

Nursing Home Residents' Rights



Department of Health Services
Licensing and Certification Program



Nursing Home Residents' Rights

Licensing and Certification Program District Offices

The mission of Licensing and Certification (L&C) is to promote high quality medical care in community settings and facilities throughout California. L&C is responsible for inspecting and licensing health care facilities for compliance with state and federal laws and regulations. This fact sheet directs you to L&C District Offices and the counties that they serve. The counties, addresses, and phone numbers of all district offices are listed on this fact sheet. To file a complaint or find out further information on a facility, you may call or write the L&C District Office nearest you.

Alameda District Office

1625 Shattuck Avenue, Suite 219
Berkeley, CA 94704
(866) 247-9100
(510) 883-6881
County: Alameda

Bakersfield District Office

1200 Discovery Plaza, Suite 150
Bakersfield, CA 93309
(866) 222-1903
(661) 336-0543
Counties: Kern, Tulare

Chico District Office

1367 E. Lassen Avenue, Suite B-1
Chico, CA 95973
(800) 554-0350
(530) 895-6711
Counties: Butte, Colusa, Glenn, Lassen,
Modoc, Nevada, Plumas, Shasta, Sierra,
Siskiyou, Sutter, Tehama, Trinity, Yuba

Contra Costa District Office

1625 Shattuck Avenue, Suite 219
Berkeley, CA 94704
(800) 554-0352
(510) 540-2417

County: Contra Costa

Daly City District Office

350 90th Street, Second Floor
Daly City, CA 94015
(800) 554-0353
(650) 301-9971
Counties: San Francisco, San Mateo

Fresno District Office

7170 N. Financial Drive, Suite 110
Fresno, CA 93720
(800) 554-0351
(559) 437-1500
Counties: Fresno, Kings, Madera,
Mariposa, Merced

Los Angeles District Office

Health Facilities Division
5555 Ferguson Drive, Third Floor
City of Commerce, CA 90022
(800) 228-1019
(323) 837-1005
County: Los Angeles

Orange County District Office

2150 Towne Centre Place, Suite 210
Anaheim, CA 92806
(800) 228-5234
(714) 456-0630
County: Orange

Continued on reverse

Licensing and Certification District Offices (*continued*)

Redwood Coast District Office

50 Old Courthouse Square, Suite 200
Santa Rosa, CA 95404
(866) 784-0703
(707) 576-6775
Counties: Napa, Solano

Riverside District Office

625 E. Carnegie Drive, Suite 280
San Bernardino, CA 92408
(888) 354-9203
(909) 388-7170
County: Riverside

Sacramento District Office

7801 Folsom Blvd., Suite 200
Sacramento, CA 95826
(800) 554-0354
(916) 229-3400
Counties: Alpine, Amador, Calaveras,
El Dorado, Placer, Sacramento, San
Joaquin, Stanislaus, Tuolumne, Yolo

San Bernardino District Office

464 West Fourth Street, Suite 529
San Bernardino, CA 92401
(800) 344-2896
(909) 383-4777
Counties: Inyo, Mono, San Bernardino

San Diego District Office (North)

7575 Metropolitan Drive, Suite 104
San Diego, CA 92108
(800) 824-0613
(619) 278-3700
Counties: Orange, Northern San Diego

San Diego District Office (South)

7575 Metropolitan Drive, Suite 211
San Diego, CA 92108
(866) 706-0759
(619) 688-6190
Counties: Imperial, Southern San Diego

San Jose District Office

One Almaden Blvd., Ninth Floor
San Jose, CA 95113
(800) 554-0348
(408) 277-1784
Counties: Monterey, San Benito, Santa
Clara, Santa Cruz

Santa Rosa District Office

50 Old Courthouse Square, Suite 200
Santa Rosa, CA 95404
(800) 554-0349
(707) 576-2380
Counties: Del Norte, Humboldt, Lake,
Marin, Mendocino, Sonoma

Ventura District Office

1899 N. Rice Avenue, Suite 200
Oxnard, CA 93030
(800) 547-8267
(805) 604-2926
Counties: San Luis Obispo,
Santa Barbara, Ventura

If you are interested in other Residents' Rights Project materials or have any questions about your rights as a resident in a nursing home, please contact the Department of Health Services, Licensing and Certification headquarters at:



Department of Health Services

Licensing and Certification
Residents' Rights Project
1800 Third Street, Suite 210
P.O. Box 942732
Sacramento, CA 94234-7320
(866) 447-4518

Nursing Home Residents' Rights

How State Health Workers Protect You

Department of Health Services, Licensing and Certification Program

The Department of Health Services, Licensing and Certification Program (DHS, L&C) is the California state agency that licenses and regulates health facilities such as a nursing home. The state employees that work at DHS, L&C and perform the inspections are called "Surveyors" or "Evaluators." Many evaluators are nurses. They conduct routine inspections or "surveys" and investigate complaints. They also make follow-up visits to assure that problems that have been identified are corrected. This fact sheet describes the role that Surveyors have in assuring quality health care.



Surveyors' Jobs

L&C Surveyors are responsible for enforcing the federal and state laws concerning health care in nursing homes. These rules promote quality care, ensure that your rights as a resident are respected, and set minimum standards

for every department in the facility. The Surveyors do their jobs by visiting your nursing home and determining whether it is following the regulations. Routine inspections take place on a yearly basis and usually last for several days. If problems with care are found, Surveyors will notify the nursing home and require the problems to be corrected. Surveyors may also visit a nursing home in response to a specific complaint. Complaint investigations may take from a few hours to several days. You will be able to easily identify state Surveyors visiting your nursing home because they will be wearing identification badges clearly marked with their names and "Department of Health Services."

Surveyors use the following methods to evaluate the quality of care you are receiving:

- ▼ Interview you or other residents and family members.
- ▼ Review your medical records.
- ▼ Observe staff members as they provide care or do their jobs.
- ▼ Observe staff giving treatments.
- ▼ Interview staff members.

Continued on reverse



How State Health Workers Protect You (*continued*)

- ▼ Inspect the building inside and outside.
- ▼ Inspect the kitchen and observe the preparation of a meal.
- ▼ Observe a licensed nurse passing routine medications.

