CONSUMER FACTSHEET: DIGNITY & QUALITY OF LIFE STANDARDS

There are many standards which nursing homes are required to follow in order to ensure that residents receive appropriate care, have a good quality of life and are treated with dignity. This factsheet discusses some of the important standards in place to ensure that residents live with dignity and have access to appropriate quality of life services. It also provides considerations for how YOU can use them to advocate for your resident.

It is important to remember:

- Quality of life and quality of care cannot be separated – they are related and interdependent.
- Just because someone is elderly or disabled does not mean they have given up on enjoying life.
- No matter what our needs are, or how our abilities have diminished, we all want to live with dignity and have control over our lives, even if our health necessitates limitations.

Following are standards with descriptions excerpted from the federal regulations. [Notes: The brackets below provide, for reference, the citation to the federal requirement (42 CFR 483.xx) and the F-tag number used when a facility is cited for failing to meet the requirement. Emphases added.]

I. QUALITY OF LIFE [42 CFR 483.24 F-675]

Quality of life is a fundamental principle that applies to all care and services provided to facility residents. Each resident must receive and the facility must provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being, consistent with the resident’s comprehensive assessment and plan of care.

**INTENT**

The intent of this requirement is to specify the facility’s responsibility to create and sustain an environment that humanizes and individualizes each resident’s quality of life by:

- Ensuring all staff, across all shifts and departments, understand the principles of quality of life, and honor and support these principles for each resident; and
- Ensuring that the care and services provided are person-centered, and honor and support each resident’s preferences, choices, values and beliefs.

II. RESIDENT RIGHTS [42 CFR 483.10]

- The resident has a right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility....
- A facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident’s individuality. The facility must protect and promote the rights of the resident.
• The facility must provide equal access to quality care regardless of diagnosis, severity of condition, or payment source. A facility must establish and maintain identical policies and practices regarding transfer, discharge, and the provision of services... for all residents regardless of payment source.

<table>
<thead>
<tr>
<th>THINