeping appointments and notifying the appropriate personnel when unable to do so.
- 4.12 Ensuring that the financial obligations for health care are fulfilled as promptly as possible.
- 4.13 Following LLUMC rules and regulations affecting patient care and conduct.
- 4.14 Bringing only those personal articles that are necessary for comfort and that LLUMC does not provide.
- 4.15 Sending home all articles not absolutely necessary before being admitted to the unit.
- 4.16 Depositing valuables for retention in the LLUMC safe for security.
- 4.17 Accepting full responsibility for articles taken or worn to the unit and/or which may be brought in following admission; allowing them to be labeled when possible with patient's name and medical record number.
- 4.18 Providing clothing to be worn and transportation home upon discharge.
- 4.19 Understanding how to continue care after leaving the hospital, including:
 - a. When and where to get treatment
 - b. What needs to be done at home to help with the treatment.
5. LLUMC staff shall be educated regarding patient rights on orientation to the facility and/or area of work.

This Patient's Rights document incorporates the requirements of the The Joint Commission; Title 22; California Code of Regulations, Section 70707; Health and Safety Code Sections 1262.6, 1288.4 and 124960; and 42 C.F.R Section 482.13 (Medicare Conditions of Participation).

APPROVERS: Hospital Executive Leadership, LLUMC Chief Executive Officer