You may see a Surveyor speaking to staff members, visitors, or simply observing.

One of the best ways for a Surveyor to determine the quality of care you are receiving is to interview residents and family members or to observe care that you may receive.

Residents who are able to describe the care they are receiving are very important to the survey process.

What You Should Know About Interviews

Surveyors select several residents to talk with in depth to learn about the care and services residents are receiving in the nursing home. The purpose of the interviews is to help Surveyors understand, from the residents' point of view, what life is like in the nursing home. If you are selected to be interviewed consider this an opportunity to share your experiences and thoughts about the facility. You may refuse to be

interviewed, or you may ask the Surveyor to come back at a more convenient time. If you are interviewed, no one can be present at the interview without your permission. You may also be asked to participate in an interview with a group of other residents. If you are not asked to participate in an interview (either alone or in a group), you may talk to Surveyors at any time if you have information you would like to share with them. Family members also participate in separate interviews.

Tell the Surveyor about your good experiences you have at the facility, as well as about any problems you have in the facility. Try to give as much detail as possible. You may want to ask the Surveyor to come back later or the next day so that if you remember something after your interview is over, you will be able to tell the Surveyor at the later time.

Conclusion

As a resident, you may have no more contact with L&C Surveyors than a handshake as they pass through your nursing home, but remember you may always speak to a Surveyor if you have something that you want to tell him or her. If you see Surveyors in the nursing home, you may ask to speak to one at any time. Interviewing you and/or other residents and observing the care you are

Continued



How State Health Workers Protect You *(continued)*

receiving are important parts of the survey process.

You also have the right to know the outcome of surveys and complaint investigations. The nursing home is required to post for public view the report of its most recent survey.

For additional information, contact the Department of Health Services, Licensing and Certification District Office or the Ombudsman Program in your county. The telephone numbers for both agencies are posted in your nursing home.

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Nursing Home Residents' Rights

How to Choose a Nursing Home

Selecting a nursing home for yourself, a loved one, or a friend is an important and often difficult decision. Ideally, you will have the time to gather the many facts you'll need to make that decision.

Unfortunately, that decision is often made in a crisis atmosphere, when a person is about to leave the hospital or after a serious illness or operation.

Finding the right nursing home is all-important to you or your loved one's well-being. The nursing home selected will be the person's home for the duration of his or her stay, and sometimes for the remainder of a person's life. A careful search for a nursing home will prevent future problems. This fact sheet is intended to give you some guidelines in selecting the most appropriate nursing home for you or your loved one.

Advance Planning

Here are some things you can do in advance that will help you in the selection of a nursing home for yourself or a family member:

- ▼ Find out what nursing homes are located in your community and learn what you can about them. If you have friends or relatives who are familiar with the



homes, ask them for their opinions. If you know people who live in nursing homes, pay them a visit and gather some first hand impressions. Find out if the nursing home has a list of references.

- ▼ Check with the State Department of Health Services' District Office and ask to see the latest list of nursing homes in your area. This document lists all facilities by county and currently licensed by the State Department of Health Services and includes the address, administrator's name, type of facility, number of beds, and other information.
- ▼ Examine the State Department of Health Services' most recent survey (inspection) results of each nursing home you visit. Every nursing home is required to post a copy in a readily accessible place.
- ▼ Each county has an Ombudsman Program, which provides a variety of advocacy services for nursing home residents in California. Contact your local Ombudsman office for information about choosing a nursing home in your neighborhood.
- ▼ When you have made a list of the places that seem the most appropriate, you should make a personal visit to each one. Choose at

Continued on reverse



How to Choose a Nursing Home *(continued)*

least three or four nursing homes to visit so that you can have the best idea of what type of nursing home best fits your needs and personal preferences. It is best to make an appointment with the administrator, director of nursing, and social services director. Take along a list of questions to ask during the visit.

- ▼ If possible, pick a location close to home and relatives or friends.

Visiting a nursing home

Here are some things to consider when visiting nursing homes:

- ▼ Visit each nursing home. Observe staff/resident interactions. Are staff listening attentively and respectfully to residents? Observe resident to resident interactions. Are residents relating to each other? Are there visitors in the nursing home? What is the atmosphere? Does it appear home-like or is it institutional?
- ▼ Speak with the people who work in the nursing home, and more importantly, speak with the residents who live in the nursing home and their families.
- ▼ Try to visit a nursing home more than once and during different times of the day.
- ▼ Visit during mealtimes. Look to see if residents are eating in the dining room or in their rooms. Also note if those needing assistance are being assisted while eating. Do residents appear to be enjoying the food? Are they eating it? What is the atmosphere in the dining room? Are residents talking with each other? Are staff talking with the residents during the meal?
- ▼ Ask about the activities program. What activities are offered? Look at the activities calendar; would the activities appeal to you or your family member?
- ▼ Ask staff how decisions are made to provide therapy and rehabilitation.
- ▼ Ask about admissions criteria. If your family member is eligible for Medicare, ask if the facility participates in Medicare and if so, how many rooms are certified for Medicare. Ask what happens when the resident's Medicare coverage is completed; is the resident asked to move to another room?
- ▼ Ask about payment requirements and billing procedures. If your family member will pay privately for his or her stay, ask what services the daily rate covers and what the extra charges are for other services. If your

Continued



How to Choose a Nursing Home *(continued)*

family member will be on Medi-Cal, ask whether the facility participates in Medi-Cal and which services are not covered by the Medi-Cal rate.

- ▼ Note the physical condition of the nursing home. Make sure the building is clean and well maintained. Are there private areas available for visiting?
- ▼ Evaluate the quality of the care and the concern for the residents you see. The staff should show a true interest in and affection for the individual residents.
- ▼ Ask how many residents, on average, each nurse aide or direct care nurse is assigned to.
- ▼ Ask the dietician at the nursing home for a list of menus for the month, and ask to taste a sample of the food

being served. Also inquire about how special diets are handled.

