

Resident Rights

1. **Resident rights.** The resident has the right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility.
2. **Exercise of rights.** The resident has the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States.
 - a. The resident has the right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights and to be supported by the facility in the exercise of his or her rights.
 - b. In the case of a resident who has not been adjudged incompetent by the State court, the resident has the right to designate a representative, in accordance with State law and any legal surrogate so designated may exercise the resident's rights to the extent provided by State law.
 - c. The same-sex spouse of a resident must be afforded treatment equal to that afforded to an opposite-sex spouse if the marriage was valid in the jurisdiction in which it was celebrated.
 - d. The resident representative has the right to exercise the resident's rights to the extent those rights are delegated to the resident representative.
 - e. The resident retains the right to exercise those rights not delegated to a resident representative, including the right to revoke a delegation or rights, except as limited by State law.
3. **Planning and implementing care.** The resident has the right to be informed of, and participate in, his or her treatment, including:
 - a. The right to be fully informed in language that he or she can understand of his or her total health status, including but not limited to, his or her medical condition.
 - b. The right to participate in the development and implementation of his or her person-centered plan of care, including but not limited to:
 - i. The right to participate in the planning process, including the right to identify individuals or roles to be included in the planning process, the right to request meetings and the right to request revisions to the person-centered plan of care.
 - ii. The right to participate in establishing the expected goals and outcomes of care, the type, amount, frequency, and duration of care, and any other factors related to the effectiveness of the plan of care.
 - iii. The right to be informed, in advance, of changes to the plan of care.
 - iv. The right to receive the services and/or items included in the plan of care.
 - v. The right to see the care plan, including the right to sign after changes to the plan of care.
 - c. The right to be informed in advance, of the care to be furnished and the type of care giver or professional that will furnish care.
 - d. The right to be informed by the physician or other practitioner or professional, of the risks and benefits of proposed care, of treatment and treatment alternatives or treatment options and to choose the alternative or option he or she prefers.
 - e. The right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate and advance directive.
 - f. The right to self-administer medications if the interdisciplinary team has determined

- f. The resident has a right to participate in family groups.
- g. The resident has a right to have family member(s) or other resident representative(s) meet in the facility with the families or resident representative(s) or other residents in the facility.
- h. The resident has a right to participate in other activities, including social, religious, and community activities that do not interfere with the rights of other residents in the facility.
- i. The resident has a right to choose to or refuse to perform services for the facility and the facility must not require a resident to perform services for the facility. The resident may perform services for the facility, if he or she chooses, when
 - i. The facility has documented the resident's need or desire for work in the plan of care;
 - ii. The plan specifies the nature of the services performed and whether the services are voluntary or paid;
 - iii. Compensation for paid services is at or above prevailing rates; and
 - iv. The resident agrees to the work arrangement described in the plan of care.
- j. The resident has the right to manage his or her financial affairs. This includes the right to know, in advance, what charges a facility may impose against a resident's personal funds.

7. **Information and communication.** The resident has the right to be informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities during his or her stay in the facility.

- a. The resident has the right to access personal and medical records pertaining to him or herself.
- b. The resident has the right to receive notices orally (meaning spoken) and in writing (including Braille) in a format and a language he or she understands, including:
 - i. Required notices as specified in this section. The facility must furnish to each resident a written description of legal rights which includes—
 - A description of the manner in protecting personal funds,
 - A description of the requirements and procedures for establishing eligibility for Medicaid, including the right to request an assessment of resources
 - A list of names, addresses (mailing and email), and telephone numbers of all pertinent State regulatory and informational agencies, resident advocacy groups such as the State Survey Agency, the State licensure office, the State Long-Term Care Ombudsman program, the protection and advocacy agency, adult protective services where state law provides for jurisdiction in long-term care facilities, the local contact agency for information about returning to the community and the Medicaid Fraud Control Unit; and
 - A statement that the resident may file a complaint with the State Survey Agency concerning any suspected violation of state or federal nursing facility regulations, including but not limited to resident abuse, neglect, exploitation, misappropriation of resident property in the facility, non-compliance with the advance directives requirements and requests for

information regarding returning to the community.

- c. Information and contact information for State and local advocacy organizations, including but not limited to the State Survey Agency, the State Long-Term Care Ombudsman program and the protection and advocacy system;
 - d. Information regarding Medicare and Medicaid eligibility and coverage;
 - e. Contact information for the Aging and Disability Resource Center; or other No Wrong Door Program
 - f. Contact information for the Medicaid Fraud Control Unit; and
 - g. Information and contact information for filing grievances or complaints concerning any suspected violation of state or federal nursing facility regulations, including but not limited to resident abuse, neglect, exploitation, misappropriation of resident property in the facility, non-compliance with the advance directives requirements and requests for information regarding returning to the community.
 - h. The resident has the right to have reasonable access to the use of a telephone, including TTY and TDD services, and a place in the facility where calls can be made without being overhead. This includes the right to retain and use a cellular phone at the resident's own expense.
 - i. The resident has the right to send and receive mail, and to receive letters, packages and other materials delivered to the facility for the resident through a means other than a postal service, including the right to:
 - i. Privacy of such communications consistent with this section; and
 - ii. Access to stationary, postage, and writing implements at the resident's own expense.
 - j. The resident has the right to have reasonable access to and privacy of their use of electronic communication such as email and video communications and for internet research.
 - i. If the access is available to the facility
 - ii. At the resident's expense, if any additional expense is incurred by the facility to provide such access to the resident.
 - iii. Such use must comply with state and federal law.
 - k. The resident has a right to—
 - i. 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; and
 - ii. Receive information from agencies acting as client advocates, and be afforded the opportunity to contact these agencies.
8. **Privacy and confidentiality.** The resident has a right to personal privacy and confidentiality of his or her personal and medical records.
- a. Personal privacy includes accommodations, medical treatment, written and telephone communications, personal care, visits, and meetings of family and resident groups, but this does not require the facility to provide a private room for each resident.
 - b. The resident has a right to secure and confidential personal and medical records.

- i. The resident has the right to refuse the release of personal and medical records except as provided at §483.70(i)(2) or other applicable federal or state laws.
9. **Safe environment.** The resident has a right to a safe, clean, comfortable and Homelike environment, including but not limited to receiving treatment and supports for daily living safely.
10. **Grievances.** The resident has the right to—
 - a. Voice grievances to the facility or other agency or entity that hears grievances without discrimination or reprisal. Such grievances include those with respect to care and treatment which has been furnished as well as that which has not been furnished; and the behavior of staff and of other residents; and other concerns regarding their LTC facility stay.
 - b. The resident has the right to and the facility must make prompt efforts by the facility to resolve grievances the resident may have.