



Annual Inservice Overview

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Resident Rights

- ▶ **Resident Rights**

- ▶ As health care providers, we strive to provide excellent care in a system that respects resident rights.

- ▶ The following page contains the current listing of rights for a nursing home resident. This "Resident's Bill of Rights" is also posted in the facility.

- ▶ If any resident is not satisfied with their care, they have the right to report such dissatisfaction to the New York State Department of Health.

- ▶ Employees need to be aware that all residents have these rights and they should cooperate with any request a resident may have with regard to these rights or refer them to the appropriate person or department.

Residents Rights

- ❖ As a nursing home resident in New York State, you have the right to;
- ❖ Dignity, respect, and a comfortable living environment,
- ❖ Quality of care and treatment without discrimination.
- ❖ Freedom of choice to make your own independent decisions.
- ❖ The safeguard of your property and money.
- ❖ Safeguards in admission, transfer, and discharge.
- ❖ Privacy in communications.
- ❖ Participation in activities and organizations of your choice.
- ❖ An easy to use and responsive complaint procedure.
- ❖ Exercise all of your rights without fear of reprisal.

Resident Abuse

- ▶ **Resident Abuse**

- ▶ Our primary responsibility to the residents is to keep them safe. It is the policy of this facility that resident abuse is unacceptable and the facility will comply with all aspects of the Resident Abuse Reporting Law.

- ▶ **Definitions:**

- ▶ **Physical Abuse** Any inappropriate physical contact, such as striking, pinching, kicking, shoving,

- ▶ bumping, pulling, pushing, or sexual molestation

- ▶ **Verbal Abuse** Any inappropriate verbalization to a resident such as yelling, swearing, shouting, or sarcasm.

Resident Abuse

- ▶ **Mistreatment-**

- ▶ Any inappropriate use of medication, isolation, physical restraints, or chemical restraints.



- ▶ **Neglect-**

- ▶ Failure to provide timely, safe, consistent, adequate, and appropriate services, care, and treatment to residents. This includes nutrition, medication, therapies, sanitary clothing, surroundings, and daily living activities.

Reporting Resident Abuse

- ▶ Every residential health care facility employee, including administrators, operators, and all licensed professionals, whether or not employed by a residential health care facility, must report occurrences of resident physical abuse, mistreatment, or neglect that are committed by anyone other than another resident. Also, any friend, relative, visitor, or resident may make a report and it will be investigated
- ▶ If an individual has knowledge that physical abuse, mistreatment, or neglect has occurred or has reasonable suspicion, he or she must immediately contact one of the following:
 - ❖ Administrator
 - ❖ Department Head
 - ❖ Immediate Supervisor

Reporting Resident Abuse

▶ In addition, any employee, family member, visitor, or resident may call the New York State Department of Health's Abuse Hotline Number at 1-888-201-4563. This number is also posted at the front entrance and on each unit.. This toll free number accepts calls 24 hours a day, 7 days a week.

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1. After the call is placed, an incident and accident report or summary of the incident should be made in addition to the phone call. Employees are encouraged to report any cases of suspected resident abuse to the administrator or their department head/immediate supervisor. Any report made will be investigated immediately.

Reporting Resident Abuse

- ▶ For those required to report, failure to report an instance of resident abuse, mistreatment, or neglect is a violation of the Public Health Law and may be punishable by a fine of up to \$1,000. Further, if a health care professional who is licensed by the State Education Department (RN, LPN, MD, PT, CSW, etc.) fails to report, the licensing board will be notified and may take disciplinary action. The law prohibits a facility from discharging, discriminating against, or harassing an employee, resident, relative, or anyone else for making a report in good faith.

Resident Abuse Investigation

▶ Resident Abuse Investigation

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If a report of suspected resident abuse is made to a facility department head or supervisor, the administrator will be notified immediately. The investigation into the suspected resident abuse becomes a top priority.

