

EPISCOPAL CHURCH HOME RESIDENT HANDBOOK

Welcome to the community of Episcopal Church Home!

This booklet is intended to help you understand the follow items: 1) How to access the many services and amenities of the Facility; 2) Who to contact with questions; and 3) The policies and procedures that have been adopted to provide you with a safe, friendly, warm and comfortable lifestyle. It is our goal to exceed your expectations. Please be assured of the Facility's commitment to these areas:

- Compliance is in accordance with all applicable standards and regulations of federal, state and local agencies governing the operation of long term care retirement/nursing facilities and is among the finest in the nation.
- Design and Construction have been completed with the utmost attention given to the special needs of older adults, balancing hospitality and a residence-style atmosphere with the ability to provide quality health care services as needed.
- Staff is the most qualified, competent and motivated care giving group in our field.
 - The facility is headed by a full-time qualified and licensed nursing home administrator who has been assigned responsibility for the operation of the facility.
 - There is a permanent staff of Department Directors, each fully licensed or credentialed, and qualified in his/her respective field.
 - We are committed to the ongoing professional development of our staff.
- Success relies on the active involvement of **all** the stakeholders – residents, families, staff, volunteers, physicians, suppliers, churches and neighbors – in advancing ECH's mission of "enhancing the quality of life for adults through a caring, Christian community." Your ideas and suggestions are not only welcome... you are encouraged to share them for the potential benefit of others. This is your community – it flourishes when you exercise your ownership and others do the same.

Once again, welcome! We trust that this handbook will serve as a helpful reference, even beyond your initial discovery time. Of course, if you have a question about any aspect of the Facility's operation or services, please ask the staff to assist you.

On behalf of the Staff and Residents, welcome to The Episcopal Church Home.

Beverly Edwards
Executive Director



Episcopal Church Home

Dear Residents, Family members and Resident Representatives,

As Assistant Administrator of ECH, I am tasked with the safety and security of our residents, staff, visitors and physical structures of our community. As such, I want the residents and families to know we are prepared, not only for the daily care of our residents, but also for the unlikely event that we are faced with an emergency.

In advance of an impending crisis or disaster situation, including an epidemic/pandemic episode, it is important for ECH staff members, residents, family members/resident representatives, and the community at large to understand that the facility has developed a relationship with local emergency responders to properly plan, prepare, respond, and recover from such situations.

Our primary concern is resident safety and comfort. We plan to remain in our facility should an emergency occur. However, if the building is damaged or we cannot remain on our campus for other reasons, we have made arrangements for residents and staff to relocate to another location. Family members and resident representatives will be contacted if evacuation becomes necessary.

Please do not call the main line during an emergency because we need to keep that line open for communications with emergency responders. For this reason, we have created an emergency call-in line you may call to obtain information on the status of your loved-one, the status of the building and any other pertinent information we need to pass along during a crisis situation. The call-in line for emergency situations is: **502-438-3946**.

ECH will contact family members/resident representatives during an emergency/crisis situation once critical steps to ensure the safety of our residents have been completed. If you must contact the facility during a disaster, again we ask you to call the dedicated cell phone at **502-438-3946**. This number is only activated in actual emergency/disaster events and will not be answered during normal business operation.

If you have any questions about Episcopal Church Home's emergency preparedness, please feel free to contact me via the receptionist at 502-736-7800.

In Christ,

Chris Just
Assistant Administrator

SERVICES AND POLICIES TABLE OF CONTENTS (Listed alphabetically)

Agency Numbers to Know	42
Beauty/Barber Shop	13
Church Services	13
Civil Rights/Public Notice	37
Emergency Call System	13
Expectations/Service Limitations	13
Federal Resident Rights	35
Fire Safety	14
Fires and Fire Drills	14
Fund Development	14
Furniture	14
Gift Shop	15
Grievance/Complaint Procedure	15
Guests	16
HIPAA Privacy Practices	16
HIV	38
Housekeeping and Environmental Services	22
Laundry	22
Life Enrichment	22
Location	23
Mail	23
Map	BC
Meals	23
Medicaid	8
Medicare	10
Newspapers	23
Office Hours	23
Ombudsman	24
Pastoral Care	24
Pets	24
Pharmacy Service	24
Photography/Videography	25
Physician	25
Podiatrist	26
Rehabilitation	26
Resident Council	26
Resident Funds	26
Restraints	26
Room Changes	27
Room Décor	27
Rotunda	27
Security	27

Services and Amenities	28
Short-term Placement	28
Smoking	28
State Resident Rights	32
Storm Warnings	29
Telephone	29
Television	29
Time Away/Bed Hold	29
Tips and Gifts	29
Valuables and Cash	30
Who's Who	6
Vending and Soliciting	30
Visitors and Visiting Hours	30
Your Rights	31

WELCOME!

The Staff of The Episcopal Church Home extend to you a warm welcome. We offer this booklet to help you get acquainted with the Episcopal Church Home. Please read it carefully and refer to it when you have questions.

The Episcopal Church Home (ECH) offers a variety of levels of health services which permit residents to live in the style best suited to individual wishes or physical abilities. The room rates are set accordingly.

MEMORY CARE CENTER OF EXCELLENCE

This service includes uniquely designed surroundings that enhance the care for residents with chronic memory impairments. The buildings are divided into Neighborhoods. Residents benefit from close supervision and participation in programs that are tailored to meet their individual needs, as well as the freedom to move about their neighborhood. Licensed as Personal Care, residents receive meals in a homelike atmosphere, as well as medications, bathing, housekeeping and safety monitoring.

PERSONAL CARE

Residents of the Woodcock Neighborhood are generally self-sufficient and able to walk on their own. The staff is there primarily to assist you with scheduled baths, dressing, medications, and to monitor your personal safety. Independence is encouraged. When time permits, staff will perform other small courtesies; however, for an additional fee, expanded services are provided to a resident who requires routine nighttime services or who has care needs exceeding those routinely available. Residents are encouraged to remain active, and to do as much as possible for themselves. Meals are served in the Canterbury Court dining room; however, breakfast can be delivered to a resident's room at no additional charge.

NURSING CENTERS

Residents in the Morton, Clingman and Marmion Neighborhoods are provided rehabilitation services and/or intermittent or continuous nursing care as needed. This includes, but is not limited to, extensive assistance with bathing, dressing, toileting, dining and other activities of daily living. Continuous nursing care includes assistance with wound care, intravenous fluids, ostomies, catheters, and feeding tubes. The neighborhoods are staffed around the clock with licensed nurses, certified medication aides, and state registered nursing assistants. Housekeeping service is provided daily through the week and with limited (as needed) services on weekends. Meals are served in Canterbury Court, the resident's room or in one of the neighborhood dining rooms, depending upon your needs and abilities.

*In most instances, the information outlined in this booklet will extend to all residents; however, whenever a distinction is needed, we will refer to the Woodcock Neighborhood and Memory Care Center as "Personal Care," and the Morton, Clingman and Marmion Neighborhoods as the "Nursing Centers."

Who's who?

Marmion Skilled Memory Care Neighborhood

Nursing Station <i>To speak with neighborhood nursing staff</i>	502 736 7838
Nurse Manager	502-736-7825
Activities Director	502-736-7818
Social Services	502-736-7805

Morton Short Term Rehabilitation Neighborhood

Nursing Station <i>To speak with neighborhood nursing staff</i>	502-736-7835
Nurse Manager	502-736-7806
Activities Director	502-736-7834
Social Services	502-736-7804

Woodcock Personal care Neighborhood

Nursing Station <i>To speak with neighborhood nursing staff</i>	502-736-7836
Nurse Manager	502-736-7826
Activities Director	502-736-7834
Social Services	502-736-7821

Clingman Long-term Care Neighborhood

Nursing Station <i>To speak with neighborhood nursing staff</i>	502-736-7837
Nurse Manager	502-736-7826
Activities Director	502-736-8061
Social Services	502-736-7821

Memory Care Center for Excellence: Reed Neighborhood

Nursing Station <i>To speak with neighborhood nursing staff</i>	502- 736- 8043
Nurse Manager	502-736-7819
Activities Director	502-736-7818
Social Services	502-736-7805

Memory Care Center for Excellence: West Neighborhood

Nursing Station <i>To speak with neighborhood nursing staff</i>	502-736-8046
Nurse Manager	502-736-7819
Activities Director	502-736-8061
Social Services	502-736-7805

ECH Staff

Executive Director	502-736-7802
Assistant Administrator	502-736-7801
Director of Nursing	502-736-7806
Medical Director	502-588-4271
Dietician	502-736-7800 x2844
Director of Therapies	502-736-8048
Director of Pastoral Care	502-736-7823
Dining Room Reservations	502-736-7800
Physiatrist	502-588-6000
Insurance concerns	502-736-7814
Maintenance Hotline	502-736-8059
Beauty Shop/ Barber Shop	502-736-7888

Episcopal Retirement Services (ERS) Important Numbers

Episcopal Retirement Services Support Center	513-271-9610
ERS President/CEO	513-979-2222
Billing	513-979-2266
Compliance Officer	513-533-5504

MEDICAID

Medicaid is a Federal and State funded program operated by the Cabinet for Health and Family Services that pays necessary medical expenses for many needy persons. To qualify, you must fit one of the categories of eligibility and also meet certain financial eligibility requirements. If eligible, you receive a Medicaid card and the state Cabinet for Health and Family Services directly pays the doctor, hospital, nursing home or other provider of medical services.

