The term “resident rights” refers to legislation that protects nursing home residents and provides for certain freedoms. Resident rights are extremely important and are necessary because they protect a vulnerable population.

Each facility must train its staff, particularly CNAs, to not only be aware of resident rights, but to make sure those rights are followed and maintained at all times. SNFs will need to identify and implement systems to ensure compliance.

For CNAs, the first step in developing an awareness of resident rights is learning the ABCs of resident rights, which are explained in this issue. This inservice also highlights residents’ right to freedom from abuse and neglect, which is of the utmost importance.

Cognitively impaired residents pose a special challenge to meeting resident rights. Mental confusion and poor judgment contribute to the potential challenges related to these residents’ rights.

Resident rights

To provide quality healthcare, there must be communication, respect, and sensitivity between the residents and those who provide their care. Respect for residents’ rights is an important part of quality care. To ensure that residents’ rights are respected, federal law requires all long-term care facilities to have written policies explaining the rights of their residents.

These rights are found in different sections of U.S. law. We have combined them into 10 principles (“The ABCs of resident rights”) that cover all the rights applicable to direct caregivers. State governments are also required by federal law to have a bill of rights for residents in care facilities. Most of the time, the state rights are identical or very similar to the federal rights, but some states have additional rights. Your facility should have the rights for your state posted prominently for everyone to see.

The ABCs of resident rights

Facilities must promote the exercise of rights for each resident, including any who face barriers (such as communication problems, hearing problems, and cognition limits). A resident, even if he or she is determined to be incompetent, should be able to assert these rights based on his or her degree of capability. All of your facility’s residents have the following rights:

➤ Access to visitors and private communication. Every resident has the right to associate and communicate privately with persons of his or her choice and to send and receive his or her personal mail unopened. This includes the right to access a telephone where calls can be made privately. Residents have the right to decide who can visit them and for how long. Married residents have the right to private visits from their spouse and to share a room if both live in the facility.

➤ Belongings. Every resident has the right to keep and use his or her own personal belongings and property as long as doing so doesn’t interfere with the rights, health, or safety of others. Every resident has the right to manage his or her own money, or to choose someone that he or she trusts to manage funds. Also, the facility must have a mechanism in place for handling petty funds and must be able to assist residents with their finances.

➤ Choice. Every resident has the right to make choices about his or her own life subject to the facility’s rules, as long as those rules do not violate a regulatory requirement. For example, residents can sleep if they choose to, take a bath in the morning or the evening, and so on. Residents should participate in planning their care, which includes daily schedules. They have the right to choose their own doctor and to refuse treatment. Note that physician choice will be limited if the facility requires privileges. Also, the physician must follow the regulations regarding the frequency of visits, restraints, psychotropic medications, and other medication recommendations.

PROGRAM PREP

Program time
Approximately 30 minutes

Learning objectives
Participants in this activity will learn how to:
➤ Recognize, describe, and apply the ABCs of resident rights
➤ Protect residents from abuse and neglect
➤ Care for and fulfill the rights of cognitively impaired residents

Preparation
➤ Duplicate the quiz for participants
➤ Gather equipment for participants (e.g., an attendance sheet, pencils, etc.)

Method
1. Place a copy of the quiz and a pencil at each participant’s seat
2. Conduct the questionnaire as a pretest or, if participants’ reading skills are limited, as an oral posttest
3. Present the program material
4. Review the questionnaire
5. Discuss the answers
Dignity, privacy, and respect. Every resident has the right to be treated with consideration and respect for personal dignity, including the right to privacy in living arrangements, personal care, medical care, communications, visits, and meetings.

Express grievances. Every resident has the right to voice grievances and recommend changes in facility policies and services to persons of his or her choosing. Every resident has the right to exercise his or her rights without interference, coercion, discrimination, or punishment.

Freedom from abuse and restraints. Every resident has the right to be free from mental and physical abuse, punishment, or forced seclusion. Every resident has the right to be free from chemical and physical restraints, except when it is necessary for medical care and is authorized in writing by a physician.

Guard confidentiality. Every resident has the right to confidential treatment of his or her personal and medical records. Residents have the right to look at or have copies of their own records. Records may not be shown to anyone else without the resident’s permission unless required by law for care coordination or regulatory reasons.

Help with needs. Every resident has the right to receive services that accommodate individual needs and preferences as long as it doesn’t endanger anyone else. Residents have the right to equal access to care and services. Residents also have the right to self-administer medication, if the interdisciplinary care planning team determines it is safe. This will require an assessment to ensure that the resident is capable of safely administering his or her own medications.

Information. Every resident has the right to be informed of these rights and of everything that pertains to his or her life, health, or care. This includes facility policies, services, fees, and survey results. Surveys should be posted in a location that allows resident access without asking for assistance from the staff. If most residents in the facility use wheelchairs, it would be appropriate to have the survey results posted at wheelchair level. Information about a resident’s medical condition also must be made available to him or her. Any change in the resident’s physical, mental, or emotional condition or treatment must be discussed with the resident and reported to the physician and the resident’s family or legal representative. This includes a change in room or roommate and any accident that results in injury. When explaining medical care, the information should be presented in a manner that ensures the resident will be able to understand. If a resident is high-functioning, information may need to be more detailed and specific.

Join activities and groups. Every resident has the right to organize and participate in group activities, including social, religious, and community activities of his or her choosing, inside or outside the facility. Every resident has the right to the free exercise of religion. No religious beliefs or practices may be imposed upon any resident. Residents are also free to exercise their rights as citizens of the

### Freedom from abuse

All residents in your facility, regardless of age or condition, have the right to be free from abuse. That includes punishment and forced seclusion, as described in “The ABCs of resident rights”.

CNAs should be familiar with the various types of resident abuse:

- Denying aids such as walkers, eyeglasses, or dentures.
- Dirty living conditions.
- Financial: stealing or mismanaging the money, property, or belongings of a resident. This is also known as exploitation.
- Forced seclusion/improper restraint use: confining someone against his or her will, or strictly controlling the individual’s behavior. This includes improper use of restraints and medications to control difficult behaviors.
- Inadequate heating and air conditioning.
- Neglect: failing to provide something necessary for health and safety, such as personal care, food, shelter, or medicine.
- Overmedicating.
- Physical: using force to cause physical pain or injury.
- Psychological: causing emotional or psychological pain. Includes isolation, verbal abuse, threats, and humiliation.
- Sexual: forcing sexual contact without consent, including touching or sexual talk.

CNAs also ought to be aware of the signs of elder abuse and neglect. Any CNA who witnesses one or more of these signs and suspects abuse of a resident by either a family member or another professional caregiver should report it to his or her supervisor:

#### Personality and behavior changes
- Becoming withdrawn, unusually quiet, depressed, or shy
- Becoming anxious, worried, or easily upset
- Refusing care from caregivers
- Not wanting to be around people; not wanting to see visitors

#### Physical signs
- Bruises or burns
- Fractures
- Insufficient clothing, shoes, or basic hygiene items
- Not wearing dentures
- Skin ulcers or sores
- Unreasonable or inconsistent explanations for injuries

#### Signs of possible neglect
- Weight loss, malnutrition, or dehydration
- Inadequate clothing, shoes, or basic hygiene items
- Medications not filled or taken
United States (e.g., the facility must make arrangements for absentee ballots and assist residents with the voting process).

The rights of cognitively impaired residents

Cognitively impaired residents pose a challenge to meeting resident rights. However, while they may require special considerations, these residents still must be provided with the same basic rights. For example, dementia sufferers deserve the respect and status they have earned. They often do not know their abilities have changed, and do not understand why people treat them differently. These residents must be given as many opportunities as possible to make decisions and retain control over their lives. With the right environment and support, a resident’s ability to function can be strengthened and improved. If those supports are removed, the resident’s function will decline.

The deficiencies caused by dementia affect all areas of a person’s life. Although the disability is invisible, it affects the resident’s ability to perform even the smallest activities. The behavior of a person with dementia is not just the result of impaired brain functions; it is often caused by efforts to meet needs while compensating for lost abilities.

Cognitively impaired residents, especially those suffering from dementia, may suffer from loss of memory, language, attention, judgment, and perception or senses. This can make meeting their care needs, and as a result, their rights, more difficult. However, proper communication can go a long way. When communicating with cognitively impaired residents, be open, friendly, and gentle at all times. CNAs should remember to do the following:

➤ At the beginning of an interaction, always address the resident by name to get his or her attention
➤ Give your full attention to the conversation or task—this helps the resident stay focused
➤ Briefly introduce yourself and offer some cues when you approach, stating your name and relationship and the purpose of your visit
➤ Speak slowly, but do not speak down
➤ Use gentle touching or hand holding, but get permission first
➤ Avoid arguing and attempts to reason with a resident who is upset; instead, acknowledge his or her feelings and calmly distract the individual with something calming or pleasant
Mark the correct response.

Name: ___________________________ Date: ___________________________

1. The rights of nursing home residents are protected by ________ law.
   a. local
   b. state
   c. federal
   d. both b and c

2. Residents do not have the right to access a telephone within the facility where calls can be made privately.
   a. True
   b. False

3. ________ residents have the right to manage their own money, or to choose someone that they trust to manage funds on their behalf.
   a. Select
   b. Some
   c. All
   d. Zero

4. Residents have the right to choose their own doctor and to refuse treatment.
   a. True
   b. False

5. It is legal for a caregiver, such as a CNA, to punish a resident who expresses grievances.
   a. True
   b. False

6. A resident’s medical record may not be shown to anyone else without the ________ permission unless required by law for care coordination or regulatory reasons.
   a. administrator’s
   b. director of nursing’s
   c. CNA’s
   d. resident’s

7. Every resident has the right to be informed of survey results.
   a. True
   b. False

8. A facility is not responsible for making arrangements for an absentee ballot should a resident wish to vote.
   a. True
   b. False

9. Confining a resident against his or her will is a violation of the resident’s right to be free from abuse and is known as ________.
   a. forced seclusion
   b. neglect
   c. physical abuse
   d. sexual abuse

10. Cognitively impaired residents, specifically those suffering from dementia, may suffer from each of the following except ________.
    a. memory loss
    b. language loss
    c. muscle loss
    d. loss of perception or senses