

Honoring Resident & Client Rights

Effective techniques for all individuals served by DQA-regulated providers



caregivers

PREVENT  PROTECT  PROMOTE
abuse/neglect clients dignity

PARTICIPANT GUIDE

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<https://uwosh.edu/ccdet/caregiver-home/>

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Introduction

No matter where we live, we all are guaranteed certain freedom and rights under federal and state laws. Clients receiving services in any Wisconsin Department of Health Services, Division of Quality Assurance provider setting are guaranteed additional rights because of physical or cognitive limitations. These include rights related to treatment, records access, communication, and privacy.

Honoring client rights helps caregivers and providers:

- Provide a high standard of care
- Avoid allegations of misconduct
- Avoid citations and other penalties
- Remind us of the humanity with which we must treat others

Learning Points

Let's review the main learning points:

- Consider the definition of home from a client's perspective
- Identify the rights of clients under the law
- Explore common violations of client rights
- Learn effective techniques to safeguard client rights
- Recognize resources provided by the Ombudsman program

What is Home?



Home has different meanings to many people. Home is typically described as a place where we live. Some of us may have had many places we've considered home over our lifetime. Our childhood home; our first apartment; or a home we've lived with our spouse, children, and pets. Sometimes the physical location of our home changes but we all seek a place where we feel safe. A place where we feel comfortable. A place where we feel we belong. A place where we can call home.

Consider how your clients might feel as they have services provided to them in their current home. People they don't know and maybe don't trust are coming into their home to provide personal cares. Will the caregivers remember to come? Will they treat me nicely? Will my personal items be safe? Further, consider when clients have to leave their long time home. A place where they've lived with their families, raised their

children, knew their neighbors, entertained their friends. Now they've had to move to a new place where they live with strangers; where strangers are providing personal cares to them; a place where they may feel they don't have choices in their daily living and they've lost their quality of life as they once knew it. As caregivers, it's important that we consider what's important to clients in their home.

Review Client Rights



The Client Rights handout is a condensed description of legal rights commonly found in laws and rules governing DQA regulated provider settings. Please review the handout briefly.

After looking at the list, can you say which right would be most important to you personally? Why?

Common Violations of Client Rights



Consider the examples listed below and think about the client right(s) that may be violated and how you might feel if you were the client. These examples demonstrate how violations of client rights can have negative, or even fatal, results on those in your care.

Activity: Examples of Violations

Please review each example below. Compare the incident to your condensed list of client rights. Using the space provided, write which right or rights did the example violate? Next think about how you would feel if this happened to you?

Example #1:

May lives in her own home and has personal care services to provide assistance with showering, medication set up, and meal prep. A caregiver comes to May's home each day to prepare her evening meal and provide clean up. May has always enjoyed a cocktail before dinner and this is known by May's physician. Edna is one of May's caregivers and does not believe in alcohol consumption. On the evenings that Edna is scheduled to assist May, she refuses to make May her cocktail before dinner.

Right(s) violated: _____

If you were May, how would you feel? _____

Example #2:

Bobby resides in an in-patient mental health treatment facility. Bobby likes to get up at night and visit with the caregiver on duty. Bobby can be very demanding of the caregiver's time which prevents the caregiver from completing their nightly assignments. A practice among the night-time caregivers is to tie Bobby's bedroom doorknob to the closet doorknob across the hall; preventing Bobby from leaving his room.

Right(s) violated: _____

If you were Bobby, how would you feel? _____

Example #3:

Sylvia lives in a community-based residential facility. Sylvia sometimes becomes agitated at night and has been prescribed a PRN medication for anxiety during these times. Caregivers give Sylvia the medication nightly because they find that she is easier to deal with.

Right(s) violated: _____

If you were Sylvia, how would you feel? _____

Example #4:

During a recent hospital stay, a nurse aide assisted Ed to the bathroom. Ed was expecting visitors and asked that the bathroom door be closed while he was toileting in case his visitors arrived. The nurse aide told Ed no and left the door open. Ed's visitors arrived to a foul smell and observed Ed on the toilet.

Right(s) violated: _____

If you were Ed, how would you feel? _____

Example #5

Santiago has mild dementia and lives in a nursing home. He has irritable bowel syndrome (IBS) and many times is incontinent of bowel. Caregivers often times leave Santiago in soiled briefs because they feel he can control his bowel movements and soils himself to get attention. One caregiver in particular tells Santiago that he smells and is disgusting.

Right(s) violated: _____

If you were Santiago, how would you feel? _____

Example #6

Ken resides in an Adult Family Home. He requires assistance with showering and other personal cares. The caregivers have reported to the owner that the shower chair has a broken leg that causes the chair to be wobbly; however, the owner has not done anything about it. Caregivers take extra care to try to steady the chair when assisting clients with showers. During Ken's last shower, the shower chair tipped

over, causing Ken to hit his head on the tile floor. He suffered a large cut and a concussion and was taken to the hospital.