HOW DO I APPLY FOR MEDICAID IN KENTUCKY?

You apply for Medicaid at the office of your County Cabinet for Health and Family Services. To locate this office, look in the phone book under the name of your county. If you can, it is best to go to the office yourself to apply. However, anyone can file an application for you. Your spouse, other relative, friend or anyone else acting for you can file and sign your application.

You have the right to complete an application when you first go to the Cabinet for Health and Family Services. You should take with you complete information on bank accounts, life insurance policies and property owned. It is important that you complete the application as soon as possible, as the date of application can be important. You can ask the Cabinet for Health and Family Services to mail you an application or you can take the application in the presence of a caseworker.

You have the right to request an assessment under section 1924 (c) which determines the extent of a couple's non-exempt resources at the time of institutionalization and attributes to the community spouse an equitable share of resources which cannot be considered available for payment toward the cost of the institutionalized spouse's medical care.

The department must rule on your application within 30 days.

The department will check at least once a year to make sure you are still eligible for Medicaid. You must tell the departments within 10 days of any change in circumstances, which might affect your eligibility.

If you are eligible for a refund of previous payments, it will occur as an adjustment on your current Private Pay statement.

Services/Supplies Covered by MEDICAID

Personal Care Items:

Comb	Brush
Moisturizing Lotion	Tissues
Soap	Shampoo
Cotton Balls	Deodorant
Disinfecting/specialized cleanser	Incontinence Products
Razors	Shaving Cream
After Shave	Perfume
Sanitary Napkins	Denture Adhesives
Denture Cleaners	Over-the-Counter pharmaceuticals
Mouthwash	Dental Floss

Services/Supplies NOT Covered By MEDICAID

Telephone	Television
Personal Comfort Items	Cosmetics
Personal Clothing	Reading Materials
Social Events outside the facility	Private Nursing
Private Caregiver	Private Rooms
Specialty Foods	

MEDICARE

Medicare is federal health insurance program for people who are 65 years or older, or who have been disabled for at least two consecutive years. It provides payment for the services in the nursing homes in two parts:

Part A Hospital Insurance covers skilled nursing and rehabilitation services in a Medicare certified nursing home for a period of up to 100 days per spell of illness. Medicare pays 100% of the first 20 days. The cost to the individual called coinsurance changes every year. Please see your Admission agreement for the actual per day cost for the 21st through the 100th day.

Part B Supplemental Medical Insurance pays for services like rehabilitation, physician services and medical supplies received in a nursing home. Heritage Healthcare is the therapy provider for the Episcopal Church Home. Physical, Occupational, and Speech therapy services are available to eligible residents. Typically, Medicare Part B covers 80% of therapy charges with the remaining 20% being covered by the resident's supplemental insurance. Any charges not covered by insurance are the responsibility of the patient. The patient's Power of Attorney will be contacted within one week of the start of treatment to discuss the therapy plan of care, and to answer any questions you may have. Your consent will allow therapy to begin in a timely manner when ordered by the physician.

You may contact the Rehab Department at 502-736-8048 with any questions you may have.

Services and Supplies Covered by Medicare A*

Room and Board	Meals and Special Diets
Nursing Services	Rehabilitation Services
Intravenous Therapy	Prescription Medications
Medical Supplies	Oxygen
Durable Medical Equipment	Diagnostic Testing
Radiology Services	Laboratory Services
Speech Therapy	Physical Therapy
Occupational Therapy	

Personal Care Items:

Comb	Brush
Moisturizing Lotion	Tissues
Soap	Shampoo
Cotton Balls	Deodorant
Disinfecting/Specialized Cleanser	Razors
Incontinence Supplies	Shaving Cream
Sanitary Napkins	After Shave
Perfume	Denture Adhesive
Denture Cleanser	Mouthwash
Dental Floss	Over-the-Counter pharmaceuticals

Services and Supplies Not Covered by Medicare A

Custodial Care Services	Private Duty Nursing
Private Room (unless medically needed)	Beautician/Barber Services
Television	Telephone**
Medicare Deductibles and co-insurance	Personal Laundry
Massage Therapy	

***Services are covered as long as the person meets the guidelines established by Medicare to receive the program benefits.**

****Residents of the Morton Neighborhood (Rehab) have phones in their rooms provided at no extra charge.**

Services and Supplies Covered by Medicare B*

Occupational Therapy	Physical Therapy
Speech Therapy	Tube Feedings
Radiology Services	Laboratory Services
Prosthetic Devices	
*Co-Pay applies	

Requirements for Medicare A to pay for your stay

Care in a participating facility will be paid for if all five (5) of the following conditions are met:

1. You have been admitted to a hospital and stayed at least three days in a row (not counting observation days or the day of discharge) before your transfer to a participating facility.
2. You are transferred to the participating nursing facility because you require care for a condition which was treated in the hospital.
3. You are admitted to the facility within a short time (within 30 days) after you leave the hospital.
4. A doctor certifies that you need, and you receive, skilled nursing or skilled rehabilitation services on a daily basis and;
5. The Medicare intermediary or Episcopal Church Home's Utilization Review Committee does not disapprove your stay.

At the termination of your Medicare Part-A or commercial insurance coverage, either due to medical improvement or failure to progress, or exhaustion of benefits or readmission to the hospital, you will:

1. Begin paying the "Rehab Room" daily rate for a private room in order to remain in the same room for a short time; or
2. Transfer to another room (if available) that is deemed by your attending physician and ECH's Interdisciplinary Care Team as appropriately licensed for your follow-up treatment and care; or
3. Be assisted by ECH staff and discharged to your home or another care setting.

BEAUTY/BARBERSHOP

The beauty shop is located in the Rotunda. Charges for services rendered will be billed to you on your monthly statement. For details concerning hours, please check with the Receptionist at 502-736- 7800. Appointments must be made in advance with the beautician by calling extension 2888 or 736-7888.

CHURCH SERVICES

St. Luke's Chapel conducts weekly ecumenical services under Episcopal leadership for all residents who wish to attend. The Chapel is located in front of the Main Building facing Lyndon Lane. Worship services are held on Sunday, Monday, and Wednesday as well as special seasonal services. Times of services are posted at the Chapel entrance, on the monthly calendars, and in our Newsletter. Though many Roman Catholic residents choose to attend our services for the communal songs, scripture and prayers, Lay Eucharistic Ministers from nearby St. Albert the Great Catholic Church do bring the Catholic sacraments weekly.

Our Interfaith Chapel of Shalom serves our Jewish residents through monthly services led by a lay chaplain from The Temple. Major holidays are celebrated throughout the Jewish calendar as well.

EMERGENCY CALL SYSTEM

The nurse call system cord in your room is located in your bathroom and also at your bedside in the nursing centers. It is connected directly to the nursing station in your neighborhood. If you become suddenly ill or need help at any time of the day or night, please press the call button. A nurse or staff member will answer your call.

EXPECTATIONS

NURSING CARE SERVICES: The nursing staff – licensed nurses (RN or LPN), certified medication technicians (CMT) and state registered nurse aides (SRNA) – of the Episcopal Church Home (Facility) are on duty in the facility seven days a week, 24 hours a day. They are assigned to provide levels of clinical care and personal assistance that are appropriate, customary and reasonable to expect in the licensed settings of a Nursing Facility (NF), Nursing Home (NH) or Personal Care Home (PCH), respectively. The services of the Facility's nursing staff are provided under the supervision of its Director of Clinical Services or designee.

