The Veterans Health Administration (VHA) is pleased you have selected us to provide your healthcare. We want to improve your health and well-being. We will make your visit or stay as pleasant for you as possible. As part of our service to you, to other veterans and to the Nation, we are committed to improving healthcare quality. We also train future healthcare professionals, conduct research, and support our country in times of national emergency. In all of these activities, our employees will respect and support your rights as a patient. Your basic rights and responsibilities are outlined in this document. Please talk with VA treatment team members or a Patient Advocate if you have any questions or would like more information about your rights.

The VA Medical Center respects the patient’s right to make decisions about his or her care, treatment and services, and to involve the patient’s family in care, treatment and services decisions to the extent permitted by the patient or surrogate decision-maker. “Family” is defined as a group of two or more persons united by blood, or adoptive, marital, domestic partnership, or other legal ties. The family may also be a person or persons not legally related to the individual (such as significant other, friend or caregiver) whom the individual considers to be family. A family member may be the surrogate decision-maker, as defined in VHA Handbook 1004.02, if authorized to make care decisions for the individual, should he or she lose decision-making capacity or choose to delegate decision-making to another. The Medical Center allows a family member, friend or other individual to be present with the patient for emotional support during the course of stay. The Medical Center allows for the presence of a support individual of the patient’s choice, unless the individual's presence infringes on others’ rights or safety, or is medically or therapeutically contraindicated. The individual may or may not be the patient’s surrogate decision-maker or legally authorized representative. The Medical Center prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression.

**I. Respect and Nondiscrimination**

- You will be treated with dignity, compassion, and respect as an individual. Consistent with Federal law, VA Policy, and accreditation standards of the Joint commission, you will not be subject to discrimination for any reason, including for reason of age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation or gender identity or expression.
- Your privacy will be protected. You will receive care in a safe environment. We will seek to honor your personal and religious values.
• You or someone you choose has the right to keep and spend your money. You have the right to receive an accounting or any VA held funds.
• Treatment will respect your personal freedoms. In rare cases, the use of medication and physician restraints may be used if all other efforts to keep you or others free from harm have not worked.
• As an inpatient or nursing home resident, you may wear your own clothes. You may keep personal items. This will depend on your medical condition.
• As an inpatient or nursing home resident, you have the right to social interaction and regular exercise. You will have the opportunity for religious worship and spiritual support. You may decide whether to participate in these activities. You may decide whether or not to perform tasks in or for the Medical Center.
• As an inpatient or nursing home resident, you have the right to communicate freely and privately. You may have or refuse visitors. You will have access to public telephones. You may participate in civic rights, such as voting and free speech.
• As a nursing home resident you can organize and take part in resident groups in the facility. Your family also can meet with the families of other residents.
• In order to provide a safe treatment environment for all patients or residents and staff, you are expected to respect other patients, residents and staff and to follow the facility’s rules. Avoid unsafe acts that place others at risk for accidents or injuries. Please immediately report any condition you believe to be unsafe.

II. Information Disclosure and Confidentiality

• You will be given information about the health benefits you can receive. The information will be provided in a way you can understand.
• You will receive information about the costs of your care, if any, before you are treated. You are responsible for paying your portion of any costs associated with your care.
• Your medical record will be kept confidential. Information about you will not be released without your consent unless authorized by law (an example of this is State public health reporting). You have the right to information in your medical record and may request a copy of your medical records. This will be provided except in rare situations when your VA physician feels the information will be harmful to you. In that case, you have the right to have this discussed with you by your VA provider.
• You will be informed of all outcomes of care, including any potential injuries. You will be informed about how to request compensation for any injuries.
III. Participation in Treatment Decisions

- You and any persons you choose will be involved in all decisions about your care. You will be given information you can understand about benefits and risks of treatment. You will be given other options. You can agree to or refuse treatment. You will be told what is likely to happen to you if you refuse treatment. Refusing treatment will not affect your rights to future care but you take responsibility for the possible results to your health.

- Tell your provider about your current condition, medicines (including over-the-counter and herbals), and medical history. Also, share any other information that affects your health. You should ask questions when you do not understand something about your care. Being involved is very important for you to get the best possible results.

- You will be given, in writing, the name and title of the provider in charge of your care. As our partner in healthcare, you have the right to be involved in choosing your provider. You also have the right to know the names and titles of those who provide you care. This includes students, residents and trainees. Providers will properly introduce themselves when they take part in your care.

- You will be educated about your role and responsibilities as a patient or resident. This includes your participation in decision-making and care at the end of life.

- If you believe you cannot follow the treatment plan, you have a responsibility to notify your provider or treatment team.

- You have the right to have your pain assessed and to receive treatment to manage your pain. You and your treatment team will develop and pain management plan together. You are expected to help the treatment team by telling them if you have pain and if the treatment is working.

- As an inpatient or nursing home resident, you will be provided any transportation necessary for your treatment plan.

- You have the right to choose whether you will participate in any research project. Any research will be clearly identified. Potential risk of the research will be identified and there will be no pressure on you to participate.

- You will be included in resolving any ethical issues about your care. You may consult with the Medical Center’s Ethics Consultation Service and/or other staff knowledgeable about the healthcare ethics.

- If you or the Medical Center believes that you have been neglected, abused or exploited, you will receive help.
IV. Complaints

- You are encouraged and expected to seek help from your treatment team or a patient advocate if you have problems or complaints. You will be given understandable information about the complaint process. You may complain verbally or in writing, without fear of retaliation.

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Revised in accordance with Visitation Policy Outreach memo, dated February 8, 2012