OLIVE VIEW-UCLA MEDICAL CENTER POLICY & PROCEDURE

NUMBER: 212 VERSION: 2

SUBJECT/TITLE: PATIENT RIGHTS AND RESPONSIBILITIES

- **POLICY:** Olive View-UCLA Medical Center observes and respects the rights of patients and staff at all times and provides patients and visitors with information as to their rights and responsibilities. The patients may exercise their rights without regard to their sex, gender identity or expression, socioeconomic status, educational background, race, color, ethnicity, religion, ancestry, national origin, culture, language, sexual orientation, marital status, mental or physical disabilities, medical condition (such as a chronic illness), age, claims experience, medical history, evidence of insurability (including conditions arising out of acts of domestic violence), genetic information, or source of payment for their care. As with rights, patients also need to be informed of and observe their responsibilities while receiving care in the hospital.
- **PURPOSE:** To ensure that Olive View-UCLA Medical Center complies with all state, federal, legal and regulatory mandates providing for patient's rights and responsibilities while under the organization's care.
- **DEPARTMENTS:** All

DEFINITIONS:

PROCEDURE: Olive View-UCLA Medical Center will abide by the "Patients' Rights and Responsibilities" delineated in the attached document. Signs shall be displayed in English and Spanish in all patient care areas of the hospital and clinics informing patients and visitors of these rights and responsibilities and of how to report a complaint about the service provided.

Patients needing assistance expressing concerns about the quality of care received and/or the safety of Olive View-UCLA Medical Center may communicate with:

- the clinic or department supervisor where the service was received; and/or
- the Patient Service Center located in Room 2A-103.

If concerns are not resolved, or if the patient believes that staff cannot properly assist with his/her concerns, the patient may address his/her concerns with any of the following agencies.

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> The Joint Commission Office of Quality and Patient Safety One Renaissance Boulevard Oakbrook Terrace, IL 60181 Fax: (630) 792-5636 Online: https://www.jointcommission.org/report a complaint.aspx

Institute for Medical Quality 180 Howard Street, Suite 210 San Francisco, CA 94105 (415) 882-5151 E-mail: <u>liacopi@imq.org</u>

U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services 7500 Security Boulevard, Mail Stop S2-12-25 Baltimore, Maryland 21244-1850 (800) 633-4227

California Department of Public Health Licensing and Certification Division Information Hotline: (800) 228-5234

References:	
Health and Safety Code 1262.6, 123222.1	
45 CFR Part 92, RIN 0945-AA02	
California Administrative Code, Title 22, Section 70707	
Medicare Conditions of Participation	
The Joint Commission	
Approved by: Bonnie Bilitch (Chief Nursing Officer), Judith Maass	Date: 12/11/2019
(Chief Executive Officer), Rima Matevosian (Chief Medical Officer)	
Review Date: 12/11/2022, 10/01, 12/98, 03/05	Revision Date: 6/83, 3/92,
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	12/07. 10/19
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