SERVICE LIMITATIONS: Consistent with the information presented in the video, *A Time of Transition: Moving Your Loved One into a Nursing Home*, the resident and representative recognize and agree that the services provided by the Home:

1. Are designed to address individual needs, but performed by the Facility's staff concurrently with the provision of similar services for other residents as well; not exclusively or on a one-to-one basis for each resident; and
2. Are not designed to protect from every day, normal risks and responsibilities of living including, but not limited to, such general events as falling, choking on food, weight loss and/or dehydration resulting from your failure, refusal or inability to partake of adequate food and drink; and
3. Do not include 24-hour, one-on-one, seven days (7) a week monitoring of its residents.
 - a. If you or your representative desire supplemental services intended to protect you against these inherent risks of daily living, the Home's Social

Service Department can assist you in obtaining services in addition to those provided by the Facility.

- b. Please indicate whether or not you wish to purchase one-to-one care for monitoring of the Resident. This will be at your expense.

FIRE SAFETY

The Episcopal Church Facility has equipment to ensure the safety of residents in case of fire including, sprinkler system, heat detectors and smoke detectors.

Because of fire regulations—and for your own protection—extension cords, as well as heaters and appliances with an internal heat source, are not permitted in your room. Additional items that are not allowed include, but are not limited to electric blankets, heating pads, toasters, microwaves, coffee makers and Keurigs.

FIRES AND FIRE DRILLS

We hold fire drills regularly. Some involve all residents and some will involve only the staff. When you hear the fire alarm sound, DO NOT head toward the exits. The safest places are your room or any room away from the fire location, with the door shut. Studies by experts have shown that during a fire the most dangerous place to be is in a corridor. The Episcopal Church Home is only a few minutes away from the Lyndon Fire Department. If evacuation of the building should ever become necessary, the Fire Chief will give the order. Fire Evacuation Routes are posted in each area of the building. Your participation in fire drills is most important. Please follow our staff's instructions, as they have been trained to handle a fire emergency. Stay in your room or the area to which you have been directed until you receive the "All Clear" announcement from our staff.

FUND DEVELOPMENT

As a non-profit organization, the Facility continues the tradition of our founders of seeking charitable gifts to enhance resident housing and services. Charitable giving by residents and family members is completely voluntary and is not required as a condition of residency. We do encourage giving by residents and family members according to their means and financial obligations. For more information, contact the Development Director or visit our web-site.

FURNITURE

Personal Care and Memory Care Center Residents may use their own furniture in their rooms, or mix it with the Facility's standard furniture provided by the Facility for each resident. This includes a bed and bedding, a bedside table, a lamp, a chest of drawers and a chair. In instances where extra furniture is available, it may be provided; however, the Facility reserves the right to remove it at any time if it is needed elsewhere. For the Memory Care Center for Excellence, the armoire provided by the Facility must remain in the room per regulation.

All furniture brought into the Facility must have your name marked on it. We urge you to carry your own insurance on your belongings. The Facility's insurance will usually not cover any damage or loss of your property except for accidental breakage caused by the staff.

Nursing Center residents will be required to use an approved hospital bed, nightstand

and over bed table provided by the Facility, but may use their own incidental pieces to complete the décor. Cleanliness and safety is very important. The rooms must be uncluttered and arranged in a manner which will insure ease of cleaning and minimize tripping hazards. Use of throw rugs in the Nursing Center Neighborhoods is not allowed. If additional furniture is needed, please contact your Nurse or the Director of Environmental Services.

GIFT SHOP

The Gift Shop is operated by the Woman's Board. Items such as snacks, toiletries, greeting cards, gifts and stationery are available. Proceeds from operating the Gift Shop support charitable care and special resident programs at the Facility.

GREIVANCE/COMPLAINT PROCEDURE

Any resident, his or her representative, interested family member, or advocate may file a grievance or complaint concerning his or her treatment, medical care, behavior of other residents, staff members, theft of property, etc., without fear of threat or reprisal in any form.

You are requested to follow the procedures outlined below when filing a grievance or complaint:

1. Obtain a Grievance/Complaint Report from the nurse's station.
2. Answer all questions on the front of the form, as able. Be sure to be accurate and detailed.
3. Sign and date the form.
4. Give the completed report form to the social services department or your nurse.
5. Within ten (10) working days of the date you filed the report, you will be informed orally of the results of the investigation. **(Note: Complaints of abuse, harassment, or mistreatment will be immediately investigated and you will receive an oral and written report of the findings, recommendations, and/or corrective action taken within five (5) working days of the filing of the report.)**
6. Should you disagree with the findings, recommendations, or actions taken, you may meet with the Assistant Administrator or the Executive Director, or you may file a complaint with any of the any of the appropriate state agencies.
7. It is the policy of this facility to assist you in filing a grievance or complaint. Should you feel that our staff has not assisted you in this manner, or you feel that you are being discriminated against for taking such steps, you are encouraged to report such incidents to the Assistant Administrator at once.
8. You may file a complaint with the State survey and certification agency (i.e., Department of Health and Family Services) concerning resident abuse, neglect, and misappropriation of resident property in the facility, and non-compliance with the advance directives requirements.
9. Residents and Families may also contact our Concern Line at extension 2868 from any in-house phone. Concerns may be left anonymously on this line or you may leave your name and contact info if you would like a return call.

GUESTS

Your guests are welcome at the Episcopal Church Home. Please have them sign in and sign out at the Receptionist's Desk or Nursing Station and wear a name badge while in the facility. Family members and friends may join you for meals. Meal reservations should be made with the Receptionist at least two hours in advance. Holiday and special occasion meals are popular with visitors; therefore, we suggest that you make your reservations well in advance. The charge for guest meals and Guest Room are payable at the reception desk or may be added to your account.

HIPAA PRIVACY PRACTICES

Your Rights

You have the right to:

- Get a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication
- Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

Your Choices

You have some choices in the way that we use and share information as we:

- Tell family and friends about your condition
- Provide disaster relief
- Include you in a hospital directory
- Provide mental health care
- Market our services and sell your information
- Raise funds

Our Uses and Disclosures

We may use and share your information as we:

- Treat you
- Run our organization
- Bill for your services
- Help with public health and safety issues
- Do research
- Comply with the law
- Respond to organ and tissue donation requests
- Work with a medical examiner or funeral director
- Address workers' compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will say “yes” to all reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say “no” if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information.

Get a list of those with whom we’ve shared information

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using

- the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1- 877-696-6775, or visiting **www.hhs.gov/ocr/privacy/hipaa/complaints/**.
 - We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information in a hospital directory

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again.

Our Uses and Disclosures

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

Treat you

We can use your health information and share it with other professionals who are treating you.

Example: A doctor treating you for an injury asks another doctor about your overall health condition.

Run our organization

We can use and share your health information to run our practice, improve your care, and contact you when necessary.

Example: We use health information about you to manage your treatment and services.

Bill for your services

We can use and share your health information to bill and get payment from health plans or other entities.

Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues

We can share health information about you for certain situations such as:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Do research

We can use or share your information for health research.

Comply with the law

We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Respond to organ and tissue donation requests

We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director

We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Our Responsibilities

- We are required by law to maintain the privacy and security of your

- protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

PRIVACY ACT STATEMENT – HEALTH CARE RECORDS

Long Term Care-Minimum Data Set (MDS)

1. AUTHORITY FOR COLLECTION OF INFORMATION, INCLUDING SOCIAL SECURITY NUMBER AND WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY.

Authority for maintenance of the system is given under Sections 1102(a), 1819(b)(3)(A), 1819(f), 1919(b)(3)(A), 1919(f) and 1864 of the Social Security Act.

The system contains information on all residents of long-term care (LTC) facilities that are Medicare and/or Medicaid certified, including private pay individuals and not limited to Medicare enrollment and entitlement, and Medicare Secondary Payer data containing other party liability insurance information necessary for appropriate Medicare claim payment.

Medicare and Medicaid participating LTC facilities are required to conduct comprehensive, accurate, standardized and reproducible assessments of each resident's functional capacity and health status. To implement this requirement, the facility must obtain information from every resident. This information is also used by the Centers for Medicare & Medicaid Services (CMS) to ensure that the facility meets quality standards and provides appropriate care to all residents. 42 CFR §483.20, requires LTC facilities to establish a database, the Minimum Data Set (MDS), of resident assessment information. The MDS data are required to be electronically transmitted to the CMS National Repository.

