Sixty-ninth Legislative Assembly of North Dakota

PROPOSED AMENDMENTS TO

FIRST ENGROSSMENT

ENGROSSED SENATE BILL NO. 2070

Introduced by

Human Services Committee

(At the request of the Department of Health and Human Services)

- A BILL for an Act to amend and reenact sections 50-10.2-01, 50-10.2-02, 50-10.2-
- 2 02.1, and 50-10.2-05 of the North Dakota Century Code, relating to the rights of
- 3 health care facility residents.

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

4 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

- **SECTION 2. AMENDMENT.** Section 50-10.2-02 of the North Dakota Century Code is amended and reenacted as follows:
- 50-10.2-02. Residents' rights Implementation.
 - 1. All facilities shall, upon a resident's admission, provide in hand to the resident and a member of the resident's immediate family or any existing legal guardian of the resident representative a statement of the resident's rights during the admission process and while living in the facility. Within thirty days after admission, the statement must be orally explained to the resident and, if the resident is unable to understand, to the resident's immediate family member or members and any existing legal guardian of the resident representative, and thereafter annually so long as the resident remains in the facility. The statement must include rights, responsibilities of both the resident and the facility, and the facility rules governing resident conduct. Facilities A facility shall treat residents a resident in accordance with provisions of the statement. The statement must include provisions ensuring each resident the following minimum rights:

- a. The right to civil and religious liberties, including knowledge of available choices, the right to independent personal decisions without infringement, and the right to encouragement and assistance from the staff of the facility to promote the fullest possible exercise of these rights.
- b. The right to have private meetings, associations, and communications with any person of the resident's choice within the facility.
- c. The right to participate in the community.

- d. The right of each resident, the resident's immediate family, any existing legal guardian of the resident representative, friends, facility staff, and other persons to present complaints on the behalf of the resident to the facility's staff, the facility's administrator, governmental officials, or to any other person, without fear of reprisal, interference, coercion, discrimination, or restraint. The facility shall adopt a grievance process and make the process known to each resident and, if the resident is unable to understand, to the resident's immediate family member or members and any existing legal guardian of the resident. An individual making a complaint in good faith is immune from any civil liability that otherwise might result from making the complaint.
- d.e. The right to send and receive unopened personal mail and electronic mail and the right of access to and use of telephones and electronic devices for private conversations.
- e.f. The right to assured private visits, subject to restrictions to protect the health or safety of the resident, by one's spouse, partner, or significant other, or if both are residents of the same facility, the right to share a room, within the capacity of the facility, unless sharing a room is not medically advisable as documented in the medical records by the attending physician.

f.g. The right to manage one's own financial affairs if not under legal guardianship, or to delegate that responsibility in writing to the administrator or manager of the facility, but only to the extent of funds held in trust by the facility for the resident. If such a trust is established, then a written quarterly accounting of any transactions made on behalf of the resident must be furnished along with an explanation by the facility to the resident or the person legally responsible for the resident.

- g.h. The right to be fully informed in writing prior to or at the time of admission and during one's stay, of services provided and the charges for those services, including ancillary charges. Residents, or their legal guardians, must be informed at least thirty days prior to any change in the costs or availability of the services. No facility may demand or receive any advance payment or gratuity to assure admission.
- h.i. The right to be adequately informed of one's medical condition and proposed treatment and to participate in the planning of all medical treatment, including the right to refuse medication and treatment, to be discharged from the facility upon written request, and to be notified by the resident's attending physician of the medical consequences of any such actions.
- i-j. The right to have privacy in treatment and in caring for personal needs, to use personal belongings, to have security in storing and using personal possessions, and to have confidentiality in the treatment of personal and medical records. The resident has the right to view, and authorize release of, any personal or medical records.
- j.k. The right to keep and use personal possessions, including furnishings and clothing as space permits, unless keeping or using the personal

1		<u>ossession w</u>	<u>rould infringe upon the rights, health, or safety of another</u>
2		<u>esident.</u>	
3	<u>l.</u>	he right to b	e treated courteously, fairly, and with the fullest measure
4		of dignity.	
5	k. <u>m.</u>	he right to b	e free from mental and physical abuse <u>, neglect, and</u>
6		<u>inancial expl</u>	oitation, and the right to be free from physical or
7		:hemical rest	raint except in documented emergencies or when
8		ecessary to	protect the resident from injury to self or to others. In
9		uch cases, t	he restraint must be authorized and documented by a
10		hysician for	a limited period of time and, if the restraint is a chemical
11		ne, it must k	be administered by a licensed nurse or physician. Except
12		rs provided ir	n this subdivision, drugs or physical restraints may not be
13		ı sed or threa	tened to be used for the purposes of punishment, for the
14		onvenience	of staff, for behavior conditioning, as a substitute for
15		ehabilitation	or treatment, or for any other purpose not part of an
16		rpproved trea	atment plan.
17	l. <u>n.</u>	he right not t	to be transferred or discharged except for:
18		1) Medical	reasons;
19		2) The resid	dent's welfare or that of other residents if the safety of an
20		<u>individu</u>	al in the facility is endangered due to the clinical or
21		<u>behavio</u>	ral status of the resident;
22		3) Nonpay	ment of one's rent or fees; or
23		4) A tempo	orary transfer during times of remodeling; or
24		<u>5) The faci</u>	lity ceases to operate.
25	m. o.	he right to re	eceive at least a thirty-day written advance notice of any
26		ransfer or dis	scharge when the resident is being discharged to another
27		acility or the	resident's own home, or when the resident is being
28		ransferred or	discharged because of a change in the resident's level
29		of care; howe	ver, advance notice of transfer or discharge may be less