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- ❖ The accused employee may be suspended, at the discretion of the administrator until the completion of the investigation.
 - ❖ The administrator, director of nursing, and/or director of social services will interview the resident.
 - ❖ The director of social services will contact the family to inform them of the investigation.
 - ❖ The department head will obtain a written statement from all other staff members having any potential knowledge of the suspected resident abuse.

Confidentiality: HIPPA

- ▶ HIPPA is the Health Insurance Portability and Accountability Act, a federal law created to reform the health insurance market and simplify healthcare transactions and processes. This law is intended to protect the privacy and security of protected health information.
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- ▶ The notice of privacy practices describes how medical information about a resident may be used and disclosed and how they can get access to this information.
- ▶ "Protected health information" or "information" is any information we create or receive that relates to a resident's past, present, or future health care or condition, and that can identify the resident. Protected health information includes information that is written, such as the medical chart, or stored in computers, such as for billing. It also includes information that is disclosed verbally.
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Typical uses and disclosures

- ▶ Typically, we will use or disclose protected health information for the following purposes:
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 - ❖ **For treatment** – We may use or disclose protected health information for treatment purposes. For example, we allow the physician or nurse to access the medical record for the purpose of treating. Others involved in resident care, such as a physical therapist, respiratory therapist, or social worker may also see this information.
 - ❖ **For payment** – We may use or disclose information for payment purposes. For example, we may need to give a health insurer enough information about a resident's condition and treatment to support their payment for care.
 - ❖ **For health care operations** – We may use or disclose information for health care operations purposes. For example, we may review health information to evaluate the performance of our staff, or to confirm our compliance with federal and state laws and regulations.

Typical uses and disclosures

- ❖ **To a "business associate"** – We may disclose information to a person or entity we contract with to perform some of our functions for use, and who need access to the information to perform these functions. For example, we provide information to specific hospitals laboratories to perform blood work on our residents.
- ❖ **To the resident** – We may disclose information to the resident, or if they lack capacity, to someone authorized to act on the resident's behalf.
- ❖ **To family and friends involved in resident care** – We may disclose to a relative or friend information about a resident's location and general condition, and other information directly relevant to that person's involvement with resident care or payment. For example, we may tell a spouse what to look for to recognize whether a condition is improving or worsening.

Less typical disclosures

- ▶ Less typically, we may use or disclose protected health information in special situations set forth in federal and state laws, such as the following:
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 - ❖ **Required by law** – We may use or disclose protected health information when we are required by law to do so, such as to comply with a court order.
 - ❖ **Public health** – We may disclose protected health information to a public health authority for public health activities and purposes. For example, we may disclose such information for the purpose of controlling an influenza outbreak.
 - ❖ **Abuse or neglect** – We may disclose protected health information to a public health authority that is authorized by law to receive reports of abuse or neglect of residents.
 - ❖ **Funeral directors, medical examiners, and organ procurement organizations** – We may disclose protected health information to a medical examiner or funeral director, to permit them to carry out their functions. Protected health information may also be disclosed for cadaveric organ, eye, or tissue donation purposes.

What HIPPA Means to your Everyday Workday

▶ In addition to being aware of the disclosures listed above, our everyday job duties also require us to be aware of privacy. We only disclose resident information on a "need to know" basis. This means the employee must have a need to know the information in order to perform care or carry out their job responsibilities. Other important ways to maintain privacy include:

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- ❖ Minimizing screens or locking session and then walking away from computer monitors.
- ❖ Closing all resident medical records when not in use.
- ❖ Not posting resident information on bulletin boards or in public places.
- ❖ Destroying assignment sheets and notes containing resident information at the end of your shift.
- ❖ Not discussing residents in a non-care area such as the break room, elevator, or even at home.

HIPPA Security Rule

- ▶ The HIPPA Security Rule deals specifically with electronically protected health information (PHI).
- ▶ Every computer in the facility will have technical and physical safeguards to keep information confidential. Screensavers, automatic log-offs, and passwords are all examples of these safeguards. If there is a security incident at any time, you must notify the administrator immediately and a report will be filed. Be sure to keep all passwords and usernames secure.
- ▶ *Please note that e-mail is not encrypted and therefore **NO PHI** should ever be sent over e-mail.*
- ▶ The following contact people will assist you with any questions or concerns you may have about HIPPA or the HIPPA Security Rule.
 - ▶ The facility HIPPA officer.

