

VALLEYCARE
OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS
POLICY & PROCEDURE

NUMBER: 213
VERSION: 2

SUBJECT/TITLE: CODE OF ETHICS

PURPOSE: ValleyCare’s mission is to provide to our patient population high quality, high satisfaction, and patient centered care in an ethical manner with compassion and empathy. The administration of ValleyCare, in conjunction with the County of Los Angeles, has established policies that define the expected conduct for staff, their interaction with patients, other staff, and the community. All staff is expected to be aware of these policies and behave in accordance with the principles defined.

DEPARTMENTS: All

DEFINITIONS **Access:** the degree to which services are readily obtainable-determined by the extent to which needed services are available, information about these services is provided, the responsiveness of the system to individual cultural and linguistic needs, and the convenience and timeliness with which services are obtained.

Culture: the shared values, traditions, norms, customs, arts, history, folklore, and institutions of a group of people. Culture is a vital factor in both how clinicians deliver services and how patients respond to medical services and preventive interventions. Culture is determined not only by ethnicity but by factors such as geography, age, language, religion, gender, sexual orientation, physical ability, and socioeconomic status.

Cultural Awareness: the development of sensitivity and understanding of another racial/ethnic group. Awareness and sensitivity also refer to the qualities of openness and flexibility that a person develops in relation with others.

Cultural Diversity: a constellation of people consisting of distinctive ethnic groups, colors, and races, languages, customs, styles, values, beliefs, gender, ages, education, knowledge, skills, abilities, functions, practices, religions, socioeconomic status, sexual orientation and geographic areas.

Cultural Sensitivity: recognition and respect for customs and cultural norms different from one’s own.

POLICY: A. Provision of Services

SUBJECT/TITLE: CODE OF ETHICS

Policy Number: 213

Page Number: 2

1. Provide the public with high quality, patient centered health care services that are beneficial in order to maximize access and minimize disparities.
2. Emergency medical treatment will be provided to all patients regardless of their ability to pay.
3. All patients will have access to necessary medical care and receive the same quality of care, regardless of social, ethnic, cultural or economic factors.
4. Staff will fairly and accurately represent our available services to the public.
5. When a patient is in need of a service not available at a ValleyCare facility, the patient shall be informed and assisted in making other arrangements, if possible.
6. ValleyCare will provide the services which meet the identified needs of our patients. The patients' wishes will be considered when developing care plans.
7. ValleyCare staff will avoid provision of services which are unnecessary, ineffective or otherwise considered futile.
8. Staff will strive to provide cost-efficient care. However, at no time shall any patient's care be compromised or substandard because of financial considerations. Additionally, at no time will the provision of care be influenced by the financial involvement or compensation on the part of any member of the ValleyCare workforce.

B. Respect for the Patient

1. All patients shall be treated with respect, compassion, and courtesy. All interactions shall take into account spiritual, religious, cultural, and psychological differences that may impact decision-making and medical belief systems.
2. Patients have the right to participate in decisions about their care. Patients shall be informed about risks, benefits and alternatives to the proposed care and shall give informed consent for such care. (See Informed Consent Policy for more details). Patients will be respected in their preferences including decisions to discontinue treatment or care.

SUBJECT/TITLE: CODE OF ETHICS

Policy Number: 213

Page Number: 3

3. All patients have other specific rights and responsibilities which must be respected. These rights are delineated in the patient handbook and are posted in patient care areas. Staff should be aware of these rights, as well as patient responsibilities.

C. Confidentiality and Privacy

1. Patients have the right to privacy. All efforts shall be made to respect the privacy of a patient's body as well as communications. The right to privacy extends to the comatose patient. (See Patient Handbook).
2. All workforce members shall comply with federal and state laws regarding patient privacy and all information about patients shall be treated with utmost confidentiality. There shall be no unauthorized communication about patients inside or outside of the hospital. This means there shall be no discussion of patients in areas where the public can listen. There shall be no discussion of a patient's condition with anyone, including family, if the patient forbids it.
3. Any communication with outside agencies or persons must be done in accordance with ValleyCare policies on Use and Disclosure of Protected Health Information Without Authorization and Use and Disclosure of Protected Health Information Requiring Authorization.

D. Restriction of Communications

If a patient's access to mail, phone or visitors is restricted, the reason(s) for this will be clearly documented and explained to the patient. The medical efficacy of the restriction will be monitored and documented.

E. Family Involvement

All patients have the right to have family members actively involved in their care and decision making process. This should be encouraged by the staff. However, the patient must consent to the family's involvement in their care. The patient may designate specific family members or significant others, while excluding others. These wishes must be respected.

F. Incompetent Patients

ValleyCare recognizes that incompetent patients and minors still have a right to participate in the decision making regarding their care. Any conflict should be discussed with the Bioethics Committee.

SUBJECT/TITLE: CODE OF ETHICS

Policy Number: 213

Page Number: 4

G. Fair Billing

ValleyCare will bill patients, Medi-Cal, or other third party payers only for services actually provided to patients. We will attempt to resolve questions and disputes about the billing process fairly. Conflicts shall be resolved keeping the welfare of both the individual patients and the institution in mind.

H. Conflict Resolution

Just as the patient participates in care planning, the patient will also be involved in resolving conflict. This is especially true if the conflict affects the patient's welfare. All attempts shall be made to resolve any conflict fairly. If the discussion among the involved parties does not lead to a satisfactory resolution, then other arbitrators shall be contacted. Depending on the situation, appropriate resources may be the Utilization Review Physician Advisor, Chief of Service, Medical Director, Hospital Administrator, Bioethics Committee or Patient Relations Liaison.

References:	
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