1			than	thirty days if the resident has urgent medical needs that require a	
2			more	e immediate transfer or discharge, or a more immediate transfer	
3			or di	scharge is required to protect the health and safety of residents	
4			and	staff within the facility.	
5	1	n. p.	The	right to refuse to perform services on behalf of the facility, unless	
6			agre	ed to by the resident or legal guardian and established in the plan	
7			of ca	ire.	
8	,	o. q.	The	The right to a claim for relief against a facility for any violation of rights	
9			guar	anteed under this chapter.	
10	1	p. r.	The	right to have each facility display a notice that the following	
11			infor	mation is available for public review and make the information	
12			avail	able on request:	
13			(1)	A complete copy of every inspection report, deficiency report,	
14				and plan of correction the facility received during the previous	
15				twothree years.	
16			(2)	The facility's grievance process.	
17			(3)	A copy of the statement of ownership, board membership, and	
18				partners.	
19			(4)	A statement of ownership setting forth any conflict of interest in	
20				the operation of the facility.	
21	1	q. s.	The	right to a pharmacist of the resident's choice irrespective of the	
22			type	of medication distribution system used by the facility <u>, and to not</u>	
23			<u>be c</u>	harged a fee or receive a financial incentive or disincentive for	
24			choc	osing a pharmacy other than the facility's preferred pharmacy. The	
25			resio	lent may not be charged for repackaging if that cost can be	
26			<u>inclu</u>	ided on the facility cost report.	
27	1	r. t.	The	right to not be discriminated against by a facility in the admissions	
28			proc	ess or in the provision of appropriate care on the basis of the	
29			resid	lent's source of payment to the facility. Any applicant for	

1			admission to a facility who is denied admission must be given the		
2			reason for the denial in writing upon request.		
3		s. u.	The right of residents and their families to organize, maintain, and		
4			participate in resident advisory and family councils.		
5		t.<u>v.</u>	The right of residents receiving services performed by a provider from		
6			outside the facility to be informed, on request, of the identity of the		
7			provider.		
8	2.	<u>lf the</u>	ere is a change in the resident rights, laws, or regulations, the facility		
9		<u>shal</u>	l promptly notify the resident, and, if the resident is unable to		
0		<u>unde</u>	erstand, a member of the resident's immediate family or the resident		
1		repre	esentative.		
2	<u>3.</u>	For involuntary transfer and discharge actions taken by a facility, the			
3		<u>writt</u>	en transfer or discharge notice issued by the facility must include:		
4		<u>a.</u>	The reason for the transfer or discharge.		
5		<u>b.</u>	The effective date of transfer or discharge.		
6		<u>C.</u>	The location the resident is to be transferred or discharged to.		
7		<u>d.</u>	The name, mailing and electronic mail address, and telephone		
8			number of the office of the state long-term care ombudsman.		
9	<u>4.</u>	The t	facility shall protect the resident from retaliation. The facility shall		
20		<u>ado</u>	ot a grievance process and make the process known to each resident,		
21		the r	resident's immediate family member, and the resident representative. A		
22		pers	on making a complaint in good faith is immune from any civil liability		
23		<u>that</u>	otherwise might result from making the complaint.		
24	<u>5.</u>	If a trust is established by the facility to hold the resident's funds, the			
25		facility shall provide to the resident, resident representative, or an agent			
26		<u>unde</u>	er a power of attorney for financial decisions a written quarterly		
27		acco	ounting of any transactions made on behalf of the resident which		
28		<u>inclu</u>	udes an explanation of the transactions by the facility. The facility shall		
99		nav (out in full within thirty days, the resident's personal funds deposited		

with the facility or refunds due to the resident upon discharge or eviction, and provide a final accounting of those funds to the resident, or in the case of death, in accordance with state law. Other refunds due to the resident upon discharge, eviction, or death, and refunds due as a result of an overpayment to the facility, must be paid out in full within thirty days from the resident's date of discharge from the facility, except that a refund due as a result of an overpayment to the facility must be paid in full within thirty days from the date the overpayment is discovered. If the facility fails to issue a refund within 30 days, the facility shall include a reasonable rate of interest on the amount of the refund when the payment is made.

- 6. The facility shall inform a resident, resident representative, an agent under a power of attorney for financial decisions, or immediate family member, at least thirty days before any change in the costs or availability of the services. A facility may not demand or receive advance payment or gratuity to assure admission or for the resident to be placed on a waiting list for admission.
- 7. A resident and the resident representative may view and authorize release of any personal or medical records.
- 8. The use of a physical or chemical restraint in an emergency or when necessary to protect the resident from injury to self or others must be authorized and documented by a physician, nurse practitioner, or physician's assistant for a limited period of time. A chemical restraint must be administered by a licensed nurse, physician, nurse practitioner, or physician's assistant. Except as provided in this subsection, a drug or physical restraint may not be used or threatened to be used for the purpose of punishment, for the convenience of staff, for behavior conditioning, as a substitute for rehabilitation or treatment, or for any other purpose not included in an approved treatment plan.

- 9. Upon request, a facility shall provide an applicant for admission to a facility
 who is denied admission the reason for the denial in writing. The facility
 shall note in the written denial when the denial is based on the special
 characteristics or service limitations of the facility.
 - 10. A facility shall ensure a resident council meeting is attended by residents only or at the invitation of a resident.

- 11. Waiver of any of the rights guaranteed by this chapter may not be made a condition of admission to a facility or ongoing residence.
- 3.12. Each facility shall prepare a written plan and provide staff training to implement this chapter.
- 4.13. The department shall develop and coordinate with the facility licensing and regulatory agencies a relocation plan in the event a facility is decertified or unlicensed.