Because the law requires disclosure of this information to Federal and State sources as discussed above, a resident does not have the right to refuse consent to these disclosures.

These data are protected under the requirements of the Federal Privacy Act of 1974 and the MDS LTC System of Records.

2. PRINCIPAL PURPOSES OF THE SYSTEM FOR WHICH INFORMATION IS INTENDED TO BE USED.

The primary purpose of the system is to aid in the administration of the survey and certification, and payment of Medicare/Medicaid LTC services which include skilled nursing facilities (SNFs), nursing facilities (NFs) and non-critical access hospitals with a swing bed agreement.

Information in this system is also used to study and improve the effectiveness and quality of care given in these facilities. This system will only collect the minimum amount of personal data necessary

3. ROUTINE USES OF RECORDS MAINTAINED IN THE SYSTEM. The information collected will be entered into the LTC MDS System of Records, System No. 09-70-0528. This system will only disclose the minimum amount of personal data necessary to accomplish the purposes of the disclosure. Information from this system may be

disclosed to the following entities under specific circumstances (routine uses), which include:

- (1) To support Agency contractors, consultants, or grantees who have been contracted by the Agency to assist in accomplishment of a CMS function relating to the purposes for this system and who need to have access to the records in order to assist CMS;
- (2) To assist another Federal or state agency, agency of a state government, an agency established by state law, or its fiscal agent for purposes of contributing to the accuracy of CMS' proper payment of Medicare benefits and to enable such agencies to fulfill a requirement of a Federal statute or regulation that implements a health benefits program funded in whole or in part with Federal funds and for the purposes of determining, evaluating and/or assessing overall or aggregate cost, effectiveness, and/or quality of health care services provided in the State, and determine Medicare and/or Medicaid eligibility;
- (3) To assist Quality Improvement Organizations (QIOs) in connection with review of claims, or in connection with studies or other review activities, conducted pursuant to Title XI or Title XVIII of the Social Security Act and in performing affirmative outreach activities to individuals for the purpose of establishing and maintaining their entitlement to Medicare benefits or health insurance plans;
- (4) To assist insurers and other entities or organizations that process individual insurance claims or oversees administration of health care services for coordination of benefits with the Medicare program and for evaluating and monitoring Medicare claims information of beneficiaries including proper reimbursement for services provided;
- (5) To support an individual or organization to facilitate research, evaluation, or epidemiological projects related to effectiveness, quality of care, prevention of disease or disability, the restoration or maintenance of health, or payment related projects;
- (6) To support litigation involving the agency, this information may be disclosed to The Department of Justice, courts or adjudicatory bodies;
- (7) To support a national accrediting organization whose accredited facilities meet certain Medicare requirements for inpatient hospital (including swing beds) services;
- (8) To assist a CMS contractor (including but not limited to fiscal intermediaries and carriers) that assists in the administration of a CMS-administered health benefits program, or to a grantee of a CMS-administered grant program to combat fraud, waste and abuse in certain health benefit programs; and
- (9) To assist another Federal agency or to an instrumentality of any governmental jurisdiction within or under the control of the United States (including any state or local governmental agency), that administers, or that has the authority to investigate potential fraud, waste and abuse in a health benefits program funded in whole or in part by Federal funds.

4. EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION. The information contained in the LTC MDS System of Records is generally necessary for the facility to provide appropriate and effective care to each resident.

If a resident fails to provide such information, e.g. thorough medical history, inappropriate and potentially harmful care may result. Moreover, payment for services by Medicare, Medicaid and third parties, may not be available unless the facility has sufficient information to identify the individual and support a claim for payment.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and

on our web site.

Other Instructions for Notice

- Privacy Officer at 3870 Virginia Avenue, Cincinnati, OH 45227 or 513-533-5504.
- The Episcopal Church Home never markets or sells personal information.

HOUSEKEEPING AND ENVIRONMENTAL SERVICES

Personal Care residents are responsible to keep their room orderly and clean, waste basket emptied, and clothes put away. (Memory Care residents will be assisted as needed with these tasks.) An Environmental Services employee will dust and vacuum PC rooms and sanitize PC bathrooms weekly.

ECH provides toilet tissue and light bulbs for lamps owned by the Facility.

Nursing Center Neighborhood residents will receive daily housekeeping services.

LAUNDRY

The cost of laundering personal belongings is not included in your room rate, but there are several alternatives available to you. (1) Your family can do your laundry, or (2) we have an arrangement with laundry service. Laundry is picked up weekly and returned within two days. (3) There is a launderette in the Woodcock Neighborhood for your convenience. The Environmental Services Director will be happy to show you how to operate the washer and dryer. There is also an iron and ironing board available for your use. When you are finished, please unplug the iron and tidy up the room.

If you select the option of having the Episcopal Church Home do your laundry, it will be picked up on a weekly basis, the cost is as follows:

Weight/Items	Charge
First 8 lbs.	\$12.80/wk*
Each additional lb.	\$1.60/lb.
Second washing for badly soiled laundry	Price of Mach. used
Blankets and Comforters	\$12.00/each
Afghans, Throws, Robes and Jackets	\$6.00/each

***If you have less than 7 lbs. total for the month, you will be billed a minimum of \$10/wk.**

Laundry will be picked-up weekly according to the following neighborhood Schedule:

Marmion: Monday

Morton: Tuesday

Woodcock: Tuesday

Memory Care: Monday

Clingman: Friday

The Personal laundry service will be included with the resident's bill or debited from the petty cash account. All clothing should be labeled with the resident's name using a laundry marker. Due to temperature of industrial washers and dryers, clothing made of silk, linen, wool and other natural fabrics will not be included in this laundry service. Laundry is hung on hangers out of dryer, but not ironed by laundry service.

If you ever have any questions or concerns regarding your laundry charges, please contact the Housekeeping Supervisor at extension 2817 or 736-7817.

LIFE ENRICHMENT (RECREATION AND EXERCISE)

You are encouraged to participate in the many scheduled recreational and creative activities provided as part of the community life at the Facility. The program is coordinated by the Life Enrichment Director, who can provide opportunities for exercise and activities tailored to meet individual needs.

LOCATION

We are responsible for your safety at all times. We must locate any resident who does not come to a meal, unless we have been informed of the absence in advance; therefore, signing out is very important. If you are leaving the facility or are going to miss a meal, please sign out at the Nurse's station and Receptionist's Desk.

MAIL

Mail, floral arrangements and parcels are received by the Receptionist and are delivered to the Resident's room.

MEALS

Hot meals are served in Canterbury Court as follows:

Breakfast	7:00- 9:00 A.M.
Dinner	11:30 A.M -1:30 P.M
Supper	4:30-6:30 P.M.

Continental breakfast is available until 10:30 A.M.

Cold Lunch (i.e. sandwiches, salad, etc.) is available until 2:30 P.M.

Cold Supper (i.e. sandwiches, salad, etc.) is available until 7:00 P.M.

Meals in the Nursing Care Neighborhoods and the East and West Neighborhoods are served as follows:

Breakfast	8:00 A.M.
Dinner	12:00 P.M.
Supper	6:00 P.M.

All neighborhoods have a kitchen area stocked with a variety of snack foods for your convenience.

Special diets will be provided as ordered by your physician. The Facility can also cater your special parties for a nominal charge. Please contact Dining Services for a quote.

NEWSPAPERS

If you wish to subscribe, please deal directly with the newspaper company to subscribe and pay for this service.

OFFICE HOURS

All transactions with the Business Office should be completed between **9:00 a.m. and**

4:30 p.m., Monday through Friday. The Receptionist is available to sell stamps, take payments, and make reservations between 7 a.m. and 7 p.m.

OMBUDSMAN

An Ombudsman is someone who:

1. Is interested in YOU.
2. Wants YOU to receive care & services YOU need.
3. Visits in YOUR Senior Community regularly.
4. Listens to any concerns YOU may wish to share.
5. Respects YOUR right to privacy.
6. Will not tell anyone what we discuss unless YOU say it's OK.
7. Will work to help YOU resolve concerns.
8. Is available to YOU if you request to talk.

