



State of Illinois
Rod R. Blagojevich, Governor
Illinois Department on Aging
Charles D. Johnson, Director

Residents' Rights

for People in
Long term Care Facilities

As a long term care facility
resident in Illinois,
you are guaranteed certain
rights, protections and
privileges according to
State and Federal law.



Illinois Department
 on **Aging**

 Illinois Long Term Care
Ombudsman Program

1

Your rights to safety and good care

Your facility must provide services to keep your physical and mental health, and sense of satisfaction with yourself, at their highest practical levels.

Your facility must be clean and stay at a healthy temperature.

You must not be abused by anyone — physically, verbally, mentally, financially or sexually.

Your facility must not physically restrain you unless there is no other way to keep you safe and you agree to the restraint.

You may be given medicine intended to change your mood or how you think *only with your permission* and only as part of an overall plan designed to change or remove the problems for which the medicines are given.

2

Your rights to participate in your own care

Your facility must develop a written care plan which states all the services your facility will provide to you and everything you are expected to do. Your facility must make reasonable arrangements to meet your needs and choices.

You may go to the care plan conference where your care plan is decided.

You may choose to have family, friends or a representative participate in the care plan conference.

You have the right to choose your own doctor. You will have to pay the doctor yourself unless Medicare, your insurance plan or Medicaid will pay the doctor bill.

Your facility must tell you the name and specialty of each doctor responsible for your care, and how to contact that doctor.

You have the right to be in charge of taking your own medicine if your care planning team and your doctor say that you are able to do so.

You have the right to refuse any medical treatment. If you refuse a treatment, your facility must tell you what may happen because of your refusal and tell you of other possible treatments. This is called a negotiated risk agreement and must be documented in your care plan.

You have the right to all information about your medical condition and treatment in a language that you can understand.

You have the right to make a Living Will or a *Durable Power of Attorney for Health Care*, so the facility will know your wishes if you can no longer speak for yourself.

You may refuse to participate in any experimental treatment or allow anyone to use information about you for research without your permission.

Your facility must allow you to see your medical records within 24 hours of your request. You may purchase a copy of part or all of your record at a reasonable copy fee with two working days' advance notice.

Your facility may not require you to work.

You have the right to move out of your facility after you give the administrator, nurse, or doctor written notice that you plan to move.



Your right to privacy

Your medical and personal care are private. Facility staff must respect your privacy when you are being examined or given care.

Facility staff must knock before entering your room.

Your facility may not give information about you or your care to unauthorized persons without your permission, unless you are being transferred to a hospital or to another health care facility.

You have the right to have private visits at a reasonable hour. The only exception is if your doctor has ordered limited visits for medical reasons.

You may ask any visitor to leave your personal living area at any time.

You have the right to make and receive phone calls in private.

Your facility must deliver your mail to you promptly, and promptly send mail out for you. Your facility may not open your mail.

If you are married, you and your spouse have the right to share a room unless no room is available or your doctor has said you cannot share a room for medical reasons.

4

Your rights regarding your money

You have the right to manage your own money. Without your written permission, your facility may not become your money manager or your Social Security representative payee.

If you ask your facility to manage your personal money for you, it must do so. (Medicare or Medicaid certified facilities only)

If your facility manages your money,

...it may spend your money only with your permission.

...it must give you an itemized written statement at least once every three months for all the money put into your account and all of the money taken out of your account.

...it must put your money in a bank account that earns interest for you if:

- you live in a Medicaid facility and have over \$50 or
- you live in a licensed only facility and have over \$100.

If your facility manages your money *and* you get Medicaid, your facility must tell you if your savings come within \$200 of the amount Medicaid allows you to keep. Money saved over that amount may be used to pay for your care in the facility.

If you die, within 30 days of your death your facility must give your family, or whoever is in charge of distributing your property, a final accounting of all money left in any account that the facility managed for you.

You may see your financial record at any time.

5

Your personal property rights

You have the right to keep and wear your own appropriate clothing.