- ▼ Ask about access to emergency care, dentists, and eye doctors.
- ▼ Make sure the special services you may require are offered and available to you or your family member. A resident who recently had a hip replacement will need physical therapy, while a resident with Alzheimer’s disease may need extra guidance by the staff to ensure that the resident does not wander away from the nursing home.

Remember

State law requires every nursing home to make blank copies of their admission contract available to the public at a cost. Before you sign a contract with a nursing home, carefully review the entire document.

Licensing and Certification District Offices:



Alameda	(866) 247-9100	Riverside	(888) 354-9203
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Los Angeles	(800) 228-1019	Santa Rosa	(800) 554-0349
Orange	(800) 228-5234	Ventura	(800) 547-8267
Redwood Coast	(866) 784-0703		

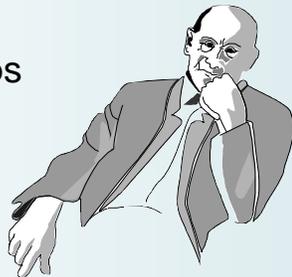
Nursing Home Residents' Rights

Your Rights as a Resident in a Nursing Home

You keep all your basic civil or human rights and liberties when you are admitted to a nursing home. Because these rights are so important, both federal and state regulations list nursing home residents' rights in detail and require the Department of Health Services staff who inspect your nursing home to decide whether this home is protecting and promoting your rights.

The rights included in regulations apply to all areas of your life in the nursing home. These rights relate to general categories which include:

- ▼ Admissions Rights
- ▼ Quality of Life
- ▼ Visitors
- ▼ Privacy and Confidentiality
- ▼ Choosing How to Spend Your Time
- ▼ Grievances
- ▼ Participation in Groups and Activities
- ▼ Living Accommodations
- ▼ Quality Care



- ▼ Protection of Money and Possessions
- ▼ Medical Care and Treatment
- ▼ Freedom from Abuse
- ▼ Transfer and Discharge Rights
- ▼ Resident Records
- ▼ Free Choice
- ▼ Participation in Care Planning
- ▼ Freedom from Physical and Chemical Restraints

If you are not able to understand these rights because of a language or hearing problem, the nursing home must provide an interpreter for you. If you lack the ability to understand these rights, the nursing home must explain these rights to your representative unless other legal provisions have been made.

For additional information about residents' rights, you may ask the staff at your nursing home, or contact the Department of Health Services, Licensing and Certification District Office or the Ombudsman Program in your county. The telephone numbers for both agencies are posted in your nursing home.

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Nursing Home Residents' Rights

If You Have a Problem, Who Should You Talk To?

If you live in a nursing home and you need help with solving a problem, there are a number of people you may ask.

If the problem is a personal or family concern:

- ▼ You may ask a staff member to suggest someone for you to talk with or to help you call someone of your choosing.
- ▼ You may ask the nursing home's social worker to help you or to refer you to an appropriate social services agency.
- ▼ You may ask the long-term care Ombudsman if he or she has any suggestions to assist you.

If the problem is related to your medical condition:

- ▼ You may talk with the charge nurse on your unit or the Director of Nursing.

- ▼ You may call your physician and discuss the problem with him/her.

If the problem concerns the nursing home:

- ▼ You may talk with the Resident Council in your nursing home.
- ▼ You may speak with a staff person you trust or the facility Administrator.
- ▼ You may discuss it with the long-term care Ombudsman.



If you do not want to discuss the problem with anyone in the nursing home, and you believe the nursing home is not or has not protected your rights or the rights of others, you may call the Department of Health Services, Licensing and Certification District Office (DHS L&C) or the Ombudsman Program. The telephone numbers of both agencies are posted in your nursing home.

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Nursing Home Residents' Rights

When You Need Personal Assistance, How Do You Get It?

At times throughout your day you may require help to perform daily activities, to move from place to place, to have basic medical or other needs met, or to signal staff for any other type of request.

Your nursing home must:

- ▼ Provide a nurse call system in all resident rooms and toilet and bathing facilities so that you can alert the staff any time you need help.
- ▼ Ensure that you can use the call system by placing a call cord, button, or some other aid within your reach.
- ▼ Respond to your call in a timely manner. If staff cannot help you immediately, they should explain the reason to you and set a time to return to help you.
- ▼ Respond to calls in a courteous manner.
- ▼ Attempt to anticipate your needs by placing items within your reach, etc.

You should always ask for assistance if you require any help with activities such as dressing, bathing and grooming, eating, moving, making telephone calls, receiving or sending mail, arranging transportation, or anything else you may need help with.

If you have concerns about this issue, you may speak to your nursing home Administrator about your concerns. You may also want to contact the Ombudsman Program. The telephone numbers for both agencies are posted in your nursing home. If you are not happy with his or her response, you may file a complaint with the Department of Health Services, Licensing and Certification District Office in your area.



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Nursing Home Residents' Rights

Your Right to be Informed of Charges

When you live in a nursing home, you have the right to be told about the cost of room, board, care, and any other services that you may receive. Nursing homes usually charge a daily rate.

Specifically, the nursing home will inform you about:

- ▼ What Medi-Cal will pay for if you are eligible.
- ▼ What Medi-Cal will not pay for, and the cost of those items or services.
- ▼ What care and services are included in the daily rate.
- ▼ What other services are available and what the charges are for these other services or items.
- ▼ Applying for Medicare and/or Medi-Cal benefits. If you are married and your spouse is at home, the nursing home must give you written information about standards for Medi-Cal eligibility.
- ▼ Using Medicare and/or Medi-Cal benefits.



- ▼ Any charges made for the items and services available in your nursing home and their new charges. This includes items and services in your daily rate and those that are available at an additional charge.
- ▼ The nursing home must give a 30-day notice prior to raising your daily room rate or charges for other services.
- ▼ The limitation which prevents the nursing home from charging you for items or services for which payment is made under Medicare or Medi-Cal.
- ▼ Your right not to be charged for an item or service you did not request. The nursing home should tell you the cost of an item or service when you request it.

For additional information, you may discuss your rights with the staff in your nursing home, or contact the Department of Health Services, Licensing and Certification District Office, or the Ombudsman Program in your county. The telephone numbers for both agencies are posted in your nursing home.

