PATIENT RIGHTS AND RESPONSIBILITIES

We recognize that each patient has unique health care needs and we encourage a partnership between the patient and the health care team. We encourage patients or their legally designated representative to participate in discussions and decisions about their treatments, options, alternatives, risks and benefits.

As a patient at UCSF Langley Porter Psychiatric Hospital and Clinics (hereinafter LPPHC), you have the right to:

1. Considerate and respectful care, and to be made comfortable. You have the right to respect for your cultural, psychosocial, spiritual and personal values, beliefs and preferences.

2. Request the services of an interpreter if needed, at no cost to you.

3. Have a family member (or other representative of your choosing) and your own physician notified promptly of your admission to LPPHC.

4. Know the name of the physician/provider who has primary responsibility for coordinating your care and the name and role of each professional relationship of other physicians and non-physicians who will see you.

5. Receive information about your health status, diagnosis, 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 and to receive information about the continuity of your care. If you need an interpreter or have special needs, let our staff know. You have the right to participate in ethical questions that arise in the course of your care, including issues of conflict resolution, withholding/resuscitative services and forgiving or withdrawing the sustaining treatment. You may consult with an ethics committee member regarding ethical questions and concerns by asking the nurse or physician by or calling (415) 476-2940.

6. Make decisions regarding your medical care, and receive information about any proposed treatment or procedure 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 in this treatment, alternate courses of treatment or non-treatment and the risks involved in each, and the name and role of the person who will carry out the procedure or treatment.

7. 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 or to refuse to cooperate with the care necessary for your safety based on the plan of care. You have the right to reasonable responses to any reasonable requests made for service.

8. Leave LPPHC against the advice of health care providers, to the extent permitted by law.

9. Be advised if your health care providers propose to engage in or perform research affecting your care or treatment. You have the right to participate in such research projects and any refusal will not jeopardize your access to treatment or services.

10. Appropriate assessment and management of your pain, information about pain, pain relief measures, and to participate in pain management decisions. You may request or reject the use of any or all modalities to relieve pain, including opioid medication, if you suffer from severe or chronic pain. The doctor may refuse to prescribe the opioid 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.

11. Formulate an Advance Health Care Directive. This includes designating a decision-maker to make health care decisions should you be unable to make or unwilling to speak for yourself. A decision-maker has the same rights and responsibilities as a patient. LPPHC health care providers will comply with these directives to the extent their existence is known and to the extent required by law.

12. Have personal privacy respected. You have the right to be told the reason for the presence of any individual. You have the right to have non-health care provider visitors leave prior to an examination and when treatment issues are being discussed. You have the right to restrict non-LPPHC visitors. You have the right to confidential treatment of all communications and records pertaining to your care and stay in the hospital to the extent required by law. You will receive a separate “Notice of Privacy Practices” that explains your privacy rights in detail and how we may use and disclose your protected health information.

13. Receive care in a safe setting, free from mental, verbal, physical or sexual abuse and neglect, exploitation or harassment. You have the right to access protective and advocacy services including notifying government agencies of neglect or abuse.

14. Be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience or retaliation by staff.

15. Be informed by the physician or the delegate of the physician, of continuing health care requirements for discharge from the hospital, and have the right to be involved in the development and implementation of your discharge plan. Upon your request, a friend or family member may also be provided this information.

16. Know which rules and policies apply to your conduct while a patient.

17. Designate visitors of your choosing, including a person to be present with you for emotional support during the course of your stay whether or not the visitor is related by blood or marriage, unless:

- You have told the health facility staff that you no longer want a particular person to visit.
- Any other visitor violates your reasonable requests for reasonable responses to any reasonable requests made for service.

18. In a campaign or expedition for which a campaign badge has been authorized). Non-discrimination information is available in an alternative form of communication to meet the needs of persons with sensory impairments.

19. To pay bills promptly to ensure that your financial obligations for your health care are fulfilled. Late payments increase overall charges. You are responsible for working with your account representative or the hospital to set up a payment plan.

20. To keep appointments and cooperate with your health care provider. If you need to cancel an appointment, you should do so at least 24 hours before your appointment time or within the time frame required by your health care provider.

21. To accept the consequences of your own decisions and actions if you choose to refuse treatment or not to comply with the instructions given by your health care provider.

22. To be informed and to ask questions by making an effort to understand your health care needs and by considering the options and consequences of the treatment you receive. Your health care provider may not know when you are confused or uncertain or just want more information. If you don’t understand the medical words they use, ask for a simpler explanation.

23. To conduct yourself in a respectful manner in communications and interactions with LPPHC staff, patients and visitors. This includes refraining from inappropriate, discriminatory, harassing or abusive language and behavior.