You may keep and use your own property, including some furniture if there is enough space, unless this interferes with the health and safety of other residents.

You have the right to expect your facility to have a safe place where you can keep small valuables that you can get to daily.

Your facility must try to keep your property from being lost or stolen. If your property is missing, the facility must try to find it.



6

Your rights in paying for your care and getting Medicare and Medicaid

If you are paying for some or all of your care at your facility, you must be given a contract that states what services are provided by the facility and how much they cost. The contract must say what expenses are not part of the regular rate.

Your facility must not require anyone else to sign an agreement saying that they will pay your bill if you cannot pay it yourself. The only one who can be required to pay your bill for you is a court appointed guardian or someone else who is handling your money for you.

Your facility must give you information about how to apply for Medicaid and Medicare and rules about “spousal impoverishment.” Spousal impoverishment rules allow you to give money and property to your spouse and still be eligible for Medicaid.

You have the right to apply for Medicaid or Medicare to help pay for your care.

If you receive Medicaid, the facility may not make you pay for anything for which Medicaid pays. The facility must give you a written list of what items and services Medicaid pays, and items and services for which you could be charged.



7

Your rights to stay in your facility

You have the right to keep living in your facility, unless your facility forces you to move because you are dangerous to yourself or others, your medical needs cannot be met, you have not paid or are late paying your bill, or your facility closes.

You must be given written notice (*Notice of Involuntary Transfer or Discharge Pursuant to the Nursing Home Care Act*) within 21 days of the departure date, if your facility requests you to move from the facility. If you do not receive the written notice, ask for it. By moving and not receiving the notice, you may be agreeing to a voluntary transfer to another residence.

If requested, the notice must:

- tell you why your facility wants you to move,
- tell you how you can file an appeal to the **Illinois Department of Public Health** and
- include a stamped, addressed envelope for you to mail your appeal to the Illinois Department of Public Health.

You have the right to appeal to the **Illinois Department of Public Health**. If you choose to appeal:

- A health hearing officer will travel to your facility to hear you tell why you believe you should stay in the facility and why the facility believes you should move.
- The facility cannot make you leave until the appeal is decided by the Illinois Department of Public Health.
- Help is available with your appeal. Contact your Long Term Care Ombudsman for help in appealing your involuntary transfer or discharge. Call **1-800-252-8966, 1-888-206-1327 (TTY)**.
- If you have a developmental disability or mental illness, you may ask Equip for Equality for help in appealing your involuntary transfer or discharge. Call **1-800-537-2632, 1-800-610-2779 (TTY)**.

Before your facility can transfer or discharge you, it must prepare and orient you to be sure that your discharge is safe and that you will be moving to an appropriate setting.

You must be allowed to return to your facility after you are hospitalized, unless your facility gives you written notice as described above.

If you receive Medicaid and are hospitalized for 10 or fewer days,

- your facility must let you return when you leave the hospital even if the facility has given you a Notice of Involuntary Transfer or Discharge.
- If you are hospitalized for **more than 10 days**, your facility must let you return if it has a bed available and you still need that kind of care.
- If your facility is full, you must be allowed to have the first available semi-private room, if you still need that kind of care.

You have the right to be told in advance if your room or roommate is being changed. (Medicare or Medicaid certified facilities only)



Your rights as a citizen and a facility resident

Your facility must let you see reports of all inspections by the Illinois Department of Public Health from the last five years and the most recent survey of your facility along with any corrective action plans from your facility.

You do not lose your rights as a citizen of Illinois and the United States because you live in a long term care facility.

If a court of law has appointed a legal guardian for you, your guardian may exercise your rights for you, according to the court order.

If you have named an agent under a Durable Power of Attorney for Health Care, your agent may exercise your rights for you.

You have freedom of religion. At your request, the facility must make arrangements for you to attend religious services of your choice as long as you agree to pay any travel-related costs. The facility may not force you to follow any religious beliefs or practices and cannot require you to attend any religious services.

You have the right to vote for the candidate of your choice in public elections.