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Nursing Home Residents' Rights

Right of Choice—How Residents Spend Their Time

As a resident in a nursing home, you have the right to choose how you spend your time. You may participate in activities of your choosing. Both federal and state regulations give you the right to make choices. You have the right to participate in social, religious, and community activities inside and outside the facility that do not interfere with the rights of other residents in your nursing home.

Your nursing home protects this right by:

- ▼ Inviting you to participate in planning scheduled activities.
- ▼ Listening to your opinions and planning activities that are of interest to you.
- ▼ Offering a variety of activities at times convenient to you and the other residents in your nursing home. Activities should take place at different times throughout the day (morning, afternoon, evenings and weekends).
- ▼ Informing you of all planned activities in the nursing home so you can select those activities that are appropriate, meet the objectives in your plan of care, and are of interest to you.

- ▼ Helping you with arrangements to leave the facility when you want to participate in an activity outside of your nursing home.

Your nursing home must provide you with an ongoing program of activities. This activities program should be designed to meet your interests and enhance your physical, mental, and social well-being.

Choice in Schedules and Services

Your nursing home must encourage you to make as many choices as possible about your daily life. For example, you have the right to:

- ▼ Make reasonable choices about schedules. This means that you have the right to stay up late at night reading or watching television. You have the right to sleep late or to get up early, if you want. You do not have to get up and go to bed on a schedule that is set by the nursing home.



Continued on reverse



Right of Choice—How Residents Spend Their Time *(continued)*

- ▼ Request baths or showers, as you choose, at the time of day you choose. Your nursing home must respect your request as much as possible.
- ▼ Handle your own money.
- ▼ Have a choice in the foods that you eat, respecting cultural preferences as much as possible.
- ▼ Make decisions about your health care. For example, you have the right

to choose your physician and to participate in planning your care.

For additional information about your right to choices, you may ask the staff at your nursing home, or contact the Department of Health Services, Licensing and Certification District Office or the Ombudsman Program in your county. The telephone numbers for both agencies are posted in your nursing home.

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Nursing Home Residents' Rights

Informed Consent for Medical Treatment

What is informed consent?

Nursing homes cannot perform any medical treatment or procedure which could present a significant risk to you unless you are given certain information and agree to the treatment or procedure. If you do not have the ability to understand the information given about the proposed treatment, the information must be provided to your representative. Your representative may be a relative, a court appointed conservator, a person that you have chosen through a "Power of Attorney for Health Care," or some other representative chosen by you within the law.

Some questions that your doctor should answer are:

- ▼ What is the nature of the illness for which the treatment is being suggested?
- ▼ What procedures are to be used? For how long? How often?
- ▼ What are the risks of the procedures?
- ▼ What is the expected amount of improvement or decline (temporary or permanent) with the proposed treatment?

- ▼ What kind of side effects should you expect? How long will they last? How likely are they to occur?
- ▼ Are there any alternative treatments? Why is your doctor recommending this one?
- ▼ What are the risks and benefits of the suggested alternatives?

Remember:

You have the right to accept or refuse treatment, and if you accept, you have the right to change your mind for any reason at any time.

Your decision about the proposed treatment will be recorded in your health record. After it is recorded, the nursing home does NOT have to get your permission every time you have the treatment. You can change your mind about the treatment for any reason at any time.



Continued on reverse



Informed Consent for Medical Treatment *(continued)*

Although your doctor is only required to provide a full explanation for procedures which present a significant risk to you, you should know that a nursing home cannot give you ANY treatment or perform any procedure against your will.

Routine care, such as bathing, feeding, etc. does not require a full explanation from your doctor. Your consent for this type of treatment is usually implied or

may be stated as part of the admission agreement that you signed.

If you believe that you are receiving a treatment against your will, or have not been provided the information described above, contact the Department of Health Services, Licensing and Certification District Office in your area or the Ombudsman Program. The telephone numbers for both agencies are posted in your nursing home.

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Nursing Home Residents' Rights

Resident Assessment and Care Planning

When you enter a nursing home, you have a right to quality care and services which enable you to reach your highest levels of physical, mental, and emotional well-being, as defined in federal and state regulations. A thorough assessment and personalized care plan are the tools a nursing home is required to use to help you reach your maximum level of functioning. The assessment and care plan development are completed by a team of professionals, including your physician, a nurse, dietician, social worker, the activities director, and any other therapist involved in your care. This group of professionals is called an Interdisciplinary Team (IDT).

What is "Resident Assessment?"

Resident Assessment is a process by which nursing home staff identifies your health care needs, daily schedules and habits, and likes and dislikes. The process begins either before or at the time that you enter a nursing home, and



must be completed within 14 days of your admission. Nurses and other staff gather information from you, your physician, and your family so they can determine your current condition. This history-taking and examination process helps staff members understand your current health condition so that they can help you to live your life at your highest possible level of functioning.

What does the nursing home do with the information?

After staff members complete the resident assessment process, they use the confidential information to develop a plan for your care. This is referred to as a "care plan." The care planning conference occurs when you and your family meet with nursing staff and other specialists to develop a plan which sets measurable goals and recommends any necessary medical treatments to meet your needs. You and/or your family or representative are an important part of this process. Your nursing home must invite you and encourage you to be involved in the care planning process. You and/or your family or representative has the right to make choices about the care and treatment you receive, and may access your medical record if you desire.

Continued on reverse



Resident Assessment and Care Planning *(continued)*

For example:

- ▼ Facility staff should tell you about your medical condition and if a change occurs.
- ▼ You should be invited to attend those meetings where staff members will be discussing what they are planning to do to help you.
- ▼ The nursing home must ask what your preferences are.
- ▼ When you receive care, you must be told how the treatment will affect your condition.
- ▼ If you take medications, you must be informed about what medications you receive, why you receive them, and what their likely side effects are.
- ▼ If something is not going well for you in the nursing home, the staff should work with you to make changes in your care plan.
- ▼ You must be given the opportunity to discuss any problems at group meetings involving other residents

without facility staff present unless the residents invite them.

What if my condition changes?

Your nursing home is required to review your overall health condition every three months (called the “quarterly assessment”) and revise the assessment and care plan accordingly. If your condition changes more frequently, they must discuss this with you and adjust the plan of care to meet your changing needs. Examples of possible changes in one’s condition could include the development of a pressure sore, depression, unintentional weight loss, or any other change that does not allow you to function at your maximum potential.

For additional information about resident assessment and care planning, please contact your local Department of Health Services, Licensing and Certification District Office, or Ombudsman Program in your county. The telephone numbers for both agencies are posted in your nursing home.

Licensing and Certification District Offices:



Alameda	(866) 247-9100	Riverside	(888) 354-9203
Bakersfield	(866) 222-1903	Sacramento	(800) 554-0354
Chico	(800) 554-0350	San Bernardino	(800) 344-2896
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Nursing Home Residents' Rights

Right of Choice—Roommates and Furnishings

You have the right to make choices about your nursing home living arrangements.

For example:

- ▼ You must be notified in advance if your nursing home plans to move you or change your roommates.
- ▼ You have the right to refuse a room change if you are being moved because the payment source for your care changes. However, you may be responsible for any additional costs.
- ▼ You may use some of your personal belongings to decorate your room.

Items such as a bedspread, pillow, blanket, small dresser, lamp, TV, pictures, or other personal items are acceptable when there is space for them in your room, and such items do not infringe on the health or safety of residents.

For more information about these rights, you may speak with the staff in your nursing home or contact the Department of Health Services, Licensing and Certification District Office, or the Ombudsman Program in your county. The telephone numbers for both agencies are posted in your nursing home.



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Nursing Home Residents' Rights

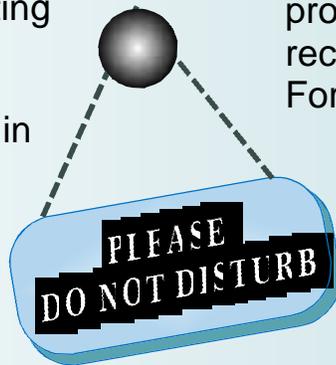
Personal Privacy—What Does That Mean?

You have the right to expect personal privacy. Among other things, personal privacy means staff members will not expose your body or invade your privacy unnecessarily.

Staff will protect your privacy by:

- ▼ Announcing themselves or knocking on the door before entering your room or going behind the privacy curtain.
- ▼ Closing the door to your room and pulling the privacy curtain when providing or assisting you with personal care.
- ▼ Providing personal care in a manner so that others do not view your unclothed body.
- ▼ Assuring privacy and safety while you are using the toilet.
- ▼ Transporting you to the bathing facilities in such a manner that you are not exposed.
- ▼ Assuring privacy and safety while you are bathing.
- ▼ Assuring privacy of your health and financial records, except when those records are needed by another health facility when you transfer or when the release of those records is required by law.

These guidelines are intended to both protect your personal privacy and provide for your safety while you are receiving or completing personal care. For additional information about your right to personal privacy, you may contact the Department of Health Services, Licensing and Certification District Office or the Ombudsman Program in your county. The telephone numbers for both agencies are posted in your nursing home.



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Safeguarding of Personal Funds

You have the right to handle your own financial affairs while you are in a nursing home. However, if you wish, you may request that the nursing home handle some or all of your money for your personal use. This allows you to have some cash or spending money when you request it.

If you request in writing that the nursing home handle some or all of your personal funds, you should know that:

- ▼ The nursing home may not refuse to handle your money.
- ▼ The nursing home cannot force you to have them act as your payee.
- ▼ You should be able to withdraw cash within a reasonable period of time.
- ▼ You will receive a quarterly statement concerning any money handled by your nursing home, and you or your representative may request a statement at any other time.
- ▼ If your source of payment in the nursing home is Medi-Cal reimbursements, and your nursing home handles more than \$50 of your money, it must be placed in an interest bearing account, separate



from the facility's money. If your source of payment is Medicare, your nursing home must deposit any funds in excess of \$100 into an interest bearing account, separate from the facility's money. Any interest earned will be credited to your account. If the nursing home handles less than the amount they are required to deposit for you, the home is not required to, but has the option of placing the money in an interest bearing account. If it does, any interest earned will be credited to your account.

- ▼ If you are on Medi-Cal, you will receive notice when the account reaches \$200 less than the SSI limit for one person.
- ▼ All of your money and valuables must be surrendered to you within three normal banking days of your discharge.
- ▼ No owner, staff member, or representative of a public agency working in the nursing home, or their immediate family members, may purchase or receive from you any item that is worth more than \$100 dollars, unless the transaction is made in the presence of an Ombudsman.

For additional information, you may discuss your rights with the staff in your

Continued on reverse



Safeguarding Personal Funds *(continued)*

nursing home, or contact the Department of Health Services, Licensing and Certification District Office, or the Ombudsman Program in your county.

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Nursing Home Residents' Rights

Right to Privacy—Visitors, Phone Calls, Mail

When you live in a nursing home, you have the right to expect privacy when you visit, have telephone conversations, or exchange mail with family, friends, government representatives, Ombudsmen, or anyone else.

Visitors

If married, you have the right to be assured privacy for visits by your spouse. If both you and your spouse are residents in the nursing home, you have the right to share a room.



The right to privacy when visiting does not require the nursing home to provide private rooms for everyone. Because not everyone has a private room, it is necessary to be flexible so roommates may have a quiet place to rest, sleep, or receive treatment. The staff in your home will help you find a private place for visiting.

The nursing home may not put unreasonable limitations on visiting hours, and may not limit visits from certain individuals. All court orders regarding visitor limitations will be honored. The nursing home should work with all residents to accommodate their needs while protecting the privacy of others who live there.

Phone Calls

As a resident in a nursing home, you have the right to have access to a telephone. Telephones for residents to use should be:

- ▼ Located in an area where your conversation will not be overheard.
- ▼ Easy to reach for those residents in wheelchairs.
- ▼ Adapted for use by the hearing impaired.

This right does not mean that your nursing home must provide you with a private phone or that it must pay for your long distance phone calls.

