

Patient Rights and Responsibilities

Tahoe Forest Health System wishes to inform you of your rights while under our care for both outpatient and inpatient services. 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. Have a family member (or other representative of your choosing) and your own physician notified promptly of your admission to the hospital.
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 your care, and the names and professional relationships of physicians and non-physicians who will see you.
4. 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. 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 forgoing or withdrawing life-sustaining treatment.
5. Make decisions regarding your 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 course 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.
6. 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.
7. 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.
8. Reasonable responses to any reasonable requests made for service.
9. Appropriate assessment and management of your pain, information about pain, pain relief measures and to participate in pain management decisions. You may request the use of any or all modalities to relieve pain, including opiate medication, if you suffer from severe chronic intractable pain. The provider may refuse to prescribe the opiate medication, but if so, must inform you that there are providers who specialize in the treatment of pain with methods that include the use of opiates.
10. 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. All patients' rights apply to the person who has legal responsibility to make decisions regarding medical care on your behalf.
11. Have personal privacy respected. Case discussions, consultations, examinations and treatments 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 examinations and when treatment issues are being discussed. Privacy curtains will be used in semi-private rooms.

12. Confidential treatment of all communications and records pertaining to your care and stay in the hospital. You will receive a separate “Joint 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, physical, sexual or verbal abuse or 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. Reasonable continuity of care and to know in advance the time and location of appointments as well as the identity of the persons providing care.
16. Be informed by the physician, or a 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.
17. Know which hospital rules and policies apply to your conduct while a patient.
18. 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, unless:
 - a. No visitors are allowed. The decision to not allow visitors will only be implemented after considering all aspects of a patient’s health and safety, including the benefits of visitation on the patient’s care as well as potential negative impacts that visitors may have on other patients. (e.g. infection control issues)
 - b. The facility reasonably determines that the presence of a particular visitor would endanger the health or safety of a patient, a member of the facility staff, or other visitor to the health facility, or would significantly disrupt the operations of the facility.
 - c. 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 hours of visitation and number of number of visitors. Visiting hours will generally be limited to daytime hours. Visitors wishing to visit after-hours or stay overnight may request accommodation with care provider staff. These visitors will be required to fill out the visitor log and obtain a visitor badge. 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 of either the patient (or your support person, where appropriate) or visitors (including individuals seeking to visit you).

All visitors (including individuals seeking to visit you) will enjoy full and equal visitation privileges consistent with your preferences (or, where appropriate your support person) that you have

expressed concerning visitors. You (or your support person, where appropriate) may limit the visiting privileges of your visitors, including providing more limited visiting privileges for some visitors than those for others.

19. 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.
20. Examine and receive an explanation of the hospital's bill regardless of the source of payment.
21. Exercise these rights without regard to sex, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation, gender identity/expression, disability medical condition, marital status, age, registered domestic partner status, genetic information, citizenship, primary language, immigration status (except as required by federal law), the source of payment for care, or human immunodeficiency virus status of the person.
22. File a grievance. If you want to file a grievance with the health facility, you may do so by writing or by calling:

Director of Quality and Regulations
Tahoe Forest Hospital District

P.O. Box 759
Truckee, CA 96160
(530) 587- 6011

You will receive an initial written response within 7 days to notify you of receipt of the complaint. The grievance committee will review each grievance and provide you with a full written response within 30 days. If the grievance committee is unable to complete a full investigation within 30 days, you will be kept updated on the progress of the investigation and timing of a resolution. 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).

23. File a complaint with the state regardless of whether you use the hospital's grievance process.

California:

California Department of Public Health
126 Mission Ranch Boulevard
Chico, CA 95926
Phone: (530) 895-6711
Toll Free: 1 (855) 804-4205

Nevada:

Bureau of Health Care Quality
and Compliance (BHCQC)
Northern Nevada Office
727 Fairview Drive, Suite E
Carson City, NV 89701
Phone: (775) 682-1030

These Patient Rights combine Title 22 and other California Laws, The Joint Commission and Medicare Conditions of Participation requirements. Sources include the California Hospital Consent Manual (2019) and the Nevada Consent and Medical Information Manual (2019).