24. To report, to the best of your knowledge, accurate and complete information regarding any matters pertaining to your health to the physicians and other health care professionals who care for you.

25. To be informed and to ask questions by making an effort to understand your health care needs and by considering the options and consequences of the treatment you receive. Your health care provider may not know when you are confused or uncertain or just want more information. If you don’t understand the medical words they use, ask for a simpler explanation.

26. To recognize that LPPHC as a teaching institution has a commitment to the education of future health care professionals. Patients receiving care at LPPHC are a part of this process.

27. To be informed if your health care providers propose to engage in or perform research affecting your care or treatment. You have the right to participate in such research projects and any refusal will not jeopardize your access to treatment or services.

28. To have personal privacy respected. You have the right to be told the reason for the presence of any individual. You have the right to have non-health care provider visitors leave prior to an examination and when treatment issues are being discussed. You have the right to restrict non-LPPHC visitors. You have the right to confidential treatment of all communications and records pertaining to your care and stay in the hospital to the extent required by law. You will receive a separate “Notice of Privacy Practices” that explains your privacy rights in detail and how we may use and disclose your protected health information.

29. To receive care in a safe setting, free from mental, verbal, physical or sexual abuse and neglect, exploitation or harassment. You have the right to access protective and advocacy services including notifying government agencies of neglect or abuse.

30. To be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience or retaliation by staff.

As a patient at UCSF Langley Porter Psychiatric Hospital and Clinics, you also have the following responsibilities:

1. To follow LPPHC’s rules, regulations and policies affecting patient care and conduct.

2. To be considerate of LPPHC facilities and equipment and to use them in such a manner so as not to abuse them.

3. To respect the rights and property of other patients and LPPHC personnel. Just as you want privacy, a quiet atmosphere and courteous treatment, so do other patients. You have the responsibility to honor LPPHC’s right to restrict visitors as noted above, comply with LPPHC’s policies prohibiting smoking and use of illicit or non-prescribed drugs or alcohol, and to use the telephone, television and lights courteously so that you do not disturb others.

4. To conduct yourself in a respectful manner in communications and interactions with LPPHC staff, patients and visitors. This includes refraining from inappropriate, discriminatory, harassing or abusive language and behavior.

5. To report, to the best of your knowledge, accurate and complete information regarding any matters pertaining to your health to the physicians and other health care professionals who care for you.

6. To be informed and to ask questions by making an effort to understand your health care needs and by considering the options and consequences of the treatment you receive. Your health care provider may not know when you are confused or uncertain or just want more information. If you don’t understand the medical words they use, ask for a simpler explanation.

7. To recognize that LPPHC as a teaching institution has a commitment to the education of future health care professionals. Patients receiving care at LPPHC are a part of this process.

8. To cooperate with the members of LPPHC’s health care team who provide care to you.

9. To follow the treatment plan recommended by the health care provider responsible for your care. This includes following the instructions of the other health team members, such as nurses and physical therapists, as they carry out the coordinated plan of care. 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. The most effective plan is one in which all participants agree is best and which is carried out exactly.

10. To understand how to continue your care after you leave LPPHC, including where and when you need to go to get further treatment and what you need to do at home to help with your treatment.

11. To accept the consequences of your own decisions and actions if you choose to refuse treatment or not to comply with the instructions given by your health care provider.

12. To keep appointments and cooperate with your health care provider. If you need to cancel an appointment, you should do so at least 24 hours before your appointment time or within the time frame required by your health care provider.

13. To pay bills promptly to ensure that your financial obligations for your health care are fulfilled. Late payments increase overall charges. You are responsible for working with your account representative to make payment arrangements and providing the information necessary to determine how your hospital bill will be paid.

14. To provide LPPHC with a copy of your Advance Health Care Directive if you have one.

It is the policy of UCSF Langley Porter Psychiatric Hospital and Clinics not to engage in discrimination against or harassment of any person employed or seeking employment or patient care with UCSF Langley Porter Psychiatric Hospital and Clinics on the basis of race, color, national origin, religion, sex, gender identity, gender expression, pregnancy, physical, mental, or other disability, medical condition (cancer-related or genetic characteristics), ancestry, marital status, age, sexual orientation, citizenship or status as a covered veteran (special disabled veteran, Vietnam-era veteran, or any other veteran who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized). Non-discrimination information is available in an alternative form of communication to meet the needs of persons with sensory impairments.

If you have any questions regarding these Patient Rights and Responsibilities, you may contact: Executive Director of Clinical Operations, Langley Porter Psychiatric Hospital and Clinics, 401 Parnassus Ave., Campus Box 0984, San Francisco, CA 94143; phone: (415) 476-2940; fax: (415) 476-7320; TTY: (415) 885-3TTY.