Right(s) violated: _____

If you were Ken, how would you feel? _____

Example #7

Samantha receives out-patient substance use disorder (SUD) treatment from a local provider. Samantha is the daughter of a prominent business leader in the community. The staff person who checks clients in and out for their appointments has taken a picture of Samantha leaving the office and has shown it to her friends, stating “You won’t believe who is coming to the clinic!”

Right(s) violated: _____

If you were Samantha, how would you feel? _____

Thinking about the examples we just reviewed, why do you think client rights are sometimes ignored or violated?

Activity: Rewind: What Could Be Done Differently?

Example #1 – May: _____

Example #2 – Bobby: _____

Example #3 – Sylvia: _____

Example #4 – Ed: _____

Example #5 – Santiago: _____

Example #6 – Ken: _____

Example #7 – Samantha: _____

Effective Techniques to Honor Client Rights



Now that we have reviewed the rights of clients and learned more about violations, let's talk about how best to safeguard those rights. Think about some techniques or best practices that would help ensure that client rights are honored every day in your facility. Take a moment to jot down your thoughts.

The Ombudsman Program – Board on Aging and Long Term Care

What is an "Ombudsman?" The word Ombudsman (Om-budz-man) is Scandinavian. In North America this has come to mean "helper," advocate or "voice of the people."

A Long Term Care Ombudsman works with individuals and their families to protect and promote the rights of long term care consumers, while also working with long term care service providers to define and achieve the highest standards possible.

It is the philosophy of the Ombudsman Program of the Board on Aging and Long Term Care that all clients, including those with activated powers of attorney and/or guardians, have the right to participate, to whatever extent they may be capable, in all decisions impacting their choices, care, safety and well-being.

-Used with permission: WI Board on Aging and Long-Term Care
<https://longtermcare.wi.gov/Pages/Ombudsman.aspx>

DQA regulated nursing homes and assisted living facilities are encouraged to include their regional Ombudsman in assisting a client or resident or their family regarding concerns with care or treatment. In addition, volunteer Ombudsman make unannounced visits to DQA regulated nursing homes to interact with staff and residents and help respond to any concerns reported by residents by working with designated nursing home staff for resolution.

Thoughts on Rights, Respect and Response from the Ombudsman

- Recognize rights, expectations, point of view of both the resident and yours.
- Request information about satisfaction and expectations for concerns large or small. Don't wait for a concern to emerge before asking.
- Respond. Listen more than talk. Be objective and consider other's point of view.
- Resolve. Collaborate on a resolution. Consider dignity of risk and act when action is required.
- Resources. Know who or what else may be available to achieve resolution. Don't be afraid to reach out. Call an Ombudsman.
- Reflect. Check back more than once to make sure the resolution is the right one.

-Used with permission: WI Board on Aging and Long-Term Care
<https://longtermcare.wi.gov/Pages/Ombudsman.aspx>

Learning Points Review

The learning points represent the main ideas we hoped to cover today:

- Consider the definition of home from a client's perspective
- Identify the rights of clients under the law
- Explore common violations of client rights
- Learn effective techniques to safeguard client rights
- Recognize resources provided by the Ombudsman program

Legal Resources for Resident/Patient/Client Rights

Wisconsin Statutes

s.50.09, WI stats, Rights of residents in certain facilities (CBRF, Nursing Home, FDD)
<http://docs.legis.wisconsin.gov/statutes/statutes/50/1/09>

s.51.61, WI stats, Patient rights of certain persons receiving services for mental illness, developmental disabilities, alcoholism or drug dependency

<http://docs.legis.wisconsin.gov/statutes/statutes/51/61>

Wisconsin Administrative Code

The organization of administrative code (rules) on the website below changes frequently. The best way to locate a section of specific Administrative Code is to:

- 1) Go to: <https://www.dhs.wisconsin.gov/dqa/index.htm>
- 2) In the left corner of the page, click on Regulation of Health and Residential Care Providers: <https://www.dhs.wisconsin.gov/regulations/health-residential.htm>
- 3) Click on desired provider type under Provider Types

Listed below are specific sections of administrative code that refer to resident rights in settings regulated by DQA. Use this list in your searches that are outlined above.

DHS 83.32 Rights of residents (CBRF)

DHS 88.10 Resident rights (Adult Family Home)

DHS 89.34 Rights of tenants (Residential Care Apartment Complex)

DHS 94.05 Subchapter II Patient Rights (Community Substance Abuse Standards)

DHS 105.17(1w)(b) Information to provide to the client (Personal Care Agency)

DHS 124.05(3)(a) Patient Rights and Responsibilities (Hospital)

DHS 131.19 Patient rights (Hospice)

DHS 132.31 Rights of Residents (Nursing Home)

DHS 133.08 Patient rights (Home Health Agency)

DHS 134.31 Rights of Residents (FDD)

The Board on Aging and Long Term Care – Ombudsman Program

<http://longtermcare.wi.gov>