District Ombudsman Office at 502-637-9786

PASTORAL CARE

Our Chaplain staff is available for spiritual and emotional counseling with residents and their families. Requests can be made by calling the Pastoral Care office at 502-736-7823 and leaving a detailed message. Various Seminarians and ordained assistants expand the Chaplain's ministry of care to our multi-level campus. The Chaplains lead several worship services each week, and also lead Christian as well as multi-faith spiritual groups and discussions on a regular basis. Our Chaplains are committed to care for people of all faiths, and also serve to liaise with clergy of other faiths, when needed to serve our people.

Please consult your activity calendar and newsletter for specific dates and times for The Spiritual Care Department's activities.

PETS

This facility does not permit any type of domestic animal, reptile, or rodent to live in a dwelling unit. Service animals for visually-impaired, hearing-impaired, or physically-disabled individuals are permitted. The care of a service animal and any related issues will be discussed in detail in advance of moving to the facility. Pets are encouraged to visit, however, records of vaccinations must be provided to the Receptionist when a pet visits the first time. **Your animal friends may make brief visits if properly leashed.**

PHARMACY SERVICE

The Episcopal Church Home has a contract with a long-term care pharmacy to provide medications for our residents on an around-the-clock and emergency basis. You may use another pharmacy to supply your medications, as long as it meets the Facility's and other regulatory requirements for packaging and labeling of the medication, and has timely delivery. In the event you choose an outside pharmacy that does not deliver your medication in a timely manner, we will order your medication from our long-term care pharmacy until your medication can be delivered. (Note: you may be billed by the long-

term care pharmacy.)

Your Attending Physician and the Facility's Interdisciplinary Team will work with you to determine if you may administer your own medications, or whether the Facility's nursing staff will do so. If you do administer your own medications, they must be kept in a locked box.

You should NOT take non-prescribed, over-the-counter medications without first consulting your nurse. Although these medicines are sold without a prescription in any pharmacy, they can affect other prescription medications you might be taking. You may not keep over-the-counter or prescription drugs in your room if we administer your medicine. If you have special circumstances, please contact your nurse.

PHOTOGRAPHY/VIDEOGRAPHY

Facility staff, as a routine practice take photographs of residents under the following circumstances.

Identification/Security

Education, research and teaching

Skin Conditions

Documentation of Resident life at ECH

The Facility does not allow photography or videography in resident rooms and/or care areas. The Facility further prohibits Residents, families or visitors to photograph or record staff while providing care without express prior written approval from the Executive Director.

PHYSICIAN

It is a requirement that Personal Care residents (those in the Woodcock Neighborhood and the Memory Care Center) see their physician at least bi-annually and even more frequently if needed. Nursing and/or Rehabilitation residents must follow state and federal regulations and be seen by their physician at least every thirty (30) days for the first three months following admission, and every sixty (60) days thereafter. In the event that your personal physician chooses not to see patients at the Episcopal Church

Home, you will need to decide if you want to go out to your personal physician's office or select a physician who does treat at the Episcopal Church Home. The Social Services Staff or nurses can provide you with the names of physicians who routinely visit residents here.

Our Medical Director is an active member of the team of professionals who provides care to all residents and can also serve as the personal physician of those residents who request the service.

Residents receiving rehabilitation services will be seen by our Physical Medicine and Rehabilitation physician. You will be seen upon admission, evaluated for your therapy treatment plan and likely be seen for your discharge planning.

Please inform a Nurse in advance of your visits with your physician or specialists. You will be given a form for your doctor to complete and return to us. Your records must be kept current and private. If you become ill, we can serve you better if we have complete and updated records. If you contact your physician for any reason, please have him/her

call us—this way any new orders or recommendations can be made a part of your record. If you wish to change physicians, the Facility can assist you.

PODIATRIST

You may utilize the Facility's contract podiatrist or one of your choice.

REHABILITATION

A Physical Therapist, Occupational Therapist or Speech Language Pathologist will visit you at the Facility if ordered by your attending physician. Your therapist may design a maintenance plan of exercises to be carried out by the Facility's Restorative Nursing Assistants. You or your insurer will be billed for all services not covered by Medicare and Medicaid.

RESIDENT COUNCIL

You are encouraged to participate in a discussion group held once a month to voice your opinion, recommendations or praise. This is your opportunity to bring your concerns before the Facility's management, and to assist in the development of operation policies. The meetings are held in Gheens Towne Hall. See the monthly Activities Calendar for specific times and dates.

RESIDENT FUNDS

You may open a Resident Trust Account, which grants the Facility authority to manage it for you. Admissions or the Business Office Manager will help you to open an account and to make deposits or withdrawals. Your monthly statement will provide a record of deposits, withdrawals and accumulated interest.

Accounting for your personal funds:

1. Resident Trust Funds are deposited into an interest bearing account that is kept separate from the operating account for the facility.
2. Any amount over \$50.00 will accrue interest and will be posted to the resident's trust fund account.
3. The facility maintains a separate accounting of each resident fund. An individual financial statement will be sent out on a quarterly basis and will be available for review at that time.
4. The facility will notify a resident who receives Medicaid benefits when the balance of the account is \$200.00 less than the amount required that if the amount is exceeded he/she may lose eligibility for Medicaid or Social Security Income.
5. The facility will return the remaining personal funds with an accounting to the person administering the resident's estate within 30 days if the resident should expire or discharge.
6. The facility does not charge the Resident Trust Account for items or services covered by Medicare or Medicaid.

If you have any questions regarding your statement or concerns as to how the trust fund works, please feel free to contact the Business Office Manager at extension 2814.

RESTRAINTS

It is the philosophy of this facility to provide a restraint proper environment for all of our Residents living in this facility. This means that all alternatives to restraint use will be considered prior utilizing a restraint. If a restraint is necessary, the least restrictive restraint will be utilized upon evaluation of the Resident.

ROOM CHANGES

The management of the Facility may, at its discretion, transfer residents from one room to another. Such transfers would never be carried out arbitrarily, but with the intent of ensuring a smooth and harmonious operation of the Facility. For example, a change in a resident's physical condition could warrant a transfer. The resident must be capable of paying the established rate for the level of care required. Room transfers will occur in accordance with state and federal regulations. When a transfer is requested by you for your convenience, you are expected to bear the expense. There is no charge for medically necessary transfers.

ROOM DÉCOR

With prior written approval of the Executive Director or designee, you may change the décor of your private room under the condition that the room be returned to its original state upon discharge. Please consult with the Director of Building Services before making any cosmetic changes.

Pictures or mirrors are to be hung only in consultation with the Director of Building Services or designee. Please do not drive nails, screws or thumbtacks into the walls or doors under any circumstances. Our staff will mount your pictures, mirrors, etc. according to your preference. Please do not use tape or other adhesives on any wall or mirror.

ROTUNDA

The Rotunda serves as both our main entrance and "Town Square." The Receptionist, located at the main entrance facing Westport Road, is on duty from 7:00 a.m. until 7:00 p.m. The Receptionist is your "contact" with the Facility and all of its services. The Receptionist may be reached by dialing 502-736-7800. Located in the center of the Rotunda are the Beauty and Barber Shop, Bishop's Bistro, Gift Shop, and Gheens Towne Hall. Gheens Towne Hall is where many of our leisure programs and performances occur. The Business Office and several Administrative Staff Offices are located on the 2nd floor of the Rotunda, along with a lounge, vending machines and two conference rooms.

SECURITY

For your comfort and peace of mind, a member of the Facility's Building Services staff is on duty every evening from 7:00 p.m. to 7:00 a.m. making regular rounds both inside and outside the building.

Generally, perimeter doors are locked from 8:30 p.m. to 7 a.m. and the Westport Road entrance is locked from 10 p.m. to 6:30 a.m. Entry is permitted 24 hours a day by pressing the call button at the Westport Road entrance. Guest/visitors are required to "sign in and out" at the Receptionist desk or Nurses' station upon entry into the building. All guests, visitors and staff are required to wear a nametag for ease of identification.