HIV Confidentiality

- ▶ The Public Health Law (New York State Confidentiality Law) strictly limits disclosure of confidential HIV-related information. Employees who are made aware of confidential HIV-related information in the course of caring for residents are prohibited from disclosing this information. The law also requires informed and written consent for any HIV testing. If you have a blood/bodily fluids exposure incident with any resident, consent must be obtained before HIV testing is performed on the resident. (Please refer to the Exposure Control Plan

Advanced Directives

- ▶ All residents have the right to make decisions regarding medical treatment to be formed or withheld. Advance directives provide individuals with a mechanism to plan ahead for health care decisions which may be required when they can no longer express their wishes.
- ▶ Advance directives recognized in New York State include:
 - ❖ Consent for DNR's (Do Not Resuscitate Orders)
 - ❖ Health Care Proxies
 - ❖ Living Wills
- ▶ All residents are provided with information about advance directives at the time of admission and are asked if they have completed an advance directive. If they have, a MOLST form is initiated and this information is recorded in the medical record and a copy placed in the resident's chart.

Wandering and Elopement

- ▶ Persons with dementia or Alzheimer's disease may not be oriented to person, place, and time. They may wander away and not find their way back. Wandering may take place by foot, wheelchair, taxi, or other means. A resident may be with you one minute, and gone the next.
- ▶ Persons with dementia or Alzheimer's disease have poor judgment. They cannot tell what is safe or dangerous. Life-threatening accidents are great risks. They can walk into traffic or into nearby woods or bodies of water. If not properly dressed, heat or cold exposure is a risk.
- ▶ Residents may also wander into other residents' rooms or areas. It is possible that a resident may wander to another room and be physically, verbally, or sexually aggressive or inappropriate.

Wandering and Elopement

- ▶ Wandering may have no cause. Or the person may be looking for something or someone: the bathroom, the bedroom, their former workplace, a child, or a partner. Pain, drug side effects, stress, restlessness, and anxiety are possible causes. Sometimes finding the cause prevents wandering.
- ▶ There are several things you need to do to keep a wandering person safe. First, be aware of which residents show wandering behaviors. Take direction from the charge nurse or your supervisor as to who need special supervision. In addition, do the following:

Wandering and Elopement

- ❖ A list of residents wearing wanderguards is available in each work room.
- ❖ Follow facility rules for locked windows and doors. Never prop open doors that should remain locked.
- ❖ Respond immediately to door alarms.
- ❖ Make sure all residents are wearing wristbands.
- ❖ Exercise the residents as ordered on their care plans – Adequate exercise can reduce wandering.
- ❖ Involve residents in activities.
- ❖ Do not argue with a wandering person. If s/he becomes agitated, call for assistance.
- ❖ Do not use restraints as restraints tend to increase confusion and disorientation.
- ❖ If you find a resident in an area of the facility that is not appropriate, return the resident back to their nursing unit. If the resident is agitated or will not willingly go with you, call for assistance. Report incident to supervisor for further action.



Wandering and Elopement

- ▶ **Elopement** is when a resident who is not approved to leave the nursing home without permission exits the facility undetected by the staff. Elopement can cause very serious and potentially dangerous situations. In many cases, a resident who elopes has exhibited behaviors that showed they were at risk. A resident who wanders is at a high risk for eloping.
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- ▶ Keeping the residents safe is the basic responsibility of a nursing home. **ALL EMPLOYEES IN ALL DEPARTMENTS** need to be aware of who is at risk for wandering and elopement. All employees need to respond to door alarms, watch who is entering and exiting the building, redirect residents, and notify the nursing department as needed.