You have the right to participate in social and community activities that do not interfere with the rights of other residents.

You have the right to participate with other residents in the Resident Council. Your facility must respond to concerns raised by the council.

You have the right to meet with the Long Term Care Ombudsman, community organizations, social service groups, legal advocates, and members of the general public who come to your facility.

Representatives of these groups may come to your facility to provide services, tell you about your rights, or help you assert your rights.

You have the right to present grievances...

- **to your facility** and to get a prompt response. Your facility may not threaten or punish you in any way for asserting your rights or presenting grievances.
- **to outside organizations and advocates** including the following agencies:
 - **Long Term Care Ombudsman: 1-800-252-8966,**
1-888-206-1327 (TTY)
 - **Equip for Equality** (for persons with developmental disabilities or mental illness): **1-800-537-2632,** 1-800-610-2779 (TTY)
 - **Illinois Department of Public Health: 1-800-252-4343,**
1-800-547-0466 (TTY)

If the rights presented in the brochure are not uniformly and consistently applied within your long term care facility, the following actions are suggested:

1 Define the problem. Writing it down may help make clear exactly what has happened and why it is wrong. When did it happen? (Give times and dates, if possible.) Who was involved or saw the incident? Ask questions of others who may be involved or know about the problem.

2 Talk to the staff. If it seems appropriate, talk about the problem with the staff responsible for taking care of you. Find out the facility procedures for resolving problems or concerns. If this does not seem like a good idea, or if you are not satisfied after you do so, consider talking to the facility administrator, the administrator's designee, your physician, the director of nursing, the social worker or the floor nurse.

3 Participate in the Resident Council. The Resident Council may raise concerns on behalf of a resident.

4 Ask for assistance. If you or the Resident Council need help solving a problem, you may ask the Long Term Care Ombudsman Program for assistance. The Long Term Care Ombudsman Program offers confidential help to older adults who have questions, concerns or

complaints regarding the care they are receiving in their long term care facility. Call:

**Illinois Long Term Care
Ombudsman Program**
1-800-252-8966 (Voice)
1-888-206-1327 (TTY).

If the problem relates to a person with a developmental disability or mental illness, you may ask for help from Equip for Equality, a non-profit organization named by the Governor to provide protection and advocacy for people with disabilities in all aspects of community living regardless of age. Call:

Equip for Equality
1-800-537-2632 (Voice)
1-800-610-2779 (TTY)

5 File a grievance with the Central Complaint Registry. Illinois has a formal Central Complaint Registry in the Illinois Department of Public Health. If you think your facility is violating your rights or those of your fellow residents, you can make a complaint against it. The Illinois Department of Public Health will investigate your grievance, and if a violation has been found, the long term care facility will be cited and corrective action will be taken.

Central Complaint Registry
1-800-252-4343 (Voice)
1-800-547-0466 (TTY)

Other "Residents' Rights" brochures:

- **Residents' Rights for People in Sheltered Care Facilities, or**
- **Residents' Rights for People in Intermediate-Care Facilities for the Developmentally Disabled,**

To request a brochure, call the Illinois Department on Aging at 1-800-252-8966, 1-888-206-1327 (TTY), or visit www.state.il.us/aging/1news_pubs/onlinepubs2.htm on the Web.

Illinois Department on Aging
421 East Capitol Ave., #100
Springfield, Illinois 62701-1789
217-785-3356, Fax: 217-785-4477
www.state.il.us/aging

Senior HelpLine
1-800-252-8966
1-888-206-1327 (TTY)
8:30 a.m. to 5:00 p.m.
Monday - Friday

To report abuse in your neighborhood:
Elder Abuse Hotline
1-866-800-1409
1-888-206-1327 (TTY)

The Illinois Department on Aging does not discriminate in admission to programs or treatment of employment in programs or activities in compliance with appropriate State and Federal statutes. If you feel you have been discriminated against, call the Senior HelpLine at 1-800-252-8966, 1-888-206-1327 (TTY).

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