SERVICES AND AMENITIES

- Full continuum of care, allowing residents to age in place without having to uproot
- Commitment to care until the end of life, offering the security of Medicaid application assistance and use of Resident Scholarship Program if need be
- 24-hour Chaplain team and Pastoral Counseling
- 24-hour Registered Nursing care
- Gerontology certified Medical Director
- In-house Palliative Care Physician
- Full-time certified wound care Nurse (WOCN accredited)
- Physical Therapy, Occupational Therapy, Speech Therapy services
- Ancillary health services (Podiatry, Dentistry, Ophthalmology, Mental Health)
- Transportation for outside medical appointments
- On-site Registered Dietitian
- Reservation-based private dining area available to residents/families
- Reservation-based parlor available to residents/families
- Five full-time Activity Directors
- On-site, fully-accessible church (all faiths welcome!)
- Beauty shop (offering barber services)
- Gift shop
- Resident Business Center (use of copy machine, fax machine, and computers available to residents)
- Wi-Fi
- Cable
- Weekly housekeeping services
- Laundry services
- 24-hour community security
- Six spacious, secure courtyards and gardens
- Full-time maintenance team (community, equipment, lawn, and grounds care)
- On-site Alzheimer's support groups
- Over 135 years of proudly and humbly serving seniors in Louisville

SHORT TERM PLACEMENT

The Morton Neighborhood is our primary area for skilled short-term rehab residents. Some skilled short-term admissions may evolve into longer-term admissions. These admissions will require a separate admission process and a move to a room on one of our long-term neighborhoods (Woodcock, Clingman, Marmion and the Memory Care Center of Excellence). Due to limited availability, the Facility may not be able to provide a room for long-term care after rehab has been completed. In that case, our dedicated Social Services team can assist in finding placement at another facility.

SMOKING

Smoking can be harmful to your health and often offensive to other people. We ask, therefore, that you respect our no-smoking policy. Smoking is prohibited on Episcopal Church Home's Campus.

STORM WARNINGS

Severe storm and tornado warnings will be announced as necessary. When requested, go immediately into the corridor or into your bathroom. **Stay away from windows.** If you are away from your room at the time, go to a corridor or an area which has no windows and stay there until the “All Clear” has been announced. If the power fails, the emergency lights will continue to function. Follow the instructions of the staff and remain calm.

TELEPHONE

Your room is wired for telephone service and installation is a simple matter of calling the telephone company and arranging for the installation. You will be billed individually for the service. Our rehabilitation room rates are inclusive of telephone services.

TELEVISION

Large screen TVs are provided in each living room and community area of the facility. You may have your own television set in your room if you wish; however, if you watch TV after 9:00 P.M., please keep your door closed and the volume turned down so that you do not disturb other residents. Headphones are recommended for residents needing increased volumes or for residents in our Companion Living program. Basic Cable Service is included in the room charge.

TIME AWAY/BED HOLD

You will continue to be responsible for your room charges if you are away from the Facility for any reason. Medicaid recipients are eligible for a maximum of 10 bed reservation days each calendar year when hospitalized. If the hospital stay exceeds 10 days, you must pay the full Medicaid daily rate every day the bed is held beyond the 10th day. Medicare and Private Pay residents who opt to hold their bed during a therapeutic leave or hospital leave will be charged the full daily rate for all days away from the Facility. Should you opt to not hold your bed, the room must be cleared of all personal possessions. The full daily rate will continue to be billed until the room has been cleared of personal possessions. There is no guarantee of a bed being available should you wish to return to the Facility without a paid bed hold.

In the event of death, discharge, or transfer to another facility or within this facility, the regular daily charge will continue for the storage of your belongings. The charges will stop when all belongings have been removed and the room becomes available for another occupant.

Should the resident and/or resident representative opt to donate items to ECH or leave personal possessions in the resident room upon discharge, the resident and/or resident representative must sign a “Room Clear” form to inform ECH staff of donated/abandoned items. A “Room Clear” charge of \$250 will be added to the final bill for disposition of donated/abandoned personal items.

TIPS AND GIFTS

The personnel policies of the Episcopal Church Home and state and federal regulations **do not allow employees to accept gifts or tips from residents or families.** Each resident in the Facility is entitled to all the basic services offered by the Facility. We are here to serve you, and we each receive a salary from the charges you pay to live here. If tipping

were allowed, those employees in less visible jobs—who are working equally hard to serve you—could be overlooked. We urge you to refrain from tipping; however, if you do wish to make a contribution, please consider the Employees' Christmas Fund, which is divided among non-management employees.

VALUABLES AND CASH

We urge you to not keep money or valuables in your room. Cash, jewelry, etc. can be left at the Business Office for deposit in the Facility's safe. Items can be retrieved from the safe during normal business hours.

VENDING AND SOLICITING

The solicitation of money or the selling of merchandise or services by residents or others is not permitted, either within the Facility or on the grounds. The only exception will be charity drives authorized in advance by the Executive Director or designee.

VISITORS AND VISITING HOURS

Since the Episcopal Church Home is your home, we want you to feel free to have visitors any time you wish. We provide 24-hour access to any visitor who is visiting you with your consent. We encourage family and friends to visit during the hours of 8:00 a.m. and 9:00 p.m.; however, we understand that some guests may need to come during other hours. We ask that any visitor who comes during late hours be respectful of the other residents' need for rest, especially those who may be in a companion living arrangement. Guest/visitors are required to "sign in and out" at the Receptionist desk or Nurses' station upon entry into the building. All guests, visitors and staff are required to wear a nametag for ease of identification.

For the convenience of all residents, please ask your visitors to keep their young children supervised. Also, ask your teenage visitors to check in at the Receptionist's Desk when they arrive and not to move about the building unescorted. Guests can be entertained in your room, in the lounges, the Parlor, the Rotunda or any of the courtyards on the beautiful grounds. **Your animal friends may make brief visits if properly leashed.**

We also encourage you to make frequent visits away from the Facility. Please sign out at the Nurse's Station in your neighborhood, so that we will know where to find you in an emergency. If you are going to miss a meal we appreciate a two hour advance notice.

We assure your right to invite into the Facility anyone of your choosing. This applies not only to your family members, guardians and friends, but also to representatives of governmental organizations or other bona fide community agencies. We further assure your right to visit with any of the above who may call on you without an invitation. At the same time, we will respect your right to deny visitation to any person you do not wish to see.

The Westport Road entrance of the Facility is locked at 9:00 p.m. If you are returning to the Facility after that hour, please enter the first doors of the Westport Road entrance and use the phone to alert the Building Services security to greet you. You may also call in advance and arrange for the Building Services staff to meet you at a specific entrance.



YOUR RIGHTS

This facility has established written guidelines regarding your rights and responsibilities you have, and a copy is given to you and/or your responsible party prior to or upon admission. Resident rights and responsibilities are explained to you and/or your responsible party, and a signed copy of the acknowledgement is maintained in the Business Office. The complete list of protected resident rights is also provided and posted in the hallway connecting the Main Building to the Village Mall.

State Resident Rights

216.515 Rights of residents -- Duties of facilities -- Actions.

Every resident in a long-term-care facility shall have at least the following rights:

(1) Before admission to a long-term-care facility, the resident and the responsible party or his responsible family member or his guardian shall be fully informed in writing, as evidenced by the resident's written acknowledgment and that of the responsible party or his responsible family member or his guardian, of all services available at the long-term-care facility. Every long-term-care facility shall keep the original document of each written acknowledgment in the resident's personal file.

(2) Before admission to a long-term-care facility, the resident and the responsible party or his responsible family member or his guardian shall be fully informed in writing, as evidenced by the resident's written acknowledgment and that of the responsible party or his responsible family member or his guardian, of all resident's responsibilities and rights as defined in this section and KRS 216.520 to 216.530.

Every long-term-care facility shall keep the original document of each written acknowledgment in the resident's personal file.

(3) The resident and the responsible party or his responsible family member or his guardian shall be fully informed in writing, as evidenced by the resident's written acknowledgment and that of the responsible party or his responsible family member, or his guardian, prior to or at the time of admission and quarterly during the resident's stay at the facility, of all service charges for which the resident or his responsible family member or his guardian is responsible for paying. The resident and the responsible party or his responsible family member or his guardian shall have the right to file complaints concerning charges which they deem unjustified to appropriate local and state consumer protection agencies. Every long-term-care facility shall keep the original document of each written acknowledgment in the resident's personal file.

(4) The resident shall be transferred or discharged only for medical reasons, or his own welfare, or that of the other residents, or for nonpayment, except where prohibited by law or administrative regulation. Reasonable notice of such action shall be given to the resident and the responsible party or his responsible family member or his guardian.

(5) All residents shall be encouraged and assisted throughout their periods of stay in long-term care facilities to exercise their rights as a resident and a citizen, and to this end may voice grievances and recommend changes in policies and services to facility staff and to outside representatives of their choice, free from restraint, interference, coercion, discrimination, or reprisal.

(6) All residents shall be free from mental and physical abuse, and free from chemical and physical restraints except in emergencies or except as thoroughly justified in writing

by a physician for a specified and limited period of time and documented in the resident's medical record.