Mail

You also have the right to send mail and receive mail that is unopened.

Continued on reverse



Right to Privacy—Visitors, Phone Calls, Mail *(continued)*

You should receive your mail unopened and on the days there is mail delivery to your nursing home.

The nursing home must have stamps and letter writing materials available. However, it is not required to provide these materials free to residents.

If finding a place to meet privately with your visitors is a problem, or if the time

your visitors are allowed to visit seems too short, you may discuss this right with the nursing home staff or contact the Department of Health Services, Licensing and Certification District Office, or the Ombudsman Program in your county. The telephone numbers of both agencies are posted in your facility.

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Nursing Home Residents' Rights

Abuse—What to Do

You have the right to be free from abuse and neglect by anyone in your nursing home, including staff members, other residents, volunteers, family, friends, or any other individual. There are different kinds of abuse.

Physical Abuse

Includes hitting, striking, pinching, slapping, shaking, pushing, grabbing, handling in a rough manner, or injuring someone in another way. It also includes prolonged, excessive, inappropriate, or unauthorized use of physical restraints or drugs used to control your behavior.

Verbal Abuse

Includes name calling, yelling, swearing, frightening, belittling, intimidating, or threatening someone.

Sexual Abuse

Includes sexual contact, sexual harassment, sexual coercion, and sexual assault. There should never be sexual contact between a staff member and residents.

Emotional Abuse

Includes belittling, causing fear or shame, threatening to punish residents for their behavior, threat of eviction, or

encouraging a resident to pay for favors or attention. It may also include encouraging you to purchase gifts that you do not want to buy.

Financial Abuse

Includes theft of property or money and misappropriation of personal funds, such as charging for items of service included in the daily rate or for items or services you did not request.

Neglect

Includes being ignored or being treated with indifference, not receiving basic medical or personal care (such as assistance with personal hygiene, adequate food, liquids, shelter, and clothing) and protection from health and safety hazards.

Isolation

Includes involuntary seclusion, being prevented from meeting with visitors, or not having privacy with regards to telephone calls or mail.

If you believe that you or another resident is being abused, you should immediately tell your Administrator and contact the Licensing and Certification District Office or the Ombudsman Program in your county. The telephone

Continued on reverse



Abuse—What to Do *(continued)*

number for the local Ombudsman Program is posted in your nursing home. The nursing home must thoroughly investigate any alleged abuse and must report any alleged abuse to the local Ombudsman and/or police. In addition, they must report any “unusual occurrence” which threatens the welfare, health, or safety of residents to the local Department of Health Services, Licensing and Certification office within 24 hours of the occurrence. You may also want to call the police department if

there has been physical or sexual abuse or other serious crimes.

If you do not want to discuss the problem with anyone in the nursing home, and you believe that you or someone else at the nursing home was abused, you may call the Department of Health Services, Licensing and Certification District Office, or the Ombudsman program. The telephone numbers for both agencies are posted in your nursing home.



Licensing and Certification District Offices:

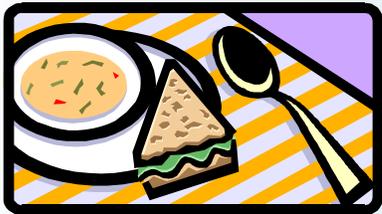


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Nursing Home Residents' Rights

What You Should Know About Food, Eating, and Nutrition Care in a Nursing Home

Food and eating are important parts of everyone's daily life. While you are a resident in a nursing home, this enjoyable, often relaxing activity should not change. You have certain rights regarding the type of diet and nutritional services you receive. Also, the facility has certain responsibilities to ensure that all of these rights are respected and that you receive adequate nutrition. However, your rights do not override food safety.



Treatment and Care Issues

Did you know that you have the right to:

- ▼ Be involved in planning your care and treatment. You can make informed decisions regarding your food, including your therapeutic diet.
- ▼ Be allowed to make informed decisions regarding the texture of food (soft, chopped, or pureed/blended).
- ▼ Be told in advance and be involved regarding any changes in your diet.

- ▼ Participate in planning your treatment for weight maintenance, weight loss, or weight gain.
- ▼ Develop advance health care directives stating whether or not you want tube feeding and intravenous (I.V.) therapy, if unable to eat.

The United States is made up of people from all over the world and food plays an important role in each of these cultures. How it is prepared, when it is prepared and how it is eaten, are all important. The facility should recognize the fact that individuals have different preferences and add more variety to food choices.

Meals

Did you know that you have the right to:

- ▼ Choose when and where to eat in the facility, and whether or not you want to eat with others, or by yourself.
- ▼ Be served in a reasonable period of time after being seated at the dining table.
- ▼ Be allowed to receive gifts of food, according to facility policy.
- ▼ Be served meals at the same time as your table companions or roommate.

Continued on reverse



What You Should Know About Food, Eating, and Nutrition Care in a Nursing Home *(continued)*

Facility Requirements

It is the facility's responsibility to:

- ▼ Serve nutritious foods you like within your preferences, which include your cultural and religious preferences.
- ▼ Serve you foods that are nutritious, tasty, attractive, and prepared at the proper temperature.
- ▼ Provide preferred food items, such as shelled eggs, that have been technologically altered to meet food safety standards.
- ▼ Serve you meals in a timely manner, and provide prompt, courteous assistance with eating.
- ▼ Provide specialized dinnerware and eating utensils, which are specifically designed to meet your special needs.
- ▼ Provide a dining room that is comfortable, cheery, home-like, and safe, and promotes a social atmosphere.
- ▼ Provide another food that is equally nutritious if you do not like the food listed on the menu.
- ▼ Offer you a bedtime snack each night.

Every nursing home must provide meals that meet daily and special dietary needs of each resident. All diets must be prescribed by your attending doctor.

For assistance or questions regarding these rights, contact the Dietitian or the Dietary Service Supervisor in your nursing home, or call the Department of Health Services, Licensing and Certification District Office in your area. You may also want to contact the Ombudsman Program. The telephone numbers for both agencies are posted in your nursing home.

