

Outline of Nursing Home Residents' Rights

CANHR is a private, nonprofit 501(c)(3) organization dedicated to improving the quality of care and the quality of life for long term care consumers in California.

Key:

USC	United States Code	H&S Code	California Health and Safety Code
CFR	Code of Federal Regulations	W&I Code	California Welfare & Institutions Code

I. Admission Rights

(A) Rights regarding admissions contracts

1	Every nursing home must use the Standard Admission Agreement developed by the California Department of Public Health (DPH).	H&S Code §1599.61, 22 CCR §72516
2	Nursing home must make reasonable efforts to communicate contents of contract to resident prior to admission	H&S Code §1599.65
3	Contract shall not contain waivers of liability for health, safety or personal property of resident	H&S Code §1599.62
4	Contract must clearly and explicitly state whether the facility participates in the Medi-Cal program	H&S Code §1439.8; H&S Code §1599.66; W&I Code §14022.3
5	Contract shall not require notice of resident's intent to convert to Medi-Cal status	H&S Code §1599.69(b)
6	Contract shall state clearly what services and supplies are covered by the facility's basic rate and identify charges for optional services and supplies	H&S Code §1599.67(a)
7	Contract shall state that residents will receive monthly statements itemizing all charges incurred by them	H&S Code §1599.67(a)
8	Contract shall not require payment beyond date of death or involuntary discharge from nursing home	H&S Code §1599.71(a)
9	Contract shall not require advance notice of voluntary discharge from nursing home	H&S Code §1599.71(b)
10	Contract shall not list any ground for discharge or involuntary transfer except those grounds listed in federal or state law	Code §1599.76
11	Contract shall state that, except in an emergency, no resident may be involuntarily transferred within the facility or discharged unless reasonable written notice and transfer or discharge planning are given as required by law	H&S Code §1599.78
12	Contract shall not require residents to consent to all treatment ordered by a physician	H&S Code §1599.72
13	Contract shall not require or imply a lesser standard of	H&S Code §1289.5

	responsibility for residents' personal property than is required by law	
14	Contract must contain a copy of the Patient's Bill of Rights	H&S Code §1599.74(b)
15	Contract must provide that if the resident is transferred to an acute care hospital, his/her bed will be held for seven days	H&S Code §1599.79; 22 CCR §72520
16	Contract must state that the facility is required to give 30 days written notice of any rate increase in the facility	H&S Code §1599.67(c)
17	The contract must contain an attachment that discloses the name of the owner and licensee of the skilled nursing facility and the name and contact information of a single entity that is responsible for all aspects of resident care and operation at the facility.	H&S Code §1599.64
(B) Arbitration agreements		
1	Nursing home cannot require applicants or residents to sign an arbitration agreement as a condition of admission or medical treatment	H&S Code §1599.81(a)
2	An arbitration agreement must be on a form separate from the admission agreement and require separate signatures	H&S Code §1599.81(b)
3	A resident cannot waive his or her ability to sue for violations of residents' rights	H&S Code §§1430(b) & 1599.81(d)
4	Residents and their legal representatives can rescind an arbitration agreement by giving written notice to the facility within 30 days of their signature	California Code of Civil Procedure §1295(c)
(C) Notice of rights		
1	Nursing home must inform the resident both orally and in writing in a language that the resident understands of his or her rights	42 CFR §483.10(b)(1); 22 CCR §72527(a)(1)
2	Nursing home must give the resident written information about advance directives explaining: (1) the right to make health care decisions; (2) the right to accept or refuse medical treatment; (3) the right to prepare an advance health care directive; and (4) the facility's policies governing use of advance directives	42 USC §1395cc(f); 1396a(w); 42 USC 1396r(c)(2)(E); 42 CFR §489.102; 42 CFR §483.10(b)(8)
(D) Right to reimbursement under Medicaid and Medicare programs		
1	Medi-Cal and/or Medicare certified nursing homes must not require applicant to waive rights to Medicare or Medicaid benefits as part of admission practice	42 USC §1395i-3(c)(5)(A)(i)(I); 42 USC §1396r(c)(5)(A)(i)(I); 42 CFR §483.12(d)(1)(i)
2	Medi-Cal and/or Medicare certified nursing home must not require oral or written assurances that residents or potential residents are not eligible for, or will not apply for, Medicare or Medicaid benefits	42 USC §1395i-3(c)(5)(A)(i)(II); 42 USC §1396r(c)(5)(A)(i)(II); 42 CFR §483.12(d)(1)(ii)
3	Medi-Cal and/or Medicare certified nursing home must prominently display and provide information about how to	42 U.S.C. 1395i-3(c)(5)(A)(i)(III); 42 USC §1396r(c)(5)(A)(i)(III)

	apply for Medicare or Medicaid benefits and how to receive refunds for services already paid for	
4	Medi-Cal certified nursing home must give the resident, his or her spouse, and representative a state-mandated notice explaining Medi-Cal financial eligibility requirements	W&I Code §14006.3 & 14006.4
5	Medi-Cal certified nursing home shall not require the resident to pay privately for any period during which the resident has been approved for payment by Medi-Cal	H&S Code §1599.69(a)
6	Medi-Cal certified nursing home must submit a Medi-Cal reimbursement claim for approved beneficiaries and must return any and all payments made by the beneficiary, or any person on behalf of the beneficiary, upon receipt of Medi-Cal payment	H&S Code §1599.69(a), W&I Code §14019.3; 42 CFR §483.10(b)(10)
7	Medi-Cal and/or Medicare certified nursing home must inform beneficiaries of Medicare and Medi-Cal covered items and services for which they may not be charged and those other items and services not covered for which they may be charged, and the amount of charges for those services	42 CFR §483.10(b)(5); H&S Code §1599.67(b)
8	If a nursing home files a notice of intent to withdraw from Medi-Cal, all residents admitted prior to the notification date have the right to remain in the facility and receive Medi-Cal payment for their care if they are eligible for Medi-Cal or become eligible	W&I Code §14022.4; 42 USC §1396r(c)(2)(F)
(E) Right to be free from financial pre-conditions to admission		
1	Nursing home may not require third party guarantee of payment as a condition of admission or expedited admission	42 USC §1395i-3(c)(5)(A)(ii); §1396r(c)(5)(A)(ii); 42 CFR §483.12(d)(2); W&I Code §14110.8(b)
2	If individual is entitled to Medicaid, nursing home may not charge, solicit, accept, or receive any amount as precondition of admission, or as a requirement of continued stay	42 USC §1396r(c)(5)(iii); 42 CFR §483.12(d)(3); H&S Code §1599.70(a); W&I Code §14110.9
3	Nursing home cannot require or accept a deposit if Medi-Cal or Medicare is paying for a resident's stay	H&S Code §1599.70(a); W&I Code §14110.9; 42 CFR §489.22; 42 CFR §483.12(d)(3)
(F) Right to return of security deposit:		
1	When resident converts to Medi-Cal	H&S Code §1599.70(b); W&I Code §14110.8(d)
2	Within 14 days after account is closed	H&S Code §1599.70(b)
3	No later than 14 days after the resident's death, to the heir, legatee or personal representative	H&S Code §1599.71(a); 22 CCR §72531(c)

II. Transfer & Discharge Rights

(See Licensing & Certification Policy & Procedure Manual Section 618 et.seq.)

(A) Prohibitions against transfer or eviction		
1	Medi-Cal certified nursing home shall not transfer or seek to evict resident due to resident changing from private pay or Medicare to Medi-Cal	42 CFR §483.12(c)(1); W&I Code §14124.7(a)
2	Nursing home shall not seek to expel resident in retaliation for filing of complaint; attempt to evict resident within 180 days of filing of complaint against facility is rebuttably presumed to be retaliatory	H&S Code §1432 (a), (b)
3	Medi-Cal certified nursing home shall not evict or transfer residents who have made a timely application for Medi-Cal and for whom an eligibility determination has not yet been made	W&I Code §14124.7
(B) Right not to be transferred or discharged from facility unless:		
1	Transfer or discharge is necessary to meet resident's welfare; or	42 USC §1395i-3(c)(2)(A)(i); 42 USC §1396r(c)(2)(A)(i); 42 CFR §483.12(a)(2)(i); 22 CCR §72527(a)(5)
2	The resident's health has improved sufficiently so that the resident no longer needs the facility's services; or	42 USC §1395i-3(c)(2)(A)(ii); 42 USC §1396r(c)(2)(A)(ii); 42 CFR §483.12(a)(2)(ii)
3	The safety of individuals in the facility is endangered; or	42 USC §1395i-3(c)(2)(A)(iii); 42 USC §1396r(c)(2)(A)(iii); 42 CFR §483.12(a)(2)(iii); 22 CCR §72527(a)(5)
4	The health of individuals in the facility would be endangered; or	42 USC §1395i-3(c)(2)(A)(iv); 42 USC §1396r(c)(2)(A)(iv); 42 CFR §483.12(a)(2)(iv); 22 CCR §72527(a)(5)
5	The resident has failed to pay or have payment made on his/her behalf (after reasonable and appropriate notice is given); or	42 USC §1395i-3(c)(2)(A)(v); 42 USC §1396r(c)(2)(A)(v); 42 CFR §483.12(a)(2)(v); 22 CCR §72527(a)(5)
6	The facility ceases to operate	42 USC §1395i-3(c)(2)(A)(vi); 42 USC §1396r(c)(2)(A)(vi); 42 CFR §483.12(a)(2)(vi)
(C) Right to notice prior to transfer or discharge from facility		
1	Transfer or discharge must be ordered in writing by a	42 USC §1395i-3(c)(2)(A); 42

	physician	USC §1396r(c)(2)(A); 42 CFR §483.12(a)(3); 22 CCR §72527(b)
2	Nursing home must give the resident, family member and legal representative advance notice of the transfer or discharge as soon as practicable	42 USC §1395i-3(c)(2)(B)(i), (ii); 42 USC §1396r(c)(2)(B)(i),(ii); 42 CFR §483.10(b)(10)(i)(D), §483.12(a)(4), (5); 22 CCR §72527(a)(5)
3	Any transfer or discharge requires 30 days written notice, except for when the health or safety of other individuals would be endangered, the resident's health improves sufficiently to allow a more immediate transfer or discharge, the resident's urgent medical needs require a more immediate transfer or discharge, or the resident has resided in the facility less than 30 days.	42 USC §1395i-3(c)(2)(B)(i),(ii); 42 USC §1396r(c)(2)(B)(i), (ii); 42 CFR §483.12(a)(4), (5)
4	Notice of transfer or discharge must include the reason for the transfer or discharge, the effective date of the transfer or discharge, the location to which the resident will be transferred, a statement that the resident has the right to appeal with the name, address and telephone number of the Licensing & Certification District Office, and contact information for the long term care ombudsman.	42 USC §1395i-3(c)(2)(B)(iii); 42 USC §1396r(c)(2)(B)(iii); 42 CFR §483.12(a)(6)
(D) Right to appeal proposed transfer or discharge from facility		
1	Upon request by the resident or representative, the state must conduct appeal hearings that comply with federal requirements	42 USC §1396r(e)(3) & (f)(3); 42 CFR §483.200 et seq.; 42 CFR §483.12(a)(2)
(E) Right to preparation of residents prior to transfer or discharge		
1	Nursing home must provide sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility	42 CFR §483.12(a)(7)
2	Nursing home must develop a post-discharge plan of care that is developed with the participation of the resident and his or her family, which will assist the resident to adjust to his or her new living environment	42 CFR §483.20(l)
(F) Right to readmission after hospitalization		
1	Right to receive a written bed-hold notice when transferred to the hospital; nursing home must offer its next available bed to resident upon hospital discharge if it doesn't comply	22 CCR §72520 & 42 CFR §483.12(b)(2)
2	Right to pay to hold bed for up to 7 days during hospitalization and immediate readmission upon discharge	22 CCR §72520(a); 42 CFR 483.12(b)
3	Medi-Cal will pay to hold bed for up to 7 days for	22 CCR 51535.1, 42 CFR

	beneficiary who is hospitalized	§483.12(b)
4	Resident on Medi-Cal has the right to be readmitted to the first available bed in a semiprivate room if the hospital stay exceeds 7 days	42 CFR §483.12(b)(3)
5	A nursing home's refusal to readmit a resident during a bed hold will be treated as an involuntary transfer, allowing the resident the right to appeal the transfer. The resident can remain in the hospital until the final determination of the hearing officer	Health & Safety Code § 1599.1; DPH All Facility Letter 03-13
6	If the resident is not on Medi-Cal and has no other source of payment, the hearing and final determination must be made within 48 hours	Health & Safety Code §1599.1
(G) Right to readmission after leave of absence/therapeutic leave		
1	Medi-Cal will pay to hold bed for 18 days (or more) per year for beneficiaries during leaves that are in accordance with their care plan	W&I Code §14108.2; 22 CCR §51535; 42 CFR §483.12

III. Rights Within Nursing Home

(A) Rights relating to dignity, quality of care, quality of life		
1	Right to receive the necessary care and services to attain or maintain the highest practicable physical, mental and psychosocial well-being	42 USC §1396r(b)(2); 42 USC §1395i-3(b)(2); 42 CFR §483.25; 22 CCR §72315
2	Nursing home must care for its residents in such a manner and in such an environment to maintain or enhance the quality of life of each resident	42 USC §1396r(b)(1); 42 USC §1395i-3(b)(1); 42 CFR §483.15
3	Right to receive care to prevent bedsores and incontinence	H&S Code §1599.1(b)
4	Nursing home shall employ an adequate number of qualified personnel	H&S Code §1599.1(a); 22 CCR §72501(e)
5	Right to be treated with dignity	42 CFR §483.10, 483.15(a); 22 CCR §72527(a)(11); 22 CCR §72315(b)
6	Right to be free from verbal, sexual, physical, and mental abuse, and corporal punishment	42 USC §1395i-3(c)(1)(A)(ii); 42 USC §1396r (c)(1)(A)(ii); 42 CFR §483.13(b); 22 CCR §72315(b); 22 CCR §72527(a)(9)
7	Right to reasonable accommodation of individual needs and preferences	42 USC §1395i-3(c)(1)(A)(v); 42 USC §1396r (c)(1)(A)(v); 42 CFR §483.15(e)(i)
8	Right to food of sufficient quality and quantity to meet the resident's needs	H&S Code §1599.1(c)

9	Right to activity program that meets residents' needs and interests	42 CFR §483.15(f), (g); H&S Code §1439.2; H&S Code §1599.1(d); 22 CCR §72381
10	Right to social services to attain or maintain the highest practicable physical, mental and psychosocial wellbeing	42 CFR §483.15(g)
(B) Right to homelike environment and use of personal belongings		
1	Right to safe, clean, comfortable and homelike environment	42 CFR §483.15(h), H&S Code §1599.1(e)
2	Right to housekeeping and maintenance services necessary to maintain a sanitary, orderly and comfortable environment	42 CFR §483.15(h)(2)
3	Right to clean bed and bath linens that are in good condition	42 CFR §483.15(h)(3)
4	Right to private closet space	42 CFR §483.15(h)(4)
5	Right to adequate and comfortable lighting levels in all areas	42 CFR §483.15(h)(5)
6	Right to comfortable and safe temperature levels	42 CFR §483.15(h)(6)
7	Right to comfortable sound levels	42 CFR §483.15(h)(7)
8	Right to retain and use personal possessions, including some furnishings, and appropriate clothing, as space permits	42 CFR §483.10(l); 22 CCR §72527
9	Bedrooms must accommodate not more than four residents, must measure at least 80 square feet of space per resident in multi-resident rooms or 100 square feet in single rooms, and must have at least one window to the outside	42 CFR §483.70(d)
(C) Right to make health care decisions, choose health care providers, medical records		
1	Right to choose personal attending physician	42 U.S.C. 1395i-3(c)(1)(A)(i); 42 U.S.C. 1396r (c)(1)(A)(i); 42 C.F.R. 483.10(d)(1)
2	Right to be given information on the name, specialty, and way of contacting the physician responsible for the resident's care	42 CFR §483.10(b)(9)
3	Right to purchase drugs, or rent or purchase medical supplies or equipment, from pharmacy or medical supplier of choice	H&S Code §1320; 22 CCR §72527(a)(22)
4	Right to participate in planning care and treatment and in changes in care and treatment	42 USC §1395i-3(c)(1)(A)(i); 42 USC §1396r(c)(1)(A)(i); 42 CFR §483.10(d)(3)
5	Right to informed consent	22 CCR §§72527(a)(3)&(5) & 72528; H&S Code §1418.9; 42 USC §1395i-3(c)(1)(A)(i); 42

		USC §1396r(c)(1)(A)(i); 42 CFR §483.10(d)(2) & 483.12(b)(1)
6	Right to be fully informed in advance of medical care and treatment in language resident can understand	42 USC §1395i-3(c)(1)(A)(i); 42 USC §1396r(c)(1)(A)(i); 42 CFR §483.10(b)(3), 483.10(d)(2); 22 CCR §72527(a)(3)
7	Right to refuse treatment	42 CFR §483.10(b)(4); 22 CCR §§72527(a)(4), §72528(a)(6); Cobbs v. Grant (1972) 8 Cal.3d 229; Bouvia v. Superior Court (1986) 179 Cal.App.3d 1127; Riese v. St. Mary's Hospital & Medical Center (1987) 209 Cal.App.3d. 1303
8	Right to formulate an advance directive	42 CFR §483.10(b)(4) & (8)
9	Right to self-administer drugs if facility determines it is safe	42 CFR §483.10(n)
10	Right to store non-prescription medications at bedside unless contraindicated by physician or facility	H&S Code §1418.5; 22 CCR §72357
11	Right to prompt notification of resident, legal representative and family member of accident resulting in injury to resident, significant changes in resident's physical, mental or psychosocial status, or need to alter treatment significantly	42 CFR §483.10(b)(10)(i); H&S Code §1795)
12	Right to access and copy at reasonable cost all records including clinical records	42 USC §1395i-3(c)(1)(A)(iv); 42 USC §1396r(c)(1)(A)(iv); 42 CFR §483.10 (b)(2); H&S Code §§123100-123149.5
13	Right to amend medical records	45 CFR §164.526; H&S Code §123111
14	Right to review and obtain copies of facility nurse staffing data	42 CFR §483.30(e)

(D) Right to be free from restraint		
1	Right to be free from involuntary seclusion	42 USC §1395i-3(c)(1)(A)(ii); 42 USC §1396r(c)(1)(A)(ii); 42 CFR §483.13(b), (c); 22 CCR §72319(f)
2	Right to be free from chemical or physical restraints imposed for purposes of discipline or convenience and not required to treat the resident's medical symptoms	42 USC §1395i-3(c)(1)(A)(ii); 42 USC §1396r(c)(1)(A)(i); 42 CFR §483.13(a); 22 CCR §72527(a)(23); 22 CCR §72319
3	Right to be free from unnecessary drugs	42 CFR §483.25(l)
(E) Right to autonomy		
1	Right to choose activities, schedules, and health care, and participate in resident and family groups and other social, religious and community activities	42 USC §1395i-3(c)(1)(A)(vii), (viii); 42 USC §1396r(c)(1)(A)(vii), (viii); 42 CFR §§483.15(b)(1), 483.15(c), (d)
2	Right to make choices about aspects of life in the facility that are significant to the resident	42 CFR §483.15(b)(3)
3	Right to self-determination and communication with and access to persons and services inside and outside the facility	42 USC §1395i-3(c)(3); 42 USC §1396r(c)(3); 42 CFR §483.15; 22 CCR §72527(a)(13), (14), (18), (19), (20), (21)
4	Right to exercise rights as a resident and as a citizen	42 CFR §483.10(a)(1); 22 CCR §72527(a)(7)
5	Right to refuse to perform services for the facility	42 CFR §483.10(h); 22 CCR §72527(a)(12)
6	Right to be temporarily absent from the facility	W&I Code §14108.2; 42 CFR §483.12(b)
7	Right to organize and participate in a residents' council	H&S Code §1418.2, 42 USC §1395i-3(c)(1)(A)(vii); 42 USC

		§1396r(c)(1)(A)(vii); 42 CFR §483.15(c)
8	Right to examine the results of most recent survey of facility and any plan of correction	42 USC §1395i-3(c)(1)(A)(ix); 42 USC §1396r(c)(1)(A)(ix); 42 CFR §483.10(g); 22 CCR §72503(a)(5)
(F) Right to privacy/confidentiality/communications/access/visitors		
1	Right to personal privacy in accommodations, medical treatment, written and telephonic communications, personal care, visits and meetings with family and resident groups	42 USC §1395i-3(c)(1)(A)(iii); 42 USC §1396r(c)(1)(A)(iii); 42 CFR §483.10(e); H&S Code §1418.3; 22 CCR §72527(a)(10), (11), (13), (16), (20), (21)
2	Right to reasonable access to telephones and to make and receive confidential calls	22 CCR §72527(a)(21); 42 CFR §483.10(k)
3	Right to send and promptly receive mail that is unopened and to have access to stationery, postage and writing implements	42 CFR §483.10(i); 22 CCR §72527(a)(13)
4	Right to confidential treatment of financial and medical records and to approve or refuse their release	H&S Code §1599.73; 22 CCR §72527(a)(10); 42 USC §1395i-3(c)(1)(A)(iv); 42 USC §1396r(c)(1)(A)(iv); 42 CFR §483.10(e)
5	Right of immediate access to resident by federal, state, or ombudsman's representative, family members and others who visit with the consent of the resident	42 USC §1395i-3(c)(3); 42 USC §1396r(c)(3); 42 CFR §483.10(j)
6	Right to reasonable access to any entity or individual that provides health, social, legal, or other services to the resident, subject to the resident's right to deny or withdraw consent at any	42 USC §1396r(c)(3)(D); 42 CFR §483.10(j)(2)
7	Right to have visits from persons of the resident's choosing at any time if the resident is critically ill	22 CCR §72527(a)(19)

8	Right to privacy for visits by the resident's spouse, and if the spouse is also a resident, to be permitted to share a room	22 CCR §72527(a)(16); 42 CFR §483.10(m)
9	Nursing home shall provide interpreters or other mechanisms to ensure adequate communications between residents and staff if language or communication barriers exist	22 CCR §72501(f)
(G) Right regarding transfer within nursing home		
1	Right to refuse transfer to or from a distinct part of a skilled nursing facility	42 USC §1395i-3(c)(1)(A)(x); 42 USC §1396r (c)(1)(A)(x); 42 CFR §483.10(o)
2	Right to be treated identically with respect to transfers regardless of source of payment	42 U.S.C. 1395i-3(c)(4); 42 U.S.C. 1396r(c)(4); W&I Code §14124.10
3	Right to reasonable, written notification prior to room or roommate change	42 USC §1395i-3(c)(1)(A)(v)(II); 42 USC §1396r(c)(1)(A)(v)(II); 42 CFR §483.15(e)(2); H&S Code §1599.78
4	If the resident changes to Medi-Cal payment status, a Medi-Cal certified nursing homes is prohibited from room-to-room transfers because of change in payment status; however, the resident may be transferred from a private room to a semi-private room.	W&I Code §14124.7
(H) Payment rights		
1	Right not to be discriminated against based on source of payment	42 U.S.C. 1395i-3(c)(4); 42 U.S.C. 1396r(c)(4); W&I Code §14124.10
2	Right to return of payment for services later paid by Medi-Cal	W&I Code §14019.3
3	Nursing home must inform resident of available services and related charges, including any charges for services not covered by its basic rate or not covered by Medi-Cal or	22 CCR §72527(a)(2); 42 U.S.C. 1395i-3(c)(1)(B)(iii); 42 U.S.C. 1396r(c)(1)(B)(iii); 42 C.F.R.

	Medicare	483.10(b)(5), (6)
4	Nursing home must give 30 days written notice of any rate increase in the facility.	H&S Code §1288(a)
5	Nursing home must provide monthly statements itemizing all charges incurred by residents	H&S Code §1599.67(a)
6	Nursing home cannot impose a charge for any item or service for which payment is made under Medicaid or Medicare, except for applicable deductible and coinsurance amounts	42 CFR §483.10(c)(8)
7	Nursing home must not charge a resident or representative for any item or services not requested by the resident	42 CFR §483.10(c)(8)(iii)
8	Nursing home must not require a resident or representative to request an item or service as a condition of admission or continued stay	42 CFR §483.10(c)(8)(iii)
9	Nursing home must inform the resident or representative requesting an item or service for which a charge will be made that there will be a charge for the item or service and what the charge will be	42 CFR §483.10(c)(8)(iii)
10	Nursing home must return any advance payments no later than 14 days after the resident's discharge or death to the heir, legatee or personal representative	22 CCR §72531; H&S Code §1599.71
11	Medi-Cal beneficiaries' right to use their share-of-cost to pay for medically necessary care not paid for by the Medi-Cal program	Johnson v Rank, Case No. 84-5979-SC, Consent Decree 11/23/85; 42 CFR §435.831(e); ACWL No. 89-54
(I) Rights on protection of funds and property		
1	Right to manage own financial affairs; facility may not require residents to deposit their personal funds with the facility	42 USC §1395i-3(c)(6)(A)(i); 42 USC §1396r(c)(6)(A)(i); 42 CFR §483.10(c)(1); 22 CCR §72527(a)(8)

2	Nursing home must safeguard and account for residents funds deposited with the facility	42 USC §1395i-3(c)(6)(A)(ii); 42 USC §1396r(c)(6)(A)(ii); 42 CFR §483.10(c)(2); 22 CCR §72527(a)(8); 22 CCR §72529
3	Nursing home must convey resident's funds and final accounting to the legal representative of a deceased resident within 30 days of death	42 USC §1395i-3(c)(6)(B)(iii); 42 USC §1396r(c)(6)(B)(iii); 42 CFR §483.10(c)(6); 22 CCR §72529(a)(9)
4	Right to notification upon admission of the facility's policies and procedures to prevent theft and loss of possessions	H&S Code §1289.4(l)
5	Nursing home shall reimburse resident for current value of stolen or lost property if it fails to make reasonable efforts to safeguard property	H&S Code §1289.3
6	Nursing home must inventory resident's personal property on admission and upon death or discharge	H&S Code §1289.4(d); H&S Code §1418.7(a)(4), (5)
7	Nursing home must update resident's inventory upon written request when items are brought into or removed from the facility	H&S Code §1289.4(d)
8	Nursing home must secure resident's personal property	H&S Code §1289.4(j); H&S Code §1418.7(a)(9)
9	Nursing home must mark resident's personal property	H&S Code §1289.4(h); H&S Code §1418.7(a)(7)
10	Nursing home must establish theft and loss record for items worth \$25 or more	H&S Code §1289.4(c); H&S Code §1418.7(a)(3)
11	Nursing home must report theft of property with a value of \$100 or more to police	H&S Code §1289.4(i); H&S Code §1418.7(a)(8)
12	Nursing home must surrender resident's personal property upon death or discharge	H&S Code §1289.4(e),(f); H&S Code §1418.7(a)(5)
13	Resident has the right to locked area for safekeeping of personal property. The nursing home must provide a lock for	H&S Code §1289.4(j)

	the resident's drawer or cabinet at the request of and at the expense of the resident or the resident's representative	
(J) Notice of Ownership Changes		
1	Within 30 days of an approved ownership change, the nursing home must send written notification to all current residents and to their primary contacts disclosing the name of the owner and licensee of the skilled nursing facility and the name and contact information of a single entity that is responsible for all aspects of resident care and operation at the facility	H&S Code §1599.645
(K) Equal Rights Amendment		
1	Rights established by federal regulations apply to all California nursing home residents, regardless of their payment source or the Medicare or Medi-Cal certification status of the nursing home	H&S Code §1599.1(i)
(L) Exercise of rights by surrogates		
1	A resident's representative may exercise rights on behalf of the resident	22 CCR §72527(c); 42 CFR §483.10(a)(3)&(4)
2	Persons who may act as a resident's representative are a conservator, a person appointed by the resident through a durable power of attorney for healthcare or advance health care directive, a resident's next-of-kin, or other persons lawfully appointed by the resident or a court	22 CCR §72527(d); 42 CFR §483.10(a)(3)&(4)
(M) Rights of family members		
1	Right to visit at any time	H&S Code §1418.3, 42 USC §1395i-3(c)(3); 42 USC §1396r(c)(3); 42 CFR §483.10(j)
2	Right to participate in planning the resident's care	42 USC §1395i-3(b)(2); 42 USC §1396r(b)(2); 42 CFR §483.20(k)(2)
3	Right to be informed of residents' rights	H&S Code §1599.1
4	Right to immediate notification of an accident resulting in injury, a significant change in the resident's condition, a need to alter treatment significantly, or a decision to transfer the	42 CFR §483.10(b)(11)(i)

	resident	
5	With the resident's consent, the right to be notified if a physician orders or increases an order for an antipsychotic medication	H&S Code §1418.9
6	Right to be notified promptly if the resident is going to be moved to another room or if there is a change of roommates	42 CFR §483.10(b)(11)(ii)
7	Right to organize and participate in a family council	H&S Code §1418.4; 42 CFR §483.15(c)
(N) Right to exercise rights and voice grievances		
1	Right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising rights	42 USC §1395i-3(c)(1)(A)(vi); 42 USC §1396r(c)(1)(A)(vi); 42 CFR §483.10(a); 22 CCR §72527(a)(7)
2	Right to voice grievances and recommend changes in policies and services to facility staff, to contact outside representatives, to file complaints, and to cooperate in inspections and investigations free from restraint, interference, coercion, discrimination or reprisal	H&S Code §1432, 22 CCR §72527(a)(7); 42 USC §1395i-3(c)(1)(A)(vi); 42 USC §1396r(c)(1)(A)(vi); 42 CFR §483.10(f)
3	Right to prompt efforts by the facility to resolve grievances, including those involving the behavior of other residents	42 CFR §483.10(f)(2)
4	Right to contact and receive information from agencies acting as client advocates	42 CFR §483.10(g)(2)
(O) Right to file complaint		
1	Any person has the right to file a complaint by phone, in writing, or in person with the Department of Public Health (DPH) against a nursing home	H&S Code §1419(d)
2	DPH shall not disclose the complainant's name	H&S Code §1419(e)
3	DPH shall notify the complainant of the assigned inspector's name within 2 working days of the receipt of the complaint.	H&S Code §1420(a)(1)

4	DPH shall notify the complainant of the opportunity to accompany the investigator during the inspection of the facility	H&S Code §1420(a)(1)
5	DPH shall make an onsite inspection or investigation within 24 hours of the receipt of the complaint if there is a serious threat of imminent danger of death or serious bodily harm; onsite investigations of all other complaints must begin within 10 working days of receipt of the complaint.	H&S Code §1420(a)(1); CANHR v DHS, San Francisco Superior Court, Case # CPF-05-505749, Order for Writ of Mandate, 9/27/06
6	DPH shall notify the complainant of the results in writing within 10 days of the completion of the investigation.	H&S Code §1420(a)(3)
7	DPH shall notify the complainant of the right to appeal the findings, initially to the district office that investigated the complaint, and if still dissatisfied, to DPH's state office	H&S Code §1420(b), (c)
8	DPH shall send a copy of any citation issued as a result of the complaint to the complainant by registered or certified mail.	H&S Code §1420(d)
9	DPH shall advise the facility that it is unlawful to discriminate or seek retaliation against a complainant.	H&S Code §1420(e)
10	Nursing home may not seek to expel resident in retaliation for filing of complaint; attempt to evict resident within 180 days of filing of complaint against facility is rebuttably presumed to be retaliatory	H&S Code §1432 (a), (b)
(P) Enforcement of rights		
1	Right to sue facility for injunction or damages for violation of rights	H&S Code §1430