As a resident of this facility, you have the right to a dignified existence, and to communicate with individuals and representatives of choice. The facility will protect your rights as designated below.

## Exercise of Rights

- You have the right and freedom to exercise your rights as a resident of this facility and as a citizen or resident of the United States without fear of discrimination, restraint, interference, coercion or reprisal.
- If you are unable to act in your own behalf, the person appointed under state law to act in your behalf exercises your rights.

### Notice of Rights and Services

- You will be informed of your rights and of all rules and regulations governing resident conduct and responsibilities, both orally and in writing.
- You have the right to inspect and purchase photocopies of your records.
- You have the right to be fully informed of your total health status.
- You have the right to refuse treatment, and the right to refuse to participate in experimental research.
- You have the right to formulate an advance directive in accordance with facility policy.
- You will be informed of facility services and charges.

## Notice of Rights and Services (continued)

- You will be informed of Medicare and Medicaid benefits. This information will be posted in the facility.
- The facility will inform you of procedures for protecting personal funds.
- If you deem necessary, you may file a complaint with the state survey and certification agency, the Massachusetts Department of Public Health.
- You will be informed of your physician, his or her specialty, and ways of contacting him or her.
- The facility must consult with you, and notify your physician and interested family member, of any significant change in your condition or treatment, or of any decision to transfer or discharge you.
- The facility will notify you and an interested family member of a room or roommate change.
- You may have the right to refuse a room change if your move is from a Medicare bed to a non-Medicare bed, or from a Medicaid bed to a non-Medicaid bed.
- The facility will periodically update the address and telephone number of your legal representative or an interested family member.
- The facility will notify you and an interested family member of any change in your rights as a resident.

#### Protection of Funds

- You may manage your own financial affairs. You are not required to deposit personal funds with the facility.
- The facility must manage your deposited funds with your best interests in mind. Your money will not be commingled with facility funds.
- The facility will provide you with an individualized financial report quarterly, and upon your request.
- Any remaining estate will be conveyed to your named successor.
- All funds held by the facility will be protected by a security bond.

#### Free Choice

- You may choose your own personal physician.
- You will be informed of and may participate in your Care Plan and treatment, and any resulting changes.

#### <u>Grievances</u>

- You may voice grievances concerning your care without fear of discrimination or reprisal.
- You may expect prompt efforts for the resolution of grievances.

#### <u>Telephone</u>

• You have the right to use the telephone in private.

# <u>Work</u>

- You may perform, or refuse to perform, services for the facility.
- All services performed must be well documented in the care plan to include nature of the work and compensation.

#### <u>Privacy</u>

- You have the right of privacy over your personal and clinical records.
- Your privacy will include: personal care, medical treatments, telephone use, visits, letters, and meetings of family and resident groups.
- You may approve or refuse the release of your records except in the event of a transfer or legal situation.

## Examination of Survey Results

- You may examine survey results and the plan of correction. These, or a notice of their location, will be posted in a readily accessible place.
- You may contact client advocate agencies and receive information from them.

## <u>Mail</u>

• You may promptly send and receive your mail unopened and have access to writing supplies.

## Personal Property

• You can retain and use personal possessions as space permits.

### Access and Visitation Rights

- You have the right to receive or deny visitors.
- You have the right, and the facility must provide, access to visit with any relevant agency of the state or any entity providing health, social, legal or other services.

#### Married Couples

• A married couple may share a room.

#### Self-administration of Drugs

• You may self-administer drugs unless determined unsafe by the interdisciplinary team.

## ADMISSION, TRANSFER AND DISCHARGE RIGHTS

## Admission Policy

- The facility must not require a third party guarantee of payment, or accept any gifts, as a condition of admission or continued stay.
- The facility cannot require you to waive your right to receive or apply for Medicare or Medicaid benefits.
- The facility may obtain legal financial access for payment without incurring your personal liability.
- The facility may charge a Medicaid-eligible resident for items and services requested (that are not covered in the daily Medicaid rate).
- The facility may only accept contributions if they are not a condition of admission or continued stay.

## Equal Access To Quality Care

- The facility must use identical policies regarding transfer, discharge and services for all residents.
- The facility may determine charges for a non-Medicaid resident, as long as written notice was provided at time of admission.

## Transfer and Discharge Rights

- You may not be transferred or discharged unless: your needs cannot be met, safety is endangered, services are no longer required, or payment has not been made.
- Notice of and, reason(s) for, transfer or discharge must be provided to you in an understandable manner.
- Notice of transfer or discharge must be given 30 days prior, except in cases of health and safety needs.
- The transfer or discharge notice must include the name, address and telephone number of the appropriate, responsible protective agency.
- A facility must provide sufficient preparation to ensure a safe transfer or discharge.

## Notice of Bed-Hold Policy and Readmission

- You and a family member must receive written notice of state and facility bed-hold policies before and at the time of a transfer.
- The facility must follow a written policy for readmittance if the bed-hold period is exceeded.

# **RESIDENT BEHAVIOR AND FACILITY PRACTICES**

## <u>Abuse</u>

• You have the right to be free from verbal, sexual, physical or mental abuse, corporal punishment and involuntary seclusion.

## **Restraints**

• The facility may not use physical restraints or psychoactive drugs for discipline or convenience, or when they are not required to treat medical symptoms.

## Staff Treatment

- The facility must implement procedures that protect you from abuse, neglect or mistreatment, and misappropriation of your property.
- In the event of an alleged violation involving your treatment, the facility is required to report it to the appropriate officials.
- All alleged violations must be thoroughly investigated and the results reported.

# **Dignity**

• The facility will treat you with dignity and respect in full recognition of your individuality.

# Quality of Life

• The facility must care for you in a manner that enhances your quality of life.

# Social Services

• The facility will provide social services to attain or maintain your highest level of well-being.

### Accommodation of Needs

- You have the right as a resident to receive services with reasonable accommodations to individual needs and preferences.
- You will be notified of room or roommate changes.
- You have the right to make choices about aspects of your life that are important to you, while staying in the facility.

### **Self Determination**

- You may choose your own activities, schedules and health care, and any other aspect affecting your life within the facility.
- You may interact with visitors of your choice.

#### Participation in Resident and Family Groups

- You may organize or participate in groups of your choice.
- Families have the right to visit with other families.
- The facility must provide a private space for group meetings.
- Staff or visitors may attend meetings at the group's invitation.
- The facility will provide a staff person to assist and follow up with the group's requests.
- The facility must listen to and act upon requests or concerns of the group.

# <u>Activities</u>

• The facility will provide a program of activities designed to meet your needs and interests.

## Participation in Other Activities

You have the right to participate in activities of your choice that do not interfere with the rights of other residents.

### **Environment**

- The facility must provide a safe, clean, comfortable, home-like environment, allowing you the opportunity to use your personal belongings to the extent possible.
- The facility will provide housekeeping and maintenance services.
- The facility will assure you have clean bath and bed linens, and that they are in good repair.
- The facility will provide you with private closet space, as space permits.
- The facility will provide you with adequate and comfortable lighting and sound levels.
- The facility will provide you with comfortable and safe temperature levels.