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Nursing Home Residents' Rights

Right of Choice—Health Care Decisions

Federal and state regulations give you, as someone who lives in a nursing home, the right to be treated with respect and dignity and to make choices about how you want to live your everyday life and receive care. The nursing home must provide you with the necessary care and services to attain or maintain your highest practicable level of physical, mental, and social well-being. You have the right to take part in the process that decides what those services will be.

What about health care choices and decisions?

You have the right to:

- ▼ Choose a personal attending physician.
- ▼ Be fully informed of your total health status. This includes your medical condition, opportunities for restoring you to your former level of fitness, your ability to carry out daily living tasks, and all other aspects of care



you are receiving. This information must be presented in a language you can understand.

- ▼ Receive all information you need to know in order to make a decision about your care and treatment.
- ▼ Participate in developing your care and treatment plans. You also have the right to have a family member or representative participate on your behalf or with you during these meetings.
- ▼ Be fully informed of the benefits and risks of a proposed treatment or any recommended changes in your care and treatment. If the Interdisciplinary Team (IDT), composed of your doctor, nurse, dietician, social worker, or any other therapists involved in your care, recommends the use of a physical or chemical restraint, your doctor must first obtain “informed consent” from you or your representative, if you are unable to give consent. Informed consent means that you are given all the information necessary to allow you or your representative to decide when to accept or refuse treatment. Information includes such things as the duration of the treatment, the benefits and risks of the treatment, possible side effects, and other alternatives.

Continued on reverse



Right of Choice—Health Care Decisions *(continued)*

- ▼ Be free from physical and chemical restraints, except for limited periods of time in an emergency situation when you or someone else would be in danger.
- ▼ Refuse treatment. If you are able to make health care decisions, you may refuse any plan of care, treatment, or procedure. You cannot be treated against your wishes. If you have given “informed consent,” you can revoke it at any time. You can also choose someone to make health care decisions for you should you no longer be able to make decisions for yourself.
- ▼ Refuse to participate in experimental research. This research may be the development and testing of new drugs or new methods of treatment.
- ▼ Prepare an Advance Health Care Directive that allows you to say who you want to speak for you and what kind of treatments you want. These documents are called “advance” because you prepare one before healthcare decisions need to be made. They are called “directives” because they state who will speak on your behalf and what should be done.
- ▼ Look at your health records, financial records, or any other record that the facility keeps about your care within 24 hours of your request. You will not be charged to look at your records. However, if you would like copies of anything, the nursing home may charge you a fee equal to the standard cost of having copies made by businesses in your community. Any copies you request must be given to you within two working days. You may also allow access to your records by anyone of your choice.
- ▼ Be free to purchase drugs or medical equipment from any pharmacy, not just the one contracted by the nursing home.

For additional information about your rights as a resident in this nursing home, you may ask the nursing home staff, contact the local Department of Health Services, Licensing and Certification District Office, or the local Ombudsman Program. The telephone numbers for both agencies are posted in your nursing home.

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Nursing Home Residents' Rights

Advance Health Care Directives

An Advance Health Care Directive (AHCD) is a written power of attorney for health care naming someone to make health care decisions for you that may be oral or written. The AHCD communicates your wishes about the care and treatment you want, and who you want to speak for you if you reach a point where you can no longer make your own health care decisions.

All hospitals, nursing homes, home health agencies, hospices, and health maintenance organizations that receive Medicare and Medi-Cal payments must provide patients with written information about making an AHCD. The law does not require that you must have or make an AHCD.

Under California law, adult persons who can make their own decisions have the right to accept or refuse medical treatment or life sustaining procedures. Some examples of medical procedures that you have the right to refuse might be artificial nutrition (feeding through a tube) and hydration (usually intravenous fluids).



The Advance Health Care Directive (AHCD)

- ▼ This is a written or oral instruction that allows the person you choose (agent or surrogate) to make health decisions for you when you are no longer able to make such decisions.
- ▼ If you already have a Durable Power of Attorney for Health Care, it is still valid and does not have to be replaced by the new AHCD unless your health care instructions, or the person you choose to make decisions for you have changed.
- ▼ You should select a person who knows you well, and whom you trust to carry out your directions.
- ▼ The agent or surrogate may not be a “supervising health care provider” even if related to you by blood, marriage, and adoption, or registered domestic partnership. The intent of this is to avoid a conflict between who is proposing or providing treatment and who is making a decision about treatment.
- ▼ If you are currently a resident of a nursing home and preparing a new AHCD, it must be witnessed by two qualified adult witnesses, one who

Continued on reverse



Advance Health Care Directives (*continued*)

must be with the Ombudsman Program. Your physician, the person you are designating as your agent or a nursing home employee may not act as witnesses.

- ▼ You do not need an attorney to complete the AHCD.
- ▼ You are NOT required to complete an AHCD when you enter a nursing home.
- ▼ You make your wishes known, orally and/or in writing by declaring your desire to receive or not receive life-sustaining treatment under certain conditions and outline your instructions pertaining to health care.

Reasons why you may want to prepare an Advance Health Care Directive:

- ▼ To ensure that you receive the care and services you desire.
- ▼ To ensure that care and services are not given when you indicated that you do not want them.
- ▼ To designate the person (agent or surrogate) you would like to make decisions on your behalf.
- ▼ To ensure that family, friends, and your health care provider understand your wishes regarding health care. If you do not make your wishes clear,

your family members, friends and health care provider may not agree about what type of care and treatment you would want. Without an AHCD, there is a possibility that your desires would not be carried out.

By being prepared with an AHCD, you say **WHAT** types of treatment you want or do not want, and you determine **WHO** you want to speak for you if you cannot make your own decisions.

What if I change my mind after completing the AHCD?

- ▼ If you are capable of making your own decisions, you can revoke or change an AHCD at any time by informing your surrogate or agent orally or in writing. The revocation must be clearly documented by health care providers. Completion of a properly completed new AHCD form revokes the old form.
- ▼ You should notify any agents, surrogates, and your health care provider of your AHCD changes, especially if you have named a different person as your agent or surrogate.

How long is an AHCD valid?

A written AHCD is valid forever unless you revoke it or state on the form a

Continued



Advance Health Care Directives (continued)

specific date on which you want it to end. An oral AHCD naming a surrogate is valid only during a specific course of treatment, illness, or stay in the facility. An oral designation of surrogate supercedes a previous written one. An oral individual health care instruction is valid until you revoke it.

Other documents that help determine your health care desires if and when you are unable to make such decisions for yourself:

Do Not Resuscitate

You may include your directions regarding CPR, also called Cardio Pulmonary Resuscitation. Directions to your family and physician for “no resuscitation” ensures that if your heart or respiration stops, no CPR will be started. Your wishes should be clear to your family, legal representative, or decision-maker, and you may sign a form along with your physician designating your wishes. No one can

make you sign such a form—it is your choice. Your agent or surrogate may sign this form if you are unable to and this is consistent with your wishes.

Preferred Intensity of Treatment Form

This is a document that your physician may use after a discussion with you and/or your surrogate or agent about your preferences for care. You may decide to receive an antibiotic, or an intravenous or other treatment, specific to a medical problem. Your physician would document your decision in your medical record.

Some Other Good Ideas

Keep a few current copies of your AHCD form on hand as well as keeping a list of people who have a copy of the AHCD.

Keep a copy of the AHCD form in your wallet or purse with your health insurance card. This may assist emergency personnel to know what your wishes for care are in the event that you are unable to tell them.

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Nursing Home Residents' Rights

Your Right to be Free from Restraints

As a resident in a nursing home, you have the right to be free from physical and chemical restraints when you decline their use or placement. Your nursing home must ensure that this right is not violated and must obtain informed consent for their use.

What is a physical restraint?

A physical restraint is anything that is attached to or placed next to your body that limits your movement or access to your body. Physical restraints include leg or arm restraints, hand mitts, vests, cloth ties, wheelchair safety bars, or anything else that prevents you from moving around. Other ways to restrain you are moving your wheelchair against a wall so that you cannot move, using a bedrail to prevent you from getting out of bed, or tucking in a bed sheet so tightly that you cannot move. Nursing homes are not allowed to restrain you or do any thing to limit your movement unless you give them permission, or your representative, if you are unable to give consent.

When may a restraint be used?

A restraint may only be used to treat your medical symptoms and only if the restraint will assist you in reaching your highest possible functioning. Before

using restraints, your nursing home must try other methods of care that are not restraints. These methods may include providing you with therapy to improve your ability to stand and walk, or lowering your bed so that you will be less likely to hurt yourself if you try to get out of bed (especially during the night to go to the bathroom). Your nursing home may also try to use pillows, pads, or lap trays instead of restraints to help you maintain good body position and balance.

If these other kinds of methods have not helped you enough, your nursing home may recommend the use of restraints. The need for restraints is discussed with your doctor and they must write an order for the restraint, and describe the symptoms that the restraint is being ordered to address. Your doctor will discuss this with you and explain the reason for the restraint and the possible side effects before the restraint is applied. These side effects may include incontinence (inability to control your urine or bowels), reduced ability to walk and to move your limbs, and increased sadness or depression. Except in an emergency, your nursing home may not use restraints unless you or your representative, if you are unable, agrees in advance to their use.

Continued on reverse



Your Right to be Free From Restraints *(continued)*

If restraints are necessary and if you agree to use them, your nursing home must use the least confining restraint possible. Your nursing home must also take steps to try to reduce or eliminate your need for restraints at all.

What is a chemical restraint?

A chemical restraint is any drug that is used for discipline or convenience and is not required to treat medical symptoms.

Except for limited periods of time in cases of emergency, where you are in danger of harming yourself or others, the nursing staff cannot give you a drug or apply a physical restraint unless you or your representative, if you are unable, gives permission.

If your nursing home tells you that your doctor ordered chemical or physical restraints to be used, before your doctor can do this he or she must first give you



enough information to help you decide whether or not you want the drug or physical restraint. Your doctor must also write in your medical records the

duration and circumstances under which the restraints are to be used. If you do not have the ability to understand the information given about the proposed drug or physical restraint, the information must be provided to your representative. Your representative may be a relative, a court appointed conservator, a person you have chosen through an Advanced Health Care Directive, or some other representative chosen by you, within the law.

Some questions that your doctor should answer:

- ▼ What is the reason for the proposed restraint? What medical symptom is it treating?
- ▼ Can the medical problem be treated without using a restraint? Has the facility attempted to use an alternative to a restraint?
- ▼ What procedures are being used? For how long? How often? Is the restraint the least confining restraint possible?
- ▼ What are the risks and benefits of the restraint as compared to being without the restraint?
- ▼ What kind of side effects should you expect? How long will they last? How likely are they to occur?
- ▼ What other options do you have and why is your doctor recommending this one?

Continued



Your Right to be Free From Restraints *(continued)*

Remember:

It is important for you to remember that you have the right to agree to or refuse the restraints, and if you accept, you have the right to change your mind for any reason at any time.

If you are being restrained and believe that you have not been provided enough information about restraints, you should

Speak with your doctor or the nursing staff about your concerns. If you are not satisfied with their response or do not feel comfortable talking with them about your problem, contact the Department of Health Services, Licensing and Certification District Office in your area or the Ombudsman Program. The telephone numbers for both agencies are posted in your nursing home.

Licensing and Certification District Offices:



Alameda	(866) 247-9100	Riverside	(888) 354-9203
Bakersfield	(866) 222-1903	Sacramento	(800) 554-0354
Chico	(800) 554-0350	San Bernardino	(800) 344-2896
Contra Costa	(800) 554-0352	San Diego North	(800) 824-0613
Daly City	(800) 554-0353	San Diego South	(866) 706-0759
Fresno	(800) 554-0351	San Jose	(800) 554-0348
Los Angeles	(800) 228-1019	Santa Rosa	(800) 554-0349
Orange	(800) 228-5234	Ventura	(800) 547-8267
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State Ombudsman Office: (800) 231-4024

**Department of Health Services
Licensing and Certification
Residents' Rights
Toll free: (866) 447-4518**

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Secretary
Health and Human Services Agency



Sandra Shewry
Director
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