PART 5 – RESIDENT CARE

...5.1.1 QUALITY OF LIFE.

Residents shall be provided: a safe, supportive, comfortable, homelike environment; freedom and encouragement to exercise choice over their surroundings, schedules, health care, and life activities; the opportunity to be involved with the members of their community inside and outside the nursing home; and treatment with dignity and respect.

5.1.8 WEIGHT CHANGES.

The facility shall:

...(4) provide reasonable choices of foods to meet personal preferences and religious needs.

5.1.9 GROOMING.

(1) The facility shall assist the resident to obtain appropriate materials for personal care for the resident, provide personal care in a manner that preserves resident dignity and privacy, and provide social services intervention, if needed.

5.1.12 PERSONAL ENVIRONMENT.

The facility shall allow for personalization of rooms through the use of resident's personal furniture, appliances, decorations, plants, and memorabilia. The facility may limit the number of furniture items in resident rooms if to do so is necessary to accommodate roommate preferences, fire codes, housekeeping, or safe movement in the room.

5.1.13 PERSONAL CHOICE.

The facility shall:

(1) make reasonable efforts to accommodate preferences of roommate, including the right of each resident so requesting to be assigned to a room with non-smokers;

(2) allow residents flexibility in times to eat main meals, consistent with requirements of Section 11.2 and with its own reasonable staffing and scheduling requirements;

(3) allow residents flexibility in times to bathe, rise and retire, consistent with its own reasonable staffing and scheduling requirements;

(4) provide at least one alternative menu choice for each meal of similar nutritive value. The same alternative shall not be used for two consecutive meals.

5.5 ACTIVITIES CARE PLANNING.
Activities staff shall assess activities needs within one week of admission and shall develop an activities care plan to meet each resident’s needs.

5.7 INTERDISCIPLINARY CARE PLANNING.

...5.7.3 The interdisciplinary team shall consist of representatives of resident services inside and outside the facility, as appropriate, including at least nursing, social services, activities, and dietetic staff. Other persons, such as medical, pharmacy, and special therapies, shall be included as appropriate. Residents and their representatives shall be invited to participate in care planning. Refusal to participate shall be documented.

PART 9 – RESIDENT ACTIVITIES

9.1 ACTIVITIES PROGRAM.

The facility shall offer a program of organized activities that promotes residents' physical, social, mental, and intellectual well-being, encourages resident independence and pursuit of interests, maintains an optimal level of psycho-social functioning, and retains in residents a sense of continuing usefulness to themselves and the community.

...9.3 RELIGIOUS SERVICES.

The facility shall assist residents who are able and wish to do so to attend religious services of their choice. The facility shall honor resident requests to see their clergy and provide private space for such visits.

PART 11 – DIETARY SERVICES

11.6 NUTRITIONAL ASSESSMENT AND PROGRESS NOTES.

...11.6.2 The facility shall reasonably accommodate individual resident preferences in meals by offering appropriate and nutritionally adequate substitutes. (See Section 5.1.13(4).)

...11.8 MENUS. Menus shall meet the requirements of the Dietary Guidelines for Americans, 2005, U.S. Department of Health and Human Services and U.S. Department of Agriculture, 6th Edition. Menus shall be written, approved by a dietitian and planned at least one week in advance, with consideration given to residents' personal tastes, desires, and cultural patterns.

PART 12 – RESIDENTS’ RIGHTS

12.1 RESIDENTS’ RIGHTS.

12.1.2 The right to civil and religious liberties, including:

(1) Knowledge of available choices and the right to independent personal decisions, which will not be infringed upon;

(4) The right to participate in activities of the community both inside and outside the facility;
12.1.3 The right to present grievances on behalf of him/herself or others to the facility’s staff or administrator, to governmental officials, or to any other person, without fear of reprisal, and to join with other patients or individuals within or outside of the facility to work for improvements in resident care, including:

(1) The right to participate in the resident council;

12.1.6 The right to be adequately informed of his or her medical condition and proposed treatment unless otherwise indicated by his or her physician, and to participate in the planning of all medical treatment, including:

(1) The right to refuse medication and treatment, unless otherwise indicated by his or her physician, and to know the consequences of such action;

(2) The right to participate in discharge planning

12.1.7 The right to have private and unrestricted communications with any person of his or her choice; including

(1) The right to privacy for telephone calls;

(2) The right to receive mail unopened;

(3) The right to private consensual sexual activity;

12.1.9 The right to freedom of choice in selecting a health care facility;

... 12.1.12 The right to have privacy in treatment and in caring for personal needs, confidentiality in the treatment of personal and medical records, and security in storing and using personal possessions;

12.1.13 The right to be treated courteously, fairly, and with the fullest measure of dignity and to receive a written statement of the services provided by the facility, including those required to be offered on an as-needed basis;

12.5 RESIDENT ADVISORY COUNCIL. Each facility shall establish a resident advisory council consisting of no less than five members selected from the facility’s residents.

12.5.1 The council shall be conducted by residents. It shall have the opportunity to meet without staff present and shall meet at least monthly with the administrator and a staff representative to make recommendations concerning facility policies. Staff shall respond to these suggestions in writing by the next meeting. Minutes of council meetings shall be maintained and posted or otherwise available to residents.

12.5.2 The council may present grievances to the grievance committee on behalf of residents.

12.5.3 The council shall elect its officers and establish a process for obtaining views of all facility residents.

Part 18. RESIDENT CARE UNIT
18.2 PRIVATE AND MULTIPLE BEDROOMS. The long-term care facility shall provide private and multiple bedrooms to meet resident needs. There shall be no more than four beds per room.

18.2.2 * Privacy shall be provided for each resident in a multiple bedroom by the installation of opaque flame retardant cubicle curtains or movable screening.