Hand Hygiene

- ▶ Good hand hygiene is the single most effective measure for preventing the transmission of infection.
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- ▶ Hands should be washed:
 - ❖ When beginning work and at the end of your work day.
 - ❖ Before and after resident contact.
 - ❖ Before and after eating, drinking, and handling food.
 - ❖ After removing gloves.
 - ❖ After using the toilet, blowing/wiping your nose, or covering a sneeze or cough.
 - ❖ Whenever your hands become soiled.

Hand Hygiene

▶ There are two acceptable ways of hand washing according to the CDC guidelines:

1. Alcohol-Based Rub

- ▶ Apply product to palm of hand.
- ▶ Rub hands together.
- ▶ Be sure to cover all the surfaces of hands and fingers until they are dry. You may use hand sanitizer up to 10 times then you must wash your hands

1. Soap and Water

- a. Wet hands first with water.
- b. Apply soap.
- c. Rub hands together vigorously for at least 15 seconds.
- d. Be sure to cover all surfaces of hands and fingers.
- e. Rinse hands with warm water.
- f. Dry thoroughly with a disposable towel.
- g. Use towel to turn off faucet.
- h. Avoid hot water as repeated exposure to hot water may increase the risk of dermatitis.

The Aging Process

▶ Aging is a slow and very normal process. As we grow older, many changes take place. We look different, we carry out activities differently, and our families and social relationships become different as well. Although these events are normal, each individual differs in how they react to such changes. How each individual copes may depend on several factors including:

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- ❖ Mental status
- ❖ Physical health
- ❖ Life experiences
- ❖ Finances
- ❖ Social support systems

Aging process

- ▶ Many physical changes occur with aging. Body processes slow down and energy level and body efficiency decline. Influencing factors may include diet, health, exercise, stress, environment, and hereditary. Some changes may be caused by disease, illness, or injury. Some normal physical changes during the aging process include:
 - ❖ Fragile, easily injured skin
 - ❖ Decreased bone mass and strength
 - ❖ Brittle, more easily breakable bones
 - ❖ Stiff, painful joints
 - ❖ Forgetfulness
 - ❖ Sleep pattern changes
 - ❖ Hearing/vision loss
 - ❖ Decreased circulation
 - ❖ Decreased coughing strength
 - ❖ Shortness of breath
 - ❖ Difficulty swallowing
 - ❖ Decreased appetite
 - ❖ Weakened bladder muscles leading to frequency, urgency, or incontinence

General Safety Tips

- ▶ All staff members will:
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- ❖ Report all conditions considered unsafe to their department supervisor if they cannot correct the problem on their own.
- ❖ Use caution when opening and closing doors to avoid injury to others.
- ❖ Keep corridors and rooms neat and clear of clutter.
- ❖ Hold onto handrails when on stairs.
- ❖ Store equipment and materials in appropriate places (**NOT** in corridors, stairwells, or under sinks).
- ❖ Operate electrical equipment only when properly trained to do so.
- ❖ When entering the building during rainy or snowy weather, wipe feet to help prevent hazardous conditions for self and others.

Safety Hazards

▶ Safety hazards such as the ones listed below are to be reported immediately to your direct supervisor and to the maintenance department.



▶ **Safety Hazards:**

- ❖ Power cords that are broken and/or frayed.
- ❖ Any power cord that is warm to the touch.
- ❖ Receptacles and switches that are loose, broken, or have damaged covers.
- ❖ Light lenses or shades that are broken or cracked.
- ❖ Exit signs that are not lighted.

Infection Control

- ▶ Infection Control will be presented in a separate webinar.

Quiz

- ▶ True or False
- ▶ 1. If you suspect a resident has been abused, you do not have to report it unless you witness it?
- ▶ 2. It is acceptable to use an alcohol based hand rub to clean your hands, as long as they are not visibly soiled?
- ▶ 3. Every staff member in the facility must be alert for wandering residents and prevent them from eloping?
- ▶ 4. Good hand hygiene is the single most effective way of preventing the spread of infection?
- ▶ 5. It is acceptable to share health information with another resident because they are going to find out anyway?

Questions ?

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