

IDAHO

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008.CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS REQUESTS.

...04. Public Availability of Deficiencies. The survey documents relating to a facility will be available to the public upon written request to the Department and posted on the Licensing and Survey Agency Web site. (3-26-08)

100.ADMINISTRATION.

...02. Administrator.

... d. The administrator, his relatives or employees, shall not act as or become the legal guardian of or have power of attorney for any patients/residents unless specifically adjudicated as such by appropriate legal order. (1-1-88)

03. Patient/Resident Rights and Responsibilities. The administrator, on behalf of the governing body of the facility, shall establish written policies regarding the rights and responsibilities of patients/residents and responsibility for development of, and adherence to, procedures implementing such policies. (1-1-88)

a. These policies and procedures shall be made available to patients/residents, to any guardians, next of kin, sponsoring agency(ies), and to the public. (1-1-88)

b. The staff of the facility shall be trained and involved in the implementation of these policies and procedures. (1-1-88)

c. These patients'/residents' rights, policies and procedures ensure that, at least, each patient/resident admitted to the facility: (1-1-88)

i. Is fully informed, as evidenced by the patient's/resident's written acknowledgement, prior to or at the time of admission and during his stay, of these rights and of all rules and minimum standards governing patient/ resident conduct and responsibilities. Should the patient/resident be medically or legally unable to understand these rights, the patient's/resident's guardian or responsible person (not an employee of the facility) has been informed on the patient's/resident's behalf; (1-1-88)

ii. Is fully informed, prior to or at the time of admission and during stay, of services available in the facility, and of related charges including any charges for services not covered under Titles XVIII or XIX of the Social Security Act, or not covered by the facility's basic per diem rate; (1-1-88)

iii. Is fully informed, by a physician, of his medical condition unless medically contraindicated (as documented, by a physician, in his medical record), and is afforded the opportunity to participate in the planning of his medical treatment and to refuse to participate in experimental research; (1-1-88)

- iv. Is transferred or discharged only for medical reasons, or for his welfare or that of other patients/ residents, or for nonpayment for his stay (except as prohibited by Titles XVIII or XIX of the Social Security Act), and is given reasonable advance notice to ensure orderly transfer or discharge, and such actions are documented in his medical record; (1-1-88)
- v. Is encouraged and assisted, throughout his period of stay, to exercise his rights as a patient/resident and as a citizen, and to this end may voice grievances and recommend changes in policies and services to facility staff and/or to outside representatives of his choice, free from restraint, interference, coercion, discrimination, or reprisal; (1-1-88)
- vi. May manage his personal financial affairs, and should the facility be directed by him, his family, his conservator, or guardian, to maintain a trust account for him, a report as to the status of his account and any expenditures, or access to his trust account records shall be available upon request; (1-1-88)
- vii. Is free from mental and physical abuse, and free from chemical and (except in emergencies) physical restraints except as authorized in writing by a physician for a State specified and limited period of time, or when necessary to protect the patient/resident from injury to himself or to others; (1-1-88)
- viii. Is assured confidential treatment of his personal and medical records, and may approve or refuse their release to any individual outside the facility, except, in case of his transfer to another health care facility, or as required by law or third-party payment contract; (1-1-88)
- ix. Is treated with consideration, respect and full recognition of his dignity and individuality, including privacy in treatment and in care for his personal needs; (1-1-88)
- x. Is not required to perform services for the facility that are not included for therapeutic purposes in his plan of care; (1-1-88)
- xi. May associate and communicate privately with persons of his choice, and send and receive his personal mail unopened, unless medically contraindicated (as documented by his physician in his medical record); (1-1-88)
- xii. May meet with, and participate in activities of social, religious, and community groups at his discretion, unless medically contraindicated (as documented by his physician in his medical record); (1-1-88)
- xiii. May retain and use his personal clothing and possessions as space permits, unless to do so would infringe upon rights of other patients/residents, and unless medically contraindicated (as documented by his physician in his medical record); and (1-1-88)
- xiv. If married, is assured privacy for visits by his/her spouse; if both are patients/residents in the facility, they are permitted to share a room, unless medically contraindicated (as documented by the attending physician in the medical record). (1-1-88)

08. Notification of Change in Patient/Resident Status. There shall be written policies and procedures relating to notification of next of kin, or sponsor, in the event of a significant change in a patient's/resident's status. (1-1-88) a. Patients/residents shall not be transferred or discharged on the attending physician's order without prior notification of

next of kin, or sponsor, except in cases of emergency. Patients/residents shall be counselled prior to transfer or discharge. (1-1-88) b. As changes occur in their physical or mental conditions, necessitating services or care not regularly provided by the facility, patients/residents shall be transferred to a facility providing the appropriate level of care. (1-1-88) c. Every person who dies in a facility shall be pronounced dead according to the provisions of Idaho law. (1-1-88)

09. Record of Patient's/Resident's Personal Valuables. An inventory and proper accounting shall be kept for all valuables entrusted to the facility for safekeeping. The status of the inventory shall be available to the patient/resident, his conservator, guardian, or representative for review upon request. (1-1-88)

10. Visiting Hours. Daily visiting hours shall be established. (1-1-88) a. Members of the clergy shall be admitted at any hour; (1-1-88) b. Relatives or guardians shall be allowed to see critically ill patients/residents at any time; and (1-1-88) c. Privacy shall be available at all times to patients/residents for visits with family, friends, clergy, social workers, and for professional or other business reasons. (1-1-88)

11. Religious Activities. Every patient/resident shall have the freedom of attending the church service of his choice. Attendance at religious services held in the facility shall be on a completely voluntary basis. (1-1-88)

12. Accident or Injury.

...d. The physician shall be immediately notified regarding any patient/resident injury or accident when there are significant changes requiring intervention or assessment. (1-1-88)

105.PERSONNEL.

...07. Patient/Resident Employment. Whenever work of economic benefit to the facility is performed by a patient/resident, such work will be subject to the provisions prescribed by law for any employee. (1-1-88)

120.EXISTING BUILDINGS.

...04. Resident/Staff Communication. Requirements governing communication are as follows: (1-1-88) a. Each building shall have a telephone for resident use so located as to provide wheelchair access for personal, private telephone communications. A telephone with amplifying equipment shall be available for the hearing impaired. (1-1-88)

154.MEDICAL DIRECTION.

...02. Physician Supervision. (7-1-93)

a. Each patient/resident shall be under the direct and continuing supervision of a physician of his own choice licensed by the Idaho Board of Medicine. (1-1-88)