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.
4.6 Accommodation of Residents’ Needs

(a) A resident has the right to reside and receive services in the facility with reasonable accommodations of individual needs and preferences, except when the health or safety of the individual or other residents would be endangered.

(b) A resident has the right to receive notice before the resident’s room or roommate in the facility is changed.

4.7 Activities

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

(b) The activities program must be directed by a qualified professional who:

(1) is a qualified therapeutic recreation specialist or an activities professional who

(i) is licensed or registered and

(ii) is eligible for certification as a therapeutic recreation specialist or as an activities professional by a recognized accrediting body on or after October 1, 1990; or

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

(3) is a qualified occupational therapist or occupational therapy assistant; or

(4) has completed a training course approved by the licensing agency; or

(5) has demonstrated the ability to provide for an ongoing program of activities designed to meet, in accordance with the comprehensive assessment, the interests and the physical, mental and psychosocial well-being of each resident and serves with the regularly scheduled consultation of an individual who meets the qualifications outlined above.

4.8 Social Services

(a) The facility must provide medically-related social services to attain or maintain the highest practicable physical, mental and psychosocial well being of each resident.

(b) A facility with more than 120 beds must employ a qualified social worker on a full-time basis.

(c) A qualified social worker is an individual with the following qualifications:
(1) both

(i) a bachelor’s degree in social work or a bachelor’s degree in a human services field including but not limited to sociology, special education, rehabilitation counseling, and psychology, and

(ii) one year of supervised social work experience in a health care setting working directly with individuals;

(2) or a demonstrated ability to provide medically related social services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.

4.9 Environment

A nursing facility must provide:

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

(b) housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior;

(c) a clean bed and bath linens that are in good condition;

(d) private closet space in each resident room as specified in subsection 8.4(c)(4)

(e) adequate and comfortable lighting levels in all areas;

(f) comfortable and safe temperature levels (not lower than 71° F); and

(g) for the maintenance of comfortable sound levels.