(7) All residents shall have confidential treatment of their medical and personal records. Each resident or his responsible family member or his guardian shall approve or refuse the release of such records to any individuals outside the facility, except as otherwise specified by statute or administrative regulation.

(8) Each resident may manage the use of his personal funds. If the facility accepts the responsibility for managing the resident's personal funds as evidenced by the facility's written acknowledgment, proper accounting and monitoring of such funds shall be made. This shall include each facility giving quarterly itemized statements to the resident and the responsible party or his responsible family member or his guardian which detail the status of the resident's personal funds and any transactions in which such funds have been received or disbursed. The facility shall return to the resident his valuables, personal possessions, and any unused balance of moneys from his account at the time of his transfer or discharge from the facility. In case of death or for valid reasons when he is transferred or discharged the resident's valuables, personal possessions, and funds that the facility is not liable for shall be promptly returned to the resident's responsible party or family member, or his guardian, or his executor.

(9) If a resident is married, privacy shall be assured for the spouse's visits and if they are both residents in the facility, they may share the same room unless they are in different levels of care or unless medically contraindicated and documented by a physician in the resident's medical record.

(10) Residents shall not be required to perform services for the facility that are not included for therapeutic purposes in their plan of care.

(11) Residents may associate and communicate privately with persons of their choice and send and receive personal mail unopened.

(12) Residents may retain the use of their personal clothing unless it would infringe upon the rights of others.

(13) No responsible resident shall be detained against his will. Residents shall be permitted and encouraged to go outdoors and leave the premises as they wish unless a legitimate reason can be shown and documented for refusing such activity.

(14) Residents shall be permitted to participate in activities of social, religious, and community groups at their discretion.

(15) Residents shall be assured of at least visual privacy in multibed rooms and in tub, shower, and toilet rooms.

- (16) The resident and the responsible party or his responsible family member or his guardian shall be permitted the choice of a physician.
- (17) If the resident is adjudicated mentally disabled in accordance with state law, the resident's guardian shall act on the resident's behalf in order that his rights be implemented.
- (18) Each resident shall be treated with consideration, respect, and full recognition of his dignity and individuality, including privacy in treatment and in care for his personal needs.
- (19) Every resident and the responsible party or his responsible family member or his guardian has the right to be fully informed of the resident's medical condition unless medically contraindicated and documented by a physician in the resident's medical record.
- (20) Residents have the right to be suitably dressed at all times and given assistance when needed in maintaining body hygiene and good grooming.
- (21) Residents shall have access to a telephone at a convenient location within the facility for making and receiving telephone calls.
- (22) The resident's responsible party or family member or his guardian shall be notified immediately of any accident, sudden illness, disease, unexplained absence, or anything unusual involving the resident.
- (23) Residents have the right to have private meetings with the appropriate long-term care facility inspectors from the Cabinet for Health Services.
- (24) Each resident and the responsible party or his responsible family member or his guardian has the right to have access to all inspection reports on the facility.
- (25) The above-stated rights shall apply in all cases unless medically contraindicated and documented by a physician in writing in the resident's medical record.
- (26) Any resident whose rights as specified in this section are deprived or infringed upon shall have a cause of action against any facility responsible for the violation. The action may be brought by the resident or his guardian. The action may be brought in any court of competent jurisdiction to enforce such rights and to recover actual and punitive damages for any deprivation or infringement on the rights of a resident. Any plaintiff who prevails in such action against the facility may be entitled to recover reasonable attorney's fees, costs of the action, and damages, unless the court finds the plaintiff has acted in bad faith, with malicious purpose, or that there was a complete absence of justifiable issue of either law or fact. Prevailing defendants may be entitled to recover reasonable attorney's fees. The remedies provided in this section are in addition to and cumulative with other legal and administrative remedies available to a resident and to the cabinet.

Federal Resident Rights

Resident Rights under federal law

Our residents have rights under federal law. Each state has outlined specific rights as well.

The Facility shall protect and promote the rights of each Resident, including each of the following rights:

1. **The Resident has a right** to a dignified existence, self-determination, and communication with, and access to, persons and services inside and outside the Facility.
2. **The Resident has a right** to exercise his or her rights as a Resident of the Facility and as a citizen or resident of the United States.
3. **The Resident has the right** to be free of interference, coercion, discrimination, or reprisal from the Facility in exercising his or her rights.
4. **The Resident has the right** to be fully informed, in a language he or she can understand, of his or her total health status, including, but not limited to, his or her medical condition.
5. **The Resident has the right** to refuse treatment and to refuse to participate in experimental research.
6. **The Resident has the right** to exercise his or her legal rights, including filing a grievance with the State survey and certification agency concerning Resident abuse, neglect, and misappropriation of Resident property in the Facility.
7. **The Resident has the right** to manage his or her financial affairs.
8. **The Resident has a right** to choose an attending physician.
9. **The Resident has a right** to be fully informed in advance about care and treatment and any changes-in that care or treatment that may affect the Resident's well being.
10. **The Resident has a right** to participate in planning his or her care and treatment or changes in care and treatment unless adjudged incompetent or otherwise found to be incapacitated under the laws of the State.
11. **The Resident has the right** to personal privacy and confidentiality of his or her personal and clinical records.

12. **The Resident or Legal Representative has the right** upon oral or written request, to access all records pertaining to himself or herself, including clinical records, within twenty four hours. After receipt of his or her records, the Resident or Legal Representative has the right to purchase (at a cost not to exceed the community standard) photocopies of the records or any portions of them upon request and with two days' advance notice to the Facility.

13. **The Resident may** approve or refuse the release of personal and clinical records to any individual outside the Facility except when:

- A. The Resident is transferred to another health care institution.
- B. Record release is required by law or a third-party payment contract.

14. **The Resident has a right** to voice grievances with respect to treatment or care that fails to be furnished without discrimination or reprisal for voicing grievances.

15. **The Resident has a right** to prompt efforts by the Facility to resolve grievances, including those with respect to the behavior of other Residents.

16. **The Resident has a right** to examine the results of the most recent survey of the Facility conducted by Federal or State surveyors and any plan of correction in effect with respect to the Facility.

17. **The Resident has a right** to receive information from agencies acting as client advocates and be afforded the opportunity to contact the agencies.

Title VI of the Civil Rights Act of 1964

As a recipient of Federal financial assistance, this facility does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of race, color, or national origin, or on the basis of disability or age in admission to, participation, or receipt of services and benefits of any of its programs and activities or in employment therein, whether carried out by the facility directly or through a contractor or any other entity with whom the facility arranges to carry out its programs and activities.

This statement is in accordance with the provisions of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Regulations of the U.S. Department of Health and Human Services issued pursuant to the Acts, Title 45 Code of Federal Regulations Part 80, 84, and 91. (Other Federal Laws and Regulations provided similar protection against discrimination on grounds of sex and creed.)

In case of questions concerning this policy, or in the event of a desire to file a complaint alleging violations of the above, please contact, the Executive Director of this facility.

Public Notice

Discrimination

Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Equal Employment Opportunity Act, provides that no person in the United States, on the grounds of race, color, creed, religion, national origin, age, sex, or handicap, be denied the benefits of or be subjected to discrimination under any of our programs, activities, financial assistance programs, admission policies, training programs, or employment practices. It is the policy of this facility that admission, recruitment, employment, and all administrative practices be conducted in compliance with these Acts. Grievance procedures for all personnel have been implemented for resolving complaints that provide for immediate levels of discussion, fact finding, hearing and appeal to the administrator, if necessary, without fear of reprisal of any form. Any person who feels he or she is has not received treatment in accordance with our policies and practices may submit a complaint to the person or agencies listed below:

State Department of Health Office for
Civil Rights

Department of Health & Human Services Office for Civil
Rights
Ombudsman

HIV Overview

HIV/AIDS: The Basics

Last Reviewed: July 3, 2019

Key Points

HIV is the virus that causes HIV infection. AIDS is the most advanced stage of HIV infection. HIV is spread through contact with the blood, semen, pre-seminal fluid, rectal fluids, vaginal fluids, or breast milk of a person with HIV. In the United States, HIV is spread mainly by having anal or vaginal sex or sharing injection drug equipment, such as needles, with a person who has HIV.

Antiretroviral therapy (ART) is the use of HIV medicines to treat HIV infection. People on ART take a combination of HIV medicines (called an HIV regimen) every day.

