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

(a) Dignity. The facility shall promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality.

(b) Self-determination and participation. The resident shall have the right to:

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

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

(3) make choices about aspects of his or her life in the facility that are significant to the resident.

(c) Participation in resident and family groups.

(1) A resident shall have the right to organize and participate in resident groups in the facility;

(2) A resident's family shall have the right to meet in the facility with the families of other residents in the facility;

(3) The facility shall provide a resident or family group, if one exists, with private space;

(4) Staff or visitors shall be allowed to attend meetings at the group’s invitation;

(5) The facility shall provide a designated staff person responsible for providing assistance and responding to written requests that result from group meetings;

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

(d) Participation in other activities.

(1) A resident shall have the right to participate in social, religious, and community activities that do not interfere with the rights of other residents in the facility.

(2) The facility shall arrange for opportunities for religious worship and counseling for any residents requesting such services.

(e) Accommodation of needs. A resident shall have the right to:

(1) reside and receive services in the facility with reasonable accommodation of individual needs and preferences,
except when the health or safety of the individual or other residents would be endangered; and

(2) receive notice before the resident's room or roommate in the facility is changed.

(f) Activities.

(1) The facility shall provide for an ongoing program of activities designed to meet, in accordance with the comprehensive resident assessment, the interests and the physical, mental and psychosocial well-being of each resident. The activities program shall:

(i) encourage the resident's voluntary choice of activities and participation; and

(ii) promote and maintain the resident's sense of usefulness to self and others, make his or her life more meaningful, stimulate and support the desire to use his or her physical and mental capabilities to the fullest extent and enable the resident to maintain a sense of usefulness and self-respect.

(2) The activities program shall be directed by a qualified professional who:

(i) is a qualified therapeutic recreation specialist who is eligible for certification as a therapeutic recreation specialist by a recognized accrediting body on or after August 1, 1989; or

(ii) has 2 years of experience in an age-appropriate social or recreational program within the last 5 years, 1 of which was full-time in a patient or resident activities program in a health care setting; or

(iii) is a qualified occupational therapist or occupational therapy assistant.

(3) The activities program director shall be responsible to the administrator or his or her designee for administration and organization of the activities program and shall:

(i) assist in the selection and evaluation of activities program staff and volunteers;

(ii) assign duties and supervise all activities staff and assigned volunteers;

(iii) ascertain, initially from the resident's attending physician, and on an ongoing basis from other appropriate professional staff, which residents are not permitted for specific documented medical reasons, to participate in certain activities;

(iv) develop and prepare with the resident and designated representative, as appropriate, a written plan for individual, group and independent activities in accordance with his or her needs, interests and capabilities, and in recognition of his or her mental and physical needs and interests, as well as education and experiences.

(v) incorporate the activities into the resident's interdisciplinary care plan;

(vi) periodically, and at least quarterly, review with the resident, designated representative and staff, as appropriate his or her activities program participation and revise the plan as necessary; (vii) coordinate and
incorporate the activities program with the resident's schedule of other services through discussions with the interdisciplinary care team;

(viii) develop a monthly activities schedule based upon individual and group needs, interests and capabilities considering the special needs of residents including but not limited to dementias, physical handicaps, visual, hearing and speech deficiencies and wheelchair or bed restrictions;

(ix) post the current monthly activities schedule where it is accessible to residents and staff and can be easily read and provide a copy to residents upon request; and

(x) include in the resident's clinical record a quarterly assessment of the resident's degree of participation in, response to and benefit from the activities program.

(4) The facility shall:

(i) employ such additional qualified personnel responsible to the activities director, as are needed;

(ii) provide a planned program to include individual, group and independent programs for all residents at various times of the day and evening seven days of the week;

(iii) provide safe and adequate space and an adequate number and variety of equipment and supplies for the conduct of the on-going program; and

(iv) develop, facilitate access and implement programs to encourage residents to establish and maintain community contacts.

(g) Social Services.

(1) The facility shall provide for a social service program to meet the psychosocial needs of the individual resident which will provide services, based upon a comprehensive assessment, which will assure the maximum attainable quality of life for the residents, the residents' emotional and physical well-being, self-determination, self respect and dignity. Such services shall include:

(i) conducting an initial admissions assessment and interview with the resident and family to evaluate the appropriateness of placement and identify the need for special services;

(ii) interpreting the residents' rights to family and staff;

(iii) advocating for the resident with personal and social problems and problems involved with institutionalization;

(iv) facilitating needed communication with other disciplines on behalf of the residents, including medical, nursing, dietary, rehabilitation and psychiatric services;

(v) coordinating and monitoring needed available services for individual residents to assure optimum level of emotional, physical and psychological well-being and independence based upon educational background;
(vi) involving the resident, other disciplines and administration as appropriate regarding matters such as bed retention, room change, transfer and discharge;

(vii) interpreting residents' needs and behaviors and extending professional intervention to all levels of staff suggesting positive approaches, such as alternatives to the use of restraints and psychotropic drugs.

(viii) initiating and facilitating small group meetings of residents, family and staff directed at a fuller understanding of the institutionalized resident and fuller joint participation in improving the residents' emotional and physical well-being;
(ix) initiating and participating in interdisciplinary meetings and team conferences;

(x) providing assistance and support to residents' family members;

(xi) arranging for residents and families to meet with Department of Health surveillance staff as necessary;

(xii) participating, if requested by residents, in the organization and on-going functioning of the resident and family councils;

(xiii) making available social work staff at varying schedules, including weekends and evenings;

(xiv) coordinating and facilitating the referral of residents for needed and requested services and outside resources not available in the facility; and

(xv) organizing bereavement counseling for roommates, families and other affected individuals.

(2) The facility shall employ a qualified social worker. Facilities with more than 120 beds shall employ such individual on a full time basis; facilities with 120 beds or fewer shall employ such individual on a full or part time basis. A qualified social worker for purposes of this Part is an individual who:

(i) holds a masters degree in social work or is a Certified Social Worker, and has pertinent experience in a health care setting;

(ii) holds a bachelor's degree in social work, or in a related field, and has regular access through a contract which meets the provisions of subdivision (e) of section 415.26 of this Part with a person who meets the requirement of subparagraph (i) of this paragraph; or

(iii) had four years of social work experience in a nursing home in New York State prior to October 1, 1990, as a social work assistant or case aide and has regular access through a contract which meets the provisions of subdivision (e) of section 415.26 of this Part with a person who meets the requirement of subparagraph (i) of this paragraph.

(h) Environment. The facility shall provide:

(1) a safe, clean, comfortable and homelike environment, allowing the resident to use his or her personal belongings to the extent possible;

(2) housekeeping and maintenance services necessary to maintain a sanitary, orderly and comfortable interior;
(3) clean bed and bath linens that are in good condition;

(4) comfortable and safe temperature levels; and

(5) for the maintenance of comfortable sound levels.

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