

Module 2: Patient/Resident Rights

Minimum Number of Theory Hours: 3

Suggested Theory Hours: 5

Recommended Clinical Hours: 1

Statement of Purpose:

The purpose of this unit is to introduce the Nurse Assistant to patient/resident rights. The fundamental principle behind patient/resident rights is that each patient/resident is a member of a family and of society as a whole. They must be cared for in a manner that protects their rights and meets the individual family, psychosocial and spiritual needs in a long-term care setting. These rights are protected by federal and state regulations.

Terminology:

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|---------------------------------------|---------------------------|--------------------------|
| 1. Abuse | 13. Ethical standard | 26. Ombudsman |
| 2. Advance Directive | 14. False imprisonment | 27. Physical abuse |
| 3. Aiding and abetting | 15. Financial abuse | 28. Policy and Procedure |
| 4. Assault | 16. Grievances | 29. Privacy |
| 5. Battery | 17. HIPAA | 30. Psychological abuse |
| 6. Choice | 18. Informed consent | 31. Resident council |
| 7. Chronic | 19. Involuntary seclusion | 32. Restraints |
| 8. Coercion | 20. Laws | 33. Scope of practice |
| 9. Confidential | 21. Legal standard | 34. Sexual abuse |
| 10. Defamation | 22. Libel | 35. Slander |
| 11. Defamation of character | 23. Mandated reporter | 36. Social services |
| 12. Do Not Resuscitate (DNR)/ No Code | 24. Neglect | 37. Theft |
| | 25. Negligence | 38. Verbal abuse |

Patient, resident, and client are synonymous terms referring to the person receiving care

Performance Standards (Objectives):

Upon completion of the three (3) hours of class plus homework assignments and one (1) hour of clinical experience, the learner will be able to:

1. Define key terminology
2. Explain the purpose of a long-term care facility
3. Recognize the role of the Nurse Assistant in maintaining patient/resident rights, as stated in federal and state regulation
4. Compare California Code of Regulations Title 22, Division 5, Chapter 3, 72527, with Title 42 Code of Federal Regulations 483.10 regarding patient/resident rights
5. Explain the Nurse Assistant role in preventing negligent acts and violation of patient/resident rights
6. Describe the Nurse Assistant role in reporting patient/resident rights violations
7. Describe the role of an ombudsman
8. Identify examples of patient/resident rights, which support a patient's/resident's need for security, belonging and self-esteem

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5. California Department of Public Health (CDPH) Nursing Home Residents' Rights <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/NursingHomeResidentsRights.aspx>
6. California Health and Safety Code, Sections 1599.1, 1599.2, 1599.3 <http://www.search-california-law.com/research/section/ca/HSC/4.25/index.html>
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 1987- <https://www.ncbi.nlm.nih.gov/pubmed/2671955>
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Content Outline	Recommended Teaching	Clinical Demonstration/
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	Strategies and Assignments	Method of Evaluation
<p>Objective 1 Define key terminology. A. Review the terms listed in the terminology section B. Spell the listed terms accurately C. Pronounce the terms correctly D. Use the terms in their proper context</p>	<p>A. Lecture/Discussion B. Games: word searches, crossword puzzles, Family Feud, Jeopardy, bingo, spelling bee, hangman, and concentration C. Encourage use of internet, medical dictionary, and textbooks D. Create flashcards</p>	<p>A. Have students select five words from the list of key terminology and write a sentence for each defining the term B. Administer vocabulary pre-test and post-test C. Uses appropriate terminology when charting and reporting to licensed personnel</p>
<p>Objective 2 Explain the purpose of a long-term care facility. A. Provide physical care B. Provide focused care for patients/residents with special needs C. Provide a team approach to care and services D. Prevent illness/injury and loss of function E. Promote recovery and health in a setting that serves as both care facility and residence F. Assist patient/resident in reaching their maximum potential both physically and mentally</p>	<p>A. Lecture/Discussion B. Arrange for tour of a long-term care facility C. Arrange for a guest speaker from a long-term care facility</p>	<p>A. Written test B. Class participation</p>
<p>Objective 3: Recognize the role of the Nurse Assistant in maintaining patient/resident rights, as stated in federal and state regulations. A. The Nurse Assistant is responsible for being familiar with regulations that provide for patient/resident rights and for assisting patients/residents to exercise their rights B. Patient/resident rights are protected by federal regulations for long-term care facilities C. Title 42, Code of Federal Regulations Resident Rights (483.10): Residents living in a health care facility</p>	<p>A. Lecture/Discussion B. Locate facility policies, procedures, and patient/resident rights documents C. Role-play a situation that involves a threat to</p>	<p>A. Written test B. Class participation C. Locate facility policies, procedures, and patient/resident rights documents D. Consistently promotes</p>

<p>should have the same rights as those held by all U.S. Citizens.</p> <ol style="list-style-type: none"> 1. Residents have the right to be free of interference, coercion, discrimination, or reprisal from the facility in exercising their rights. They include: <ol style="list-style-type: none"> a. Quality of life <ol style="list-style-type: none"> 1) Residents have the right to the best care available 2) Dignity, choice and independence are important b. Services and activities to maintain high level of wellness <ol style="list-style-type: none"> 1) Residents must have the correct care that should keep them as healthy as possible every day 2) Health should not decline as a direct result of the facility's care c. The right to be fully informed about rights and services <ol style="list-style-type: none"> 1) Residents must be told what care and services are available 2) They must be told the charges for each service 3) Legal rights must be explained in a language they understand, a written copy is given to them <ol style="list-style-type: none"> a) Right to be notified in advance of any room change or roommate b) Right to communicate with someone who speaks their language c) Right to obtain assistance for any sensory impairment, e.g., blindness 4) Informed consent is a concept that goes along with this. A person has the right to direct what happens to his or her body d. The right to make independent choices <ol style="list-style-type: none"> 1) Residents have the right to make choices about their doctors, care and treatments 2) Rights to make personal decisions. These include what to wear and how to spend their time. They can join in community activities, both inside, and outside the nursing home e. The right to privacy and confidentiality <ol style="list-style-type: none"> 1) Residents can expect privacy with care given. Their 	<p>patient/resident rights</p>	<p>patient/resident rights</p>
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<p>medical and personal information cannot be shared with anyone but the healthcare team</p> <ol style="list-style-type: none"> 2) Residents have the right to private, unrestricted communication with anyone they choose (HIPAA protects residents' privacy) <ol style="list-style-type: none"> f. The right to dignity, respect and freedom <ol style="list-style-type: none"> 1) Resident must be treated with dignity by caregivers 2) They cannot be abused in any way g. The right to security of possessions <ol style="list-style-type: none"> 1) Resident's personal possessions must be safe at all times. They cannot be taken or used by anyone without resident's permission 2) Residents have the right to manage their own finances h. The right to complain <ol style="list-style-type: none"> 1) Residents have the right to complain without fear or punishment 2) Facility must quickly try to resolve complaints i. The right to participate in their own care j. The right to visits, receive mail, and telephone calls <p>D. Admission, Transfer and Discharge (483.12):</p> <ol style="list-style-type: none"> 1. Residents have the rights to stay in a facility unless a transfer or discharge is needed. Location changes must be made safely and with resident knowledge and consent 2. Policies related to the admission of the resident must be based on the ability to provide adequate care 3. Those policies for transfer and discharge activities must be based on the resident's needs and welfare, concern for the safety and welfare of other residents, or as a result of nonpayment for services <ol style="list-style-type: none"> a. Transfer and discharge requirements <ol style="list-style-type: none"> 1) Notice of 7 days bed-hold policy and readmission requirements 2) Equal access to quality care regardless of payment b. Admission policy <ol style="list-style-type: none"> 1) Resident care policies 2) 30 days' notification prior to permanent discharge 		
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<p>E. Resident Behavior and Facility Practices (483.13)</p> <ol style="list-style-type: none"> 1. The resident has the right to be free from any physical restraints imposed, or from psychoactive drugs that are administered for the purpose of discipline or convenience and are not required for treatment of the resident’s medical symptoms 2. Restraint <ol style="list-style-type: none"> a. Physical (i.e. soft belt, bed rails, geri-chair, mittens, soft ties, locked wheelchair, lap buddy-if cannot be removed by patient) b. Chemical (i.e. psychotropic drugs) 3. Freedom from abuse <ol style="list-style-type: none"> a. Financial; stealing or borrowing items or accepting gifts b. Verbal; teasing, profanity, racial slanders, threats c. Sexual; overtures, innuendo, gestures, inappropriate touching d. Physical; battery, kicking, biting, hitting, shoving, pulling hair, rough handling e. Psychological; ridiculing, ignoring, manipulating f. Involuntary seclusion; isolation g. Abandonment; leaving someone unattended h. Neglect; failure to provide care that a reasonable person would provide. (i.e. not answering call light, smells of urine and not being cleaned/changed) <p>F. Role of Nurse Assistant</p> <ol style="list-style-type: none"> 1. Self-care; personal stress management (i.e. identify stressors), take breaks, take lunch, proper nutrition, exercise, sleep, support network of family and friends, seek out professional intervention as needed 2. Communication with supervisors 3. Identify resident abuse; signs and symptoms, suspected, verbal account, witnessed or known 4. Mandated reporter; SOC341 (reporting form), aiding and abetting, ombudsman, California Department of Public Health (CDPH) 5. Documentation 		
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<p>G. Quality of Life (483.15)</p> <ol style="list-style-type: none"> 1. The resident must be cared for in a manner and in an environment that promotes maintenance or enhancement of each resident's quality of life 2. Care and environment includes: <ol style="list-style-type: none"> a. Dignity b. Self-determination and participation c. Participation in resident and family groups d. Participation in other activities e. Accommodation of needs f. Activities g. Social Services h. Personal living environment 3. Identify environmental and personal living area hazards to prevent incidents and/or accidents 		
<p>Objective 4: Compare California Code of Regulations Title 22, Division 5, Chapter 3, 72527, with Title 42 Code of Federal Regulations 483.10 regarding patient/resident rights.</p> <p>A. Residents shall be encouraged/assisted to exercise their rights as a patient and as a citizen, 72527(a). Written policies regarding patient rights must be established and available</p> <ol style="list-style-type: none"> 1. Patient must be informed of rights, rules and regulations regarding patient conduct 2. Patient must be informed of services and charges 3. Patient must be informed of medical condition by doctor and have opportunity to participate in planning of medical treatment 4. Patient can refuse treatment and be informed of consequences (informed consent) 5. Patient can be transferred or discharged only for medical reasons, welfare, other patients' welfare, or for nonpayment 6. Patient shall be assisted to exercise rights, voice grievances, recommend changes in policy and services, have outside representation, and freedom from restraint, interference, coercion, discrimination and reprisal 	<p>A. Lecture/Discussion B. Handout 2.4a: California Code of Regulations, Title 22, Division 5, Chapter 3, 72527 C. Handout 2.4b- California Health and Safety Code</p>	<p>A. Written test B. Class participation</p>

<ul style="list-style-type: none"> 7. Patient allowed to manage their personal finances 8. Patient has right to be free from mental and physical abuse and chemical and physical restraints 9. Confidential treatment of records <ul style="list-style-type: none"> a. Health Insurance Portability and Accountability Act (HIPAA) b. Standards and safeguards for documentation and transmission of health records to assure privacy and security of this data 10. Patient has right to be treated with consideration, respect, dignity, and individuality, including privacy 11. Patient has right to not be required to perform work 12. Patient has right to be able to communicate privately and send/receive mail 13. Patient has right to participate in social or religious activities 14. Patient has right to be allowed to retain and use personal clothing and possessions 15. If married, to be provided privacy and share a room if both are patients in the facility 16. Patient has right to have daily visiting hours 17. Patient has right to have visit by clergy at any time 18. Patient has right to have relatives, or person responsible to visit critically ill patient at any time 19. Patient has right to be allowed privacy for visits 20. Patient has right to be allowed access to telephone and confidential calls 21. Right to participate in the electoral process - voting B. Patient rights may only be denied or limited for good cause evidenced by doctor's order and may be denied or limited only if allowed by law C. California Health and Safety Code (Skilled Nursing and Intermediate Care Facility Patient's Bill of Rights) <ul style="list-style-type: none"> 1. [1599.1] Written policies regarding the rights of patients shall be established and made available to patient, guardian, next of kin, sponsor, and public <ul style="list-style-type: none"> a. In addition to patient rights and obligations defined in the 		
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<p>regulations</p> <ol style="list-style-type: none"> 1) The facility shall employ adequate, qualified staff 2) Assure personal hygiene of patients, including prevention of pressure ulcers and incontinence 3) Provide diet to meet patient needs 4) Activities and promotion of self-care <p>b. The facility shall be clean, sanitary and in good repair including the nurses call system</p> <p>2. [1599.2] Written information informing patients of their rights include facility requirements in the Health and Safety Code and Title 22.</p> <ol style="list-style-type: none"> a. Violations of either code may be grounds for civil or criminal proceedings against the facility or its personnel b. Patients have the right to voice grievances free of reprisal and to submit complaints to the Department of Public Health Services (CDPH) <p>3. [1599.3] Rights of patients who are determined to be incompetent, incapable of understanding, exhibits a communication barrier are to be carried out/protected by guardian, next of kin, conservator, sponsoring agency or representative unless it is the facility</p>		
<p>Objective 5 Describe the Nurse Assistant role in preventing negligent acts and violations patient/resident rights.</p> <ol style="list-style-type: none"> A. Explain the difference between negligence and abuse B. Recognize the evidence of negligent acts and violations of patient/resident rights C. Explain how to prevent violations of patient/resident rights D. Define facility, state, and federal policies and procedures related to violation of patient/resident rights 	<ol style="list-style-type: none"> A. Lecture/Discussion B. Video from Textbook C. Downloadable publications from CA Attorney General's office available at https://www.safestates.org/page/Publications 	<ol style="list-style-type: none"> A. Written test B. Class participation

<p>Objective 6 Describe the Nurse Assistant role in reporting patient/resident rights violations.</p> <ul style="list-style-type: none"> A. Identify patient/resident rights violations B. Discuss your observations with a licensed nurse/appropriate personnel C. Report observations as a mandated reporter, following federal mandate for reporting suspected or actual patient/resident rights violations D. Follow up on reported incident with licensed personnel 	<ul style="list-style-type: none"> D. Lecture/Discussion E. Video from Textbook 	<ul style="list-style-type: none"> A. Written test B. Class participation
<p>Objective 7 Describe the role of an ombudsman.</p> <ul style="list-style-type: none"> A. Patient advocate and member of the health care team B. Impartial person who investigates complaints and acts as an advocate for patients/residents and/or families to resolve conflicts C. Legal responsibility of an ombudsman to follow facility protocol D. Gives information to the public 	<ul style="list-style-type: none"> A. Lecture/Discussion B. Arrange for an ombudsman to speak to the class 	<ul style="list-style-type: none"> A. Written test B. Class participation
<p>Objective 8 Identify examples of patient/resident rights, which support a patient's/resident's need for security, belonging, and self-esteem.</p> <ul style="list-style-type: none"> A. Physiological <ul style="list-style-type: none"> 1. Food 2. Water 3. Oxygen 4. Sleep 5. Sex 6. Temperature extremes B. Safety & Security: asepsis, knowledge of patient's/resident's individual needs <ul style="list-style-type: none"> 1. Freedom from fear and anxiety 2. Stability 3. Consistency in routine 4. Freedom from pain 	<ul style="list-style-type: none"> A. Lecture/Discussion B. Handout 2.7a- Maslow's Hierarchy of Needs C. Handout 2.7b- Example of Human Needs as related to Maslow 	<ul style="list-style-type: none"> A. Written test B. Class participation

<p>C. Belonging: love and affection</p> <ol style="list-style-type: none"> 1. This is the patient's/resident's home 2. Sense of belonging (psychosocial needs) 3. Acceptance and love 4. Receive family, friends, and visitors in home-like environment <p>D. Self-esteem</p> <ol style="list-style-type: none"> 1. Ask opinion and really listen 2. Feeling competent 3. Gaining respect, approval and recognition <p>E. Self-actualization</p> <ol style="list-style-type: none"> 1. Pride in accomplishment; opportunity to do their best 2. Attain full learning, creative, and spiritual potential 		
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Sample Test: Module 2- Patient/Resident Rights

1. The Patient's Bill of Rights is:
 - A. Given to patients/residents when they request it
 - B. Provided to all patients/residents upon admission
 - C. Given to clients who are receiving home care
 - D. Not a legal document

2. Consumers of health care are responsible for:
 - A. Being honest with the physician
 - B. Withholding information from health care providers
 - C. Requesting a Nurse Assistant who will care for them
 - D. Doing what the physician says

3. Healthcare consumers always have the right to:
 - A. Receive respectful and considerate care
 - B. Refuse to pay their bill
 - C. Select the Nurse Assistant they want to care for them
 - D. Have visitors any hour of the day or night

4. Documents that provide instructions about the patient's/resident's wishes for treatment when the patient/resident is unable to communicate their wishes are called:
 - A. Medical records
 - B. Advanced Directives
 - C. Resident Bill of Rights
 - D. Policies and Procedures

5. Informed consent means that the:
 - A. Physician makes all health care decisions for the patient/resident
 - B. The nurse makes some decisions for the patient/resident
 - C. The patient/resident makes decisions based on full disclosure of procedures, benefits, and risks
 - D. The patient/resident is old enough to sign for treatment

6. A grievance is:
 - A. A form the patient/resident fills out when they have a complaint
 - B. Denial of services or treatment due to insurance
 - C. Patient/resident refusing to pay a bill
 - D. A complaint

7. Healthcare workers:
 - A. Do not need to know the Patient's Bill of Rights
 - B. Should refer questions about "rights" to the admissions coordinator
 - C. Must not discuss patient/resident rights because of confidentiality concerns
 - D. Must be familiar with the Patient's Bill of Rights

8. When an elderly person is admitted to the long-term care facility, they have the right to:
 - A. Have relatives stay overnight in their room
 - B. Have personal items in their room
 - C. Have the kitchen prepare food for them on their request
 - D. Bring their pet with them

9. The rights of patients/residents in long-term care facilities:
 - A. Were legislated by OBRA in 1987
 - B. Include the right to make independent medical choices
 - C. Are more restrictive than rights in other healthcare settings
 - D. Do not include informed consent

10. The purpose of a long-term care facility is to:
 - A. Provide care for persons who cannot care for themselves at home
 - B. Provide emergency care for the elderly
 - C. Provide surgical care for the elderly
 - D. Keep elderly people together and away from other age groups

11. A resident has been at home with his family all day. The Nurse Assistant notices new bruises on the patient's/resident's back when he returns. The Nurse Assistant should:
- A. Report the bruises to the licensed nurse
 - B. Ask family members the next time they visit
 - C. Say nothing to the patient/resident about the bruises
 - D. Wait to see if it happens again

True or False

12. _____ The Nurse Assistant does not need to be familiar with the Patient's Bill of Rights.
13. _____ The patient/resident has the right to be free from restraints.
14. _____ The patient/resident has the right to know about his or her diagnosis and prognosis.
15. _____ The patient/resident has the right to refuse treatment.
16. _____ The patient/resident has the right to know if a student is providing care for him or her.
17. _____ The patient/resident has the right to know the cost of care.
18. _____ If a visitor asks you a question about a patient's/resident's medical condition, it is alright to tell them.
19. _____ You may be found guilty of invasion of privacy if you open a patient's/resident's mail.
20. _____ Upon admission to the long-term care facility, the patient/resident should receive notices of right, rules, and services.
21. _____ An ombudsman is someone who helps resolve grievances between a patient's/resident's family and the facility.
22. _____ An Advance Directive is part of the admission process and is required.

Matching

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|---------------------------------|------------------------|
| A. Patient/Resident Rights | E. Grievance |
| B. Confidentiality | F. Advanced Directive |
| C. Client's Rights in Home Care | G. Corporal Punishment |
| D. Informed Consent | H. HIPAA |

23. _____ Not revealing private information
24. _____ Standards and safeguards for documentation and transmission of patient health records
25. _____ Use of physical force
26. _____ The document that guarantees the rights of the consumer of home care facilities
27. _____ Complaint
28. _____ The document that guarantees the rights of the consumer in a long-term care facility
29. _____ A document that states the patient's/resident's wishes for care in the event they are unable to
30. _____ Permission given for care after the procedures have been explained

Sample Test Answers: Module 2- Patient/Resident Rights

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| 1. B | 16. T |
| 2. A | 17. T |
| 3. A | 18. F |
| 4. B | 19. T |
| 5. C | 20. T |
| 6. D | 21. F |
| 7. D | 22. F |
| 8. B | 23. B |
| 9. B | 24. H |
| 10. A | 25. G |
| 11. A | 26. C |
| 12. F | 27. E |
| 13. T | 28. A |
| 14. T | 29. F |
| 15. T | 30. D |

California Code of Regulations, Title 22, Division 5, Chapter 3, 72527

Patients/Residents have the rights enumerated in this section and the facility shall ensure that these rights are not violated. The facility shall establish and implement written policies and procedures which include these rights and shall make a copy of these policies available to the patient and to any representative of the patient. The policies shall be accessible to the public upon request. Patients shall have the right:

1. To be fully informed, as evidenced by the patient's written acknowledgement prior to or at the time of admission and during stay, of these rights and of all rules and regulations governing patient conduct.
2. To be fully informed, prior to or at the time of admission and during stay, of services available in the facility and of related charges, including any charges for services not covered by the facility's basic per diem rate or not covered under Titles XVIII or XIX of the Social Security Act.
3. To be fully informed by a physician of his or her total health status and to be afforded the opportunity to participate on an immediate and ongoing basis in the total plan of care including the identification of medical, nursing and psychosocial needs and the planning of related services.
4. To consent to or to refuse any treatment or procedure or participation in experimental research.
5. To receive all information that is material to an individual patient's decision concerning whether to accept or refuse any proposed treatment or procedure. The disclosure of material information for administration of psychotherapeutic drugs or physical restraints or the prolonged use of a device that may lead to the inability to regain use of a normal bodily function shall include the disclosure of information listed in Section 72528(b).
6. To be transferred or discharged only for medical reasons, or the patient's welfare or that of other patients or for nonpayment for his or her stay and to be given reasonable advance notice to ensure orderly transfer or discharge. Such actions shall be documented in the patient's health record.
7. To be encouraged and assisted throughout the period of stay to exercise rights as a patient and as a citizen, and to this end to voice grievances and recommend changes in policies and services to facility staff and/or outside representatives of the patient's choice, free from restraint, interference, coercion, discrimination or reprisal.
8. To be free from discrimination based on sex, race, color, religion, ancestry, national origin, sexual orientation, disability, medical condition, marital status, or registered domestic partner status.
9. To manage personal financial affairs, or to be given at least a quarterly accounting of financial transactions made on the patient's behalf should the facility accept written delegation of this responsibility subject to the provisions of Section 72529.
10. To be free from mental and physical abuse.
11. To be assured confidential treatment of financial and health records and to approve or refuse their release, except as authorized by law.
12. To be treated with consideration, respect and full recognition of dignity and individuality, including privacy in treatment and in care of personal needs.

13. Not to be required to perform services for the facility that are not included for therapeutic purposes in the patient's plan of care.
14. To associate and communicate privately with persons of the patient's choice, and to send and receive personal mail unopened.
15. To meet with others and participate in activities of social, religious and community groups.
16. To retain and use personal clothing and possessions as space permits, unless to do so would infringe upon the health, safety or rights of the patient or other patients.
17. If married or registered as a domestic partner, to be assured privacy for visits by the patient's spouse or registered domestic partner and if both are patients in the facility, to be permitted to share a room.
18. To have daily visiting hours established.
19. To have visits from members of the clergy at any time at the request of the patient or the patient's representative.
20. To have visits from persons of the patient's choosing at any time if the patient is critically ill, unless medically contraindicated.
21. To be allowed privacy for visits with family, friends, clergy, social workers or for professional or business purposes.
22. To have reasonable access to telephones and to make and receive confidential calls.
23. To be free from any requirement to purchase drugs or rent or purchase medical supplies or equipment from any particular source in accordance with the provisions of Section 1320 of the Health and Safety Code.
24. To be free from psychotherapeutic drugs and physical restraints used for the purpose of patient discipline or staff convenience and to be free from psychotherapeutic drugs used as a chemical restraint as defined in Section 72018, except in an emergency which threatens to bring immediate injury to the patient or others. If a chemical restraint is administered during an emergency, such medication shall be only that which is required to treat the emergency condition and shall be provided in ways that are least restrictive of the personal liberty of the patient and used only for a specified and limited period of time.
25. Other rights as specified in Health and Safety Code, Section 1599.1.
26. Other rights as specified in Welfare and Institutions Code, Sections 5325 and 5325.1, for persons admitted for psychiatric evaluations or treatment.
27. Other rights as specified in Welfare and Institutions Code Sections 4502, 4503 and 4505 for patients who are developmentally disabled as defined in Section 4512 of the Welfare and Institutions Code.
 - (a) A patient's rights, as set forth above, may only be denied or limited if such denial or limitation is otherwise authorized by law. Reasons for denial or limitation of such rights shall be documented in the patient's health record.
 - (b) If a patient lacks the ability to understand these rights and the nature and consequences of proposed treatment, the patient's representative shall have the rights specified in this section to the extent the right may devolve to another, unless the representative's authority is otherwise limited. The patient's incapacity shall be determined by a court in accordance with state law or by the patient's physician unless the physician's determination is disputed by the patient or patient's representative.
 - (c) Persons who may act as the patient's representative include a conservator, as authorized by Parts 3 and 4 of Division 4 of the Probate Code (commencing with Section 1800), a person designated as attorney in fact in the patient's valid

Durable Power of Attorney for Health Care, patient's next of kin, other appropriate surrogate decision maker designated consistent with statutory and case law, a person appointed by a court authorizing treatment pursuant to Part 7 (commencing with Section 3200) of Division 4 of the Probate Code, or, if the patient is a minor, a person lawfully authorized to represent the minor.

- (d) Patients' rights policies and procedures established under this section concerning consent, informed consent and refusal of treatments or procedures shall include, but not be limited to the following:
1. How the facility will verify that informed consent was obtained or a treatment or procedure was refused pertaining to the administration of psychotherapeutic drugs or physical restraints or the prolonged use of a device that may lead to the inability of the patient to regain the use of a normal bodily function.
 2. How the facility, in consultation with the patient's physician, will identify consistent with current statutory case law, who may serve as a patient's representative when an incapacitated patient has no conservator or attorney in fact under a valid Durable Power of Attorney for Health Care.

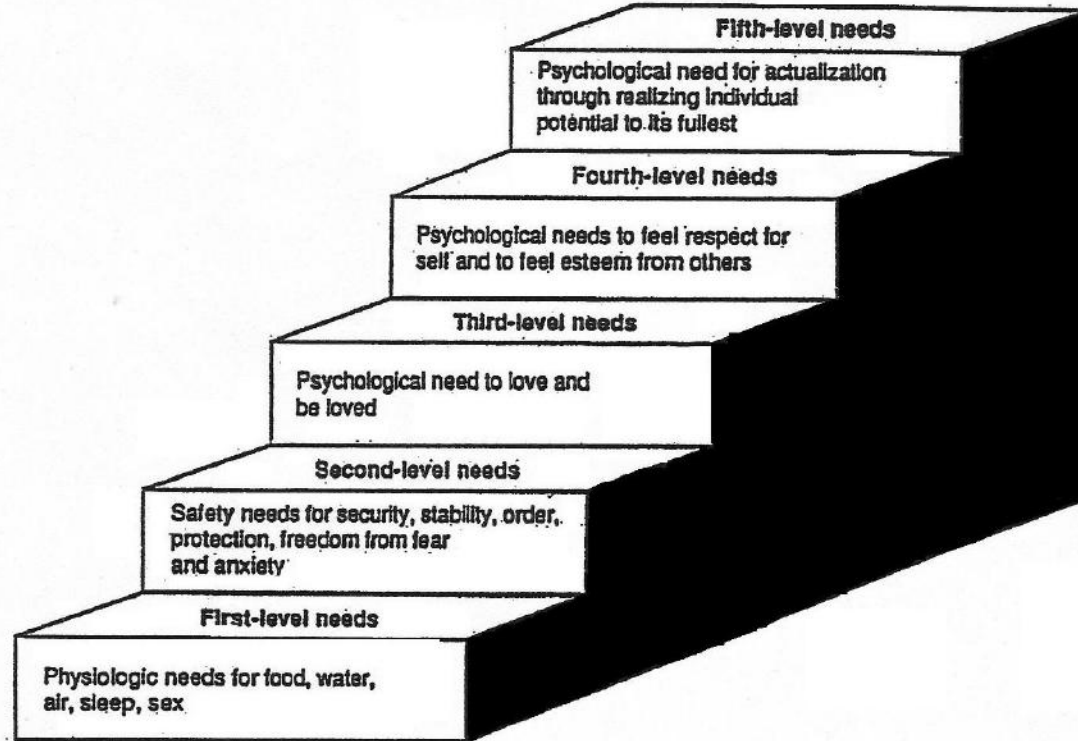
Note: Authority cited: Sections 1275 and 131200, Health and Safety Code. Reference: Section 51, Civil Code; Sections 297 and 297.5, Family Code; Sections 1276, 1320, 1599, 1599.1, 1599.2, 1599.3, 131050, 131051 and 131052, Health and Safety Code; and *Cobbs v. Grant* (1972) 8 Cal.3d 229.

California Health and Safety Code

(Skilled Nursing and Intermediate Care Facility Patient's Bill of Rights)

- 1599.1 Written policies regarding the rights of patients shall be established and made available to patient, guardian, next of kin, sponsor, and public. In addition to patient rights and obligations defined in the regulations, the facility shall employ adequate, qualified staff; assure personal hygiene of patients including prevention of decubiti and incontinence, provide diet to meet patient needs; activities and promotion of self-care. The facility shall be clean, sanitary and in good repair, including nurses call system.
- 1599.2 Written information informing patients of their rights include facility requirements in the Health and Safety Code and Title 22. Violations of either code may be grounds for civil or criminal proceedings against the facility or its personnel. Patients have the right to voice grievances free of reprisal and to submit complaints to the Department of Health Services.
- 1599.3 Rights of patients who are determined to be incompetent, incapable of understanding, exhibits a communication barrier are to be carried out/protected by guardian, next of kin, conservator, sponsoring agency or representative unless it is the facility. Guidelines for Reporting to Team Leader.

MASLOW'S HIERARCHY of NEEDS



Example of Human Needs as Related to Maslow

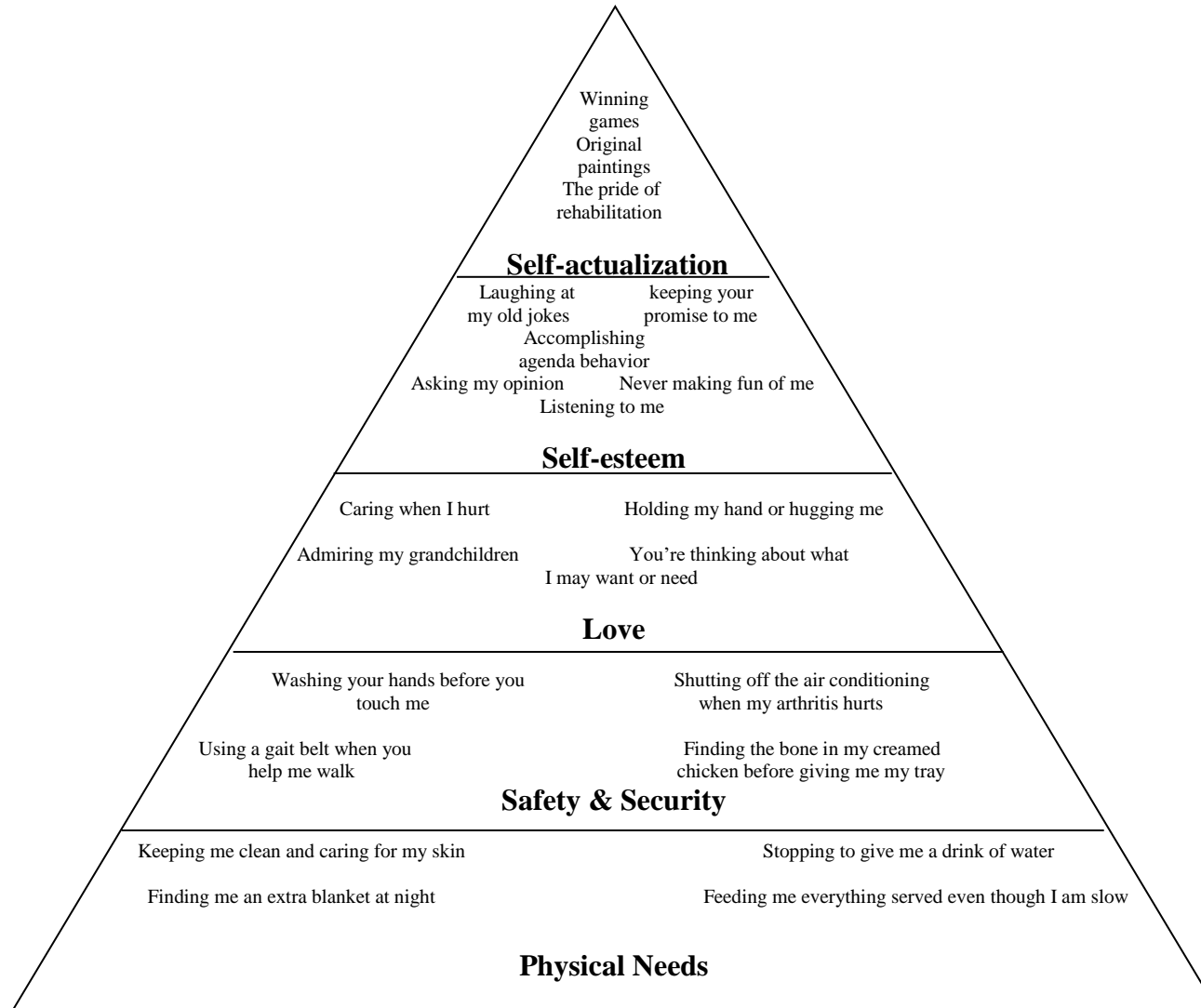


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