

Guidelines for Large Group (30-150 staff)

Resident Rights Presentation

(A Tutorial for Ombudsman)

1) **Organize the Quizzes into 4 groups- A, B, C and D (They are already labeled) There are two ways to distribute these to ensure randomly formed groups-**

- a. **Pass them out as people find their seats (making sure to mix them up)**
- b. **Place a quiz on each chair, making sure they alternate**

Note: Based on group size, you may need to have more than one group for each letter (A1, A2, etc.) If this occurs, it is helpful to assign designated locations with butcher paper around the room to facilitate an easier transition.

The purpose of this is to force departments to integrate with one another in an effort to increase communication around resident rights. Many teams prefer to stick together, so make them mix up :)

2) **Using giant Post-It Notes (24 inch x 36 inch), write one question down on each piece of paper and place them around the room.**

The intent is to have these questions up before staff-members arrive; as they enter, guide them towards this independent activity by providing a marker. This promotes internal conversation and sets the tone for the training.

3) **Use the attached Agenda for first time presentations or if unsure about sequence of events. This agenda will guide the presenter(s) through the necessary flow of the quiz component of the training.**

Note: It is very important to intersperse the “Post It” questions completed upon arrival with the sections A-D of the quiz. These questions are strategically placed to aid you in leading into the next quiz set. (IE- question #2 leads into quiz Part B)

4) **Presenter notes are provided for your access. If you decide to modify or change any questions, remember to change this area, too! These notes are the foundation- anecdotal stories provide a personal touch to connect with your audience.**

Depending on the size of the facility, staff attendance may be extremely large. Personal anecdotes help you connect better. Making sure the focus is not solely on situations when staff error is also very important.

5) **Make sure you have proper audiovisual equipment!!! Poor sound (ie no microphone) or Poor screen resolution can deter from the success of the presentation.**

This training works well in groups from 30-150. However, with group sizes over 100, volume and visual aids

become vital components of a successful training. Plan accordingly and try not to rely on the facility if possible.

Resident Rights Training: Detailed Agenda

Pre-presentation Activity: Individual response to Transition Talk questions

- As people trickle in, guide them to the four posters placed around the room. Encourage them to anonymously write in answers to the following questions:
 - 1) If you went to live in a Nursing Home, what would you miss the most?
 - 2) What 3 things would you take with you if you were moving to a Nursing Home?
 - 3) If you had only \$50.00 personal needs money each month, what would you buy?
 - 4) If you were a resident in a Nursing Home, how would you like to be treated?
 - These questions will be used to facilitate talks during transitions.
-

• Opening Topic: Long Term Care Ombudsman Poster

- Discussion of LTCO program, poster explanation
- What does the Ombudsman do?

• Icebreaker: Time and Talent Survey

- How long have you worked here? 10+, 5-10, 3-5, 1-2, less than 1?
- Which department do you work in?
 - Administration
 - Activities
 - Social Services
 - Nursing
 - Dietary
 - Housekeeping/Laundry
 - Maintenance
 - Other?

• Interactive Activity- Resident Rights Survey; Small Groups

- Pass out Questionnaires
- Each Questionnaire has an assigned Group Letter- A, B, C, D
- People form groups based on respective letters
- (YES THEY NEED TO GET UP! This activity requires moving around)

- Allow ____ minutes for each group to form and answer questions (this varies based on group size; gauge 10 min per group of 10, more for larger groups)
- If group locations are assigned, identify this before transition

- **Reconvene and review Group A questions**
 Bring up Transition Question #1 and review answers- *If you went to live in a Nursing Home what would you miss the most?*
 - o Discuss grief and loss issues Slide

- **Review Group B questions**
 Bring up Transition Question #2 and review answers- *What 3 things would you take if you were moving into a Nursing Home?*
 - o Discuss Individuality and Possessions Slide

- **Review Group C questions**
 Bring up Transition Question #3 and review answers- *What would you spend your \$50.00 personal needs money on?*
 - o Discuss Control Slide

- **Review Group D questions**
 Bring up Transition Question #4 and review answers- *How would you like to be treated as a resident?*
 - o Discuss Freedom and Treatment Slide

• **Closing Comments –**

- Review Final Slide of Overall Resident Rights
- Questions, Comments, Concerns from Staff??

CONGRATULATIONS! YOU MADE IT :)

Nursing Home Residents' Rights- Talking Points

True/False- Worksheet **A**

	True	False
Staff may open personal mail if a resident is in the hospital for an extended period of time to ensure that money or important bills are not overlooked.	<input type="checkbox"/>	<input type="checkbox"/>
Residents should be protected from information that would upset them.	<input type="checkbox"/>	<input type="checkbox"/>
A Nursing Home can set times for waking up and going to bed that correlate with medication needs.	<input type="checkbox"/>	<input type="checkbox"/>
It is necessary to obtain consent from the “responsible party” before allowing a resident to leave the facility for a visit.	<input type="checkbox"/>	<input type="checkbox"/>

Question #1- Residents have the right to privacy and confidentiality. A facility staff does not have the right to open a resident’s mail without that resident’s consent. An example of an exception could be if there is a specific arrangement for direct deposit, to which the resident has consented.

Question #2- Residents’ rights include the right of residents to participate and exercise choices, with regards to their care. Even residents deemed legally incompetent should be afforded every possible opportunity to be included in decisions about their care. However, here are individual circumstances where this statement may apply. For example, if a resident with dementia tells you she must go and see her husband, repeatedly informing her that he is actually dead is not appropriate or helpful.

Question #3- Facilities may set general timeframes for meals, etc. Medication schedules should be adjusted based on resident preferences. Adjusting a resident’s schedule to accommodate medication timeframes is not ok unless a resident is agreeable. For example, if medication needs to be given every 12 hours, but the resident prefers to sleep longer than this, discuss the window of administration with the doctor- is there a 2-hour window for dosing? If there is no leeway, educating the resident and allowing them to make an informed decision will be necessary.

Question#4- Residents have the right to have visitors in their home and to leave at will to visit others in the community. Even if a resident has a POA, permission is not needed from the POA for a resident to exercise their right to a visit outside of the facility. In addition, it is not permissible, without the resident’s consent, to notify the POA of outings. The only exception would be if a resident has a guardian. It would then be appropriate to discuss outings with the guardian and establish parameters around what would be safe for the resident.

⇒Talking Point Question #1 Here

If you went to live in a Nursing Home what would you miss the most?
 Discuss Grief and Loss

Nursing Home Residents' Rights- Talking Points

True/False- Worksheet **B**

	True	False
A diabetic resident must wait for a doctor's order before indulging in sweet foods such as cake, soda and cookies.	<input type="checkbox"/>	<input type="checkbox"/>
A resident can be restricted from smoking if their health is in danger because of it.	<input type="checkbox"/>	<input type="checkbox"/>
The staff may go through drawers and belongings without permission if they suspect a person has spoiled food or missing items from other residents.	<input type="checkbox"/>	<input type="checkbox"/>
Residents may complain if they are served broccoli repeatedly for dinner.	<input type="checkbox"/>	<input type="checkbox"/>

Question #5- Residents have the right to make poor choices, just like you or I. It is not permissible to attempt to deny a resident their freedom to eat preferred foods simply because of a cardiac diagnosis. Doctor's orders are not needed to include requested foods. In addition, it is not permissible to force a resident to "wait" for requested foods, etc. while staff contact the doctor. However, if safety is an issue, (such as choking, etc.) a meeting to review possible complications and to have the resident or guardian sign a waiver of understanding and risks may be necessary.

Question #6- Residents have the right to make poor choices, just like you or I. It is not permissible to attempt to deny a resident their freedom to smoke purely because you know it is unhealthy given their COPD diagnosis. However, if safety is an issue, completing a smoking safety assessment and possibly limiting the number of cigarettes or providing an escort for each smoking break is reasonable if a person is deemed unsafe per the assessment.

Question #7- Residents have rights to privacy and security of their rooms and possessions therein. To look in a resident's drawers and belongings requires permission of that resident. Staff will need to work with difficult or hazardous situations, and/or when the rights of roommates and other residents are infringed upon. Often times, families can be a valuable resource in resolving a difficult situation. If a resident refuses a search, the only other option for staff is to involve the local police department.

Question #8- Residents have the right to file grievances. Facilities are required, by regulation, to have established grievance procedures and to inform residents of these. Grievance information should include how to contact the local ombudsman and the State Health Department. Also, facility dietary departments must provide an alternative to a given meal menu, should a resident not be satisfied with the main choice.

⇒ Talking Point Question #2 Here

What 3 things would you take if you were moving into a Nursing Home?

Discuss Individuality and Possessions

Nursing Home Residents' Rights- Talking Points

True/False- Worksheet **C**

	True	False
A Nursing Home cannot be held responsible for personal possessions such as wedding rings.	<input type="checkbox"/>	<input type="checkbox"/>
A resident may be asked to move out if he/she can't get along with staff or other residents.	<input type="checkbox"/>	<input type="checkbox"/>
Residents must use their money for necessities, such as clothing and toiletries.	<input type="checkbox"/>	<input type="checkbox"/>
A resident must go to at least some activities.	<input type="checkbox"/>	<input type="checkbox"/>

Question #9-Facilities are required to have clear policies regarding residents' possessions. Facilities must also provide safe storage for residents' valuables and fully inform residents of this service.

Question #10- A resident may be asked to move if he/she meets the criteria for dangerousness to self and/or others, and/or if the facility cannot adequately meet the residents' medical or psychiatric needs. Nonpayment is another criterion for involuntary discharge. Discharge due to other behavioral issues would need to be monitored closely to insure this was not based on facility/staff convenience and/or discrimination. In addition, in the case of perceived behavior problems, has the facility adequately assessed the individual to insure provision of appropriate services (mental health, one-on-one, activities, etc.)?

Question #11- Residents' personal needs money should be readily available for whatever they wish to use it for. Restrictions cannot be made around poor choices, such as cigarettes for a person with lung cancer or candy for a diabetic. Education around possible consequences is appropriate.

Question #12- Although activities must be offered, it is the resident's choice when and if he/she wants to participate. Staff cannot force a resident to engage against their will. However, it is the staff's responsibility to seek out activities that apply to the interests of all residents as well provide personal invitation to activities as they are offered.

⇒ Talking Point Question #3 Here

What would you spend your \$50.00 personal needs money on?

Discuss Control

Nursing Home Residents' Rights- Talking Points

True/False- Worksheet **D**

	True	False
A resident does not need to be included in decisions if they have a Power of Attorney.		
A family member can have medication withheld from a resident if they feel the medication is no longer needed.		
A place should be made available for a resident to spend private time with a member of the same or opposite sex, regardless of time of day.		
If a resident is upset, sending them to their room for a “time out” is acceptable.		

Question #13- Having a Power of Attorney does not negate a resident’s power or choice. The purpose of a POA is when and if a resident becomes incapable of making their wishes known, a designated representative can make decisions based on what the resident would want. Regardless of if a POA is in place or not, residents should be included in ALL meetings, decisions, etc. This would be through invitation- a resident can always decline and ask that the POA assigned participate instead.

Question #14- If the resident is legally competent, it is only he/she that gives or withholds consent for care. POA does NOT represent legal incompetence, only a judge can grant this through the appointment of guardianship.

Question #15- Residents have the right to privacy and mutually consenting relations. At the same time, staff have responsibility to protect vulnerable residents. It is important for staff to exercise discretion and be aware of any personal issues that they may have with regards to this subject. In addition, resident visits cannot be restricted to “visiting hours”. This is their home and as long as their visit is not disturbing others, the facility has a duty to accommodate their requests.

Question #16- As a standard practice, this is not appropriate. However, the exception would be a resident that has severe, documented behavior problems and there is a safety plan in place requiring a resident to go to their room for a “cooling off period” in an effort to deescalate a volatile situation that could result in harm to self or others.

⇒ Talking Point Question #4 Here

How would you like to be treated as a resident?

Discuss Freedom and Treatment

NURSING HOME RESIDENT RIGHTS

The right to be: **Fully Informed**

- Available services and charges
- Facility rules and regulations
- Ombudsman services
- State Survey Reports

The right to: **Participate in One's Own Care**

- Be informed of all changes
- Participate in care plans, treatment, etc.
- Refuse Meds or treatment
- Refuse Restraints
- Review own Record

Rights during: **Transfer and Discharge**

- Receive 30 day written notice prior to discharge or transfer, including reason
- Explanation of option to refuse transfer (specifically room transfers)
- Appeal Process given and explained

The right to: **Dignity, Respect & Freedom**

- Free from abuse
- Free from seclusion
- Self Determination
- Security of Possessions
- Treated with consideration, as adults, with inclusion

The right to: **Complain**

- To staff
- To Long Term Care Ombudsman
- To State Health Department
- Without Fear of Reprisal
- With prompt response

The right to: **Privacy and Confidentiality**

- Unrestricted communication with person of choice
- During care of personal needs
- Regarding medical, personal or financial affairs
- Regarding Mail

The right to: **Visits**

- Doctor
- Surveyor
- Friends
- Health, Social, Legal, Other services
- Any person they want
- Can Refuse

The right to: **Make Independent Choices**

- Personal Decisions
- Doctor
- Needs and Preferences
- Community Activities- in or out of NH
- Resident Council
- Manage own money