ART is recommended for everyone who has HIV. ART can't cure HIV infection, but HIV medicines help people with HIV live longer, healthier lives. HIV medicines can also reduce the risk of HIV transmission.

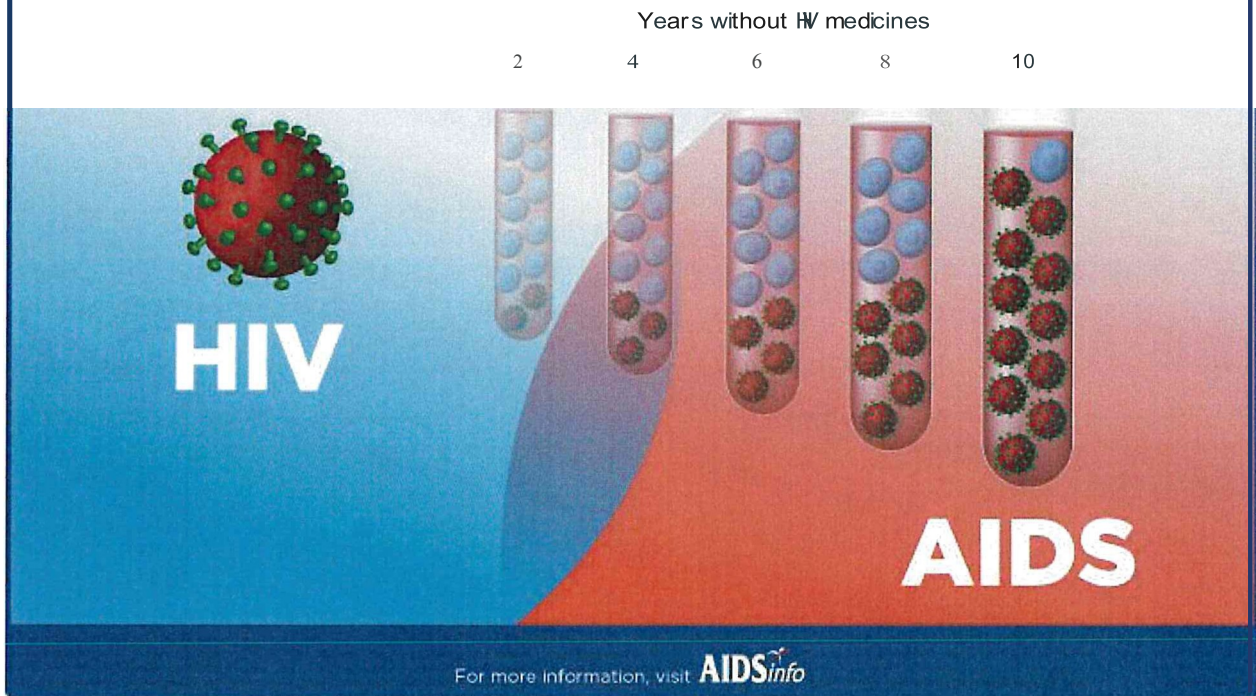
What is HIV/AIDS?

HIV stands for human immunodeficiency virus, which is the virus that causes HIV infection. The abbreviation "HIV" can refer to the virus or to HIV infection.

AIDS stands for acquired immunodeficiency syndrome. AIDS is the most advanced stage of HIV infection.

HIV attacks and destroys the infection-fighting CD4 cells of the immune system. The loss of CD4 cells makes it difficult for the body to fight off infections and certain cancers. Without treatment, HIV can gradually destroy the immune system and advance to AIDS.

HIV and AIDS



How is HIV spread?

The spread of HIV from person to person is called HIV transmission. HIV is spread only in certain body fluids from a person who has HIV. These body fluids include:

Blood

Semen

Pre-seminal fluid

Vaginal fluids

Rectal fluids

Breast milk


HIV transmission is only possible through contact with HIV-infected body fluids.

In the United States, HIV is spread mainly by:

Having anal or vaginal sex with someone who has HIV without using a condom or taking medicines to prevent or treat HIV

Sharing injection drug equipment, such as needles, with someone who has HIV

The spread of HIV from a woman with HIV to her child during pregnancy, childbirth, or breastfeeding is called mother-to-child transmission of HIV.



You can't get HIV by shaking hands or hugging a person who has HIV. You also can't get HIV from contact with objects such as dishes, toilet seats, or doorknobs used by a person with HIV. HIV is not spread through the air or in water or by mosquitoes, ticks, or other blood-sucking insects.

How can I reduce my risk of getting HIV?

To reduce your risk of HIV infection, use condoms correctly every time you have sex, limit your number of sexual partners, and never share injection drug equipment. Also talk to your health care provider about pre-exposure prophylaxis (PrEP). PrEP is an HIV prevention option for people who don't have HIV but who are at high risk of becoming infected with HIV. PrEP involves taking a specific HIV medicine every day.

HIV medicines, given to women with HIV during pregnancy and childbirth and to their babies after birth, reduce the risk of mother-to-child transmission of HIV. In addition, because HIV can be transmitted in breast milk, women with HIV who live in the United States should not breastfeed their babies. Baby formula is a safe and healthy alternative to breast milk and is readily available in the United States.

What is the treatment for HIV?

Antiretroviral therapy (ART) is the use of HIV medicines to treat HIV infection. People on ART take a combination of HIV medicines (called an HIV treatment regimen) every day.

ART is recommended for everyone who has HIV. ART prevents HIV from multiplying, which reduces the amount of HIV in the body (called the viral load). Having less HIV in the body protects the immune system and prevents HIV infection from advancing to AIDS. ART can't cure HIV, but HIV medicines help people with HIV live longer, healthier lives.

ART also reduces the risk of HIV transmission. A main goal of ART is to reduce a person's viral load to an undetectable level. An undetectable viral load means that the level of HIV in the blood is too low to be detected by a viral load test. People with HIV who maintain an undetectable viral load have effectively no risk of transmitting HIV to their HIV-negative partner through sex.

What are the symptoms of HIV/AIDS?

Within 2 to 4 weeks after infection with HIV, some people may have flu-like symptoms, such as fever, chills, or rash. The symptoms may last for a few days to several weeks. During this earliest stage of HIV infection, the virus multiplies rapidly.

After the initial stage of infection, HIV continues to multiply but at very low levels. More severe symptoms of HIV infection, such as signs of opportunistic infections, generally don't appear for many years. (Opportunistic infections are infections and infection-related cancers that occur more frequently or are more severe in people with weakened immune systems than in people with healthy immune systems.)

Without treatment with HIV medicines, HIV infection usually advances to AIDS in 10 years or longer, though it may advance faster in some people.

HIV transmission is possible at any stage of HIV infection—even if a person with HIV has no symptoms of HIV.

How is AIDS diagnosed?

Symptoms such as fever, weakness, and weight loss may be a sign that a person's HIV has advanced to AIDS. However, a diagnosis of AIDS is based on the following criteria:

A drop in CD4 count to less than 200 cells/mm³. A CD4 count measures the number of CD4 cells in a sample of blood.

OR

The presence of certain opportunistic infections.

Although an AIDS diagnosis indicates severe damage to the immune system, HIV medicines can still help people at this stage of HIV infection.

This fact sheet is based on information from the following sources:

From CDC: HIV Basics

From the Department of Health and Human Services (HHS): Guidelines for the Use of Antiretroviral Agents in Pediatric HIV Infection: Introduction

From the National Institute of Allergy and Infectious Diseases (NIAID): HIV/AIDS

Numbers to Know

Department of Health
Office of Inspector General L&N Building, 2-W
908 W. Broadway
Louisville, KY 40203
502-595-4079

Area Agency on Aging Division of Aging
275 East Main Street, 3-W-F Frankfort, KY 40621
502-564-6930

Ombudsman
The office of the Ombudsman
Cabinet for Health and Family Services 275 East Main Street, IE-B
Frankfort, KY 40621
800-372-2973

Mental Health & Retardation
The Kentucky Dept. for Mental Health 100 Fair Oaks Lane, 4 E-B
Frankfort, KY 40621
502-564-2880

Medicaid
Department for Community Based Services
908 W. Broadway, 4th Floor East L&N Building
Louisville, KY 40203
502-595-4732

Social Security
Social Security Office 800-772-1 21 3

Protection and Advocacy
Division of Protection and Advocacy 275 E. Main
Street, 3 E-A
Frankfort, KY 4062 1
502-564-6852

