3. RESIDENTS’ RIGHTS

3.6 Treatment and Experimental Research

(a) Each resident shall be afforded the opportunity to participate in the planning of his or her medical treatment.

(b) To the extent permitted by law, the resident has the right to refuse care or treatment, including the right to refuse restraint and to discharge himself or herself from the facility, and to be informed of the consequences of that action. The nursing home shall be relieved of any further responsibility for that refusal.

(c) Any resident may refuse to participate in experimental research.

3.8 Advance Directives

(a) The right to formulate an advance directive applies to each individual resident without restriction.

(b) The facility must maintain written policies and procedures regarding advance directives. These requirements include provisions to inform and provide written information to all adult residents concerning the right to accept or refuse medical or surgical treatment and, at the individual’s option, formulate an advance directive. This includes a written description of the facility’s policies implementing advance directives.

(c) A facility must have the capacity to administer cardiopulmonary resuscitation (CPR) to any resident when necessary and in accordance with the resident’s advance directives.

3.9 Right to Choose Personal Physician

The resident shall have the right to choose his or her own personal physicians, and the right to request and receive a second opinion from a physician of the resident’s choice where significant alternatives for care or treatment exist, or when the resident requests information concerning care or treatment alternatives, the resident shall receive such information from his or her doctor or the administrator, as appropriate.

4. QUALITY OF LIFE

A facility must care for its residents in a manner and in an environment that promotes maintenance or enhancement of each resident’s quality of life.

4.1 Dignity

Each resident shall be treated with consideration, respect, and full recognition of his or her dignity and individuality, including privacy in treatment and in care of his or her personal
needs. The resident shall have the exclusive right to use and enjoy his or her property, and such property shall not be used by other residents or staff without the express permission of the resident.

4.2 Privacy

(a) The resident may associate and communicate privately with persons of his or her choice.

(b) The resident may receive his or her personal mail unopened.

(c) If married, in a civil union or in a reciprocal beneficiary relationship, a resident shall be assured privacy for visits; if both are residents of the facility, they are permitted to share a room.

(d) Residents shall be assured reasonable access to a telephone located in a quiet area where the resident can conduct a private conversation.

4.3 Self-Determination and Participation

The resident has the right to:

(a) choose activities, schedules, and health care consistent with his or her interests, assessments and plans of care;

(b) interact with members of the community both inside and outside the facility;

(c) make choices about aspects of his or her life in the facility that are significant to the resident; and

(d) retain and use his or her personal clothing and possessions as space permits, unless to do so would infringe upon rights of other residents.

4.4 Resident and Family Groups

Each resident shall be encouraged and assisted, throughout his or her period of stay, to exercise his or her rights as a resident and as a citizen and to this end may voice grievances and recommend changes in policies and services to facility staff or to outside representatives of his or her choice, free from restraint, interference, coercion, discrimination or reprisal.

(a) The resident has the right and the facility must provide immediate access to any resident by the following: any representative of the State, the ombudsman, and any other person of the resident’s choosing.

(b) Residents and their families, including a reciprocal beneficiary, shall have the right to organize, maintain, and participate in either resident or family councils or both.

(c) A resident has the right to organize and participate in resident groups in the facility.

(d) A resident’s family, including a reciprocal beneficiary, has the right to meet in the facility with the families of other residents.
(e) The facility must provide a resident or family group, if one exists, with private space for meetings.

(f) The facility shall provide assistance for meetings, if requested.

(g) Staff or visitors may attend meetings only at the group's invitation.

(h) The facility shall respond in writing to written requests from council meetings. Resident councils and family councils shall be encouraged to make recommendations regarding facility policies.

(i) The facility must provide a designated staff person responsible for providing assistance and responding to written requests that result from group meetings.

(j) When a resident or family group exists, the facility must listen to the views and act upon the grievances and recommendations of residents and families concerning proposed policy and operation decisions affecting resident care and life in the facility.

4.5 Participation in Other Activities

A resident has the right, at his or her discretion, to participate in social, religious and community activities that do not interfere with the rights of other residents in the facility.

6. COMPREHENSIVE CARE PLANS

6.2 Procedure for Preparation of Care Plan

(a) A comprehensive care plan must be:

(2) prepared by an interdisciplinary team, which includes the attending physician, a registered nurse with responsibility for the resident, and other appropriate staff in disciplines as determined by the resident's needs, and, to the extent practicable, the participation of the resident, the resident's family and/or the resident's legal representative; and

6.4 Discharge Summary

When a discharge is anticipated, a facility must prepare for the resident a discharge summary that includes:

(c) a post-discharge plan of care that is developed with the participation of the resident and his or her family, which will assist the resident to adjust to his or her new living environment.

8.4 Resident Rooms

... (b) Bedrooms must:

... (4) be designed or equipped to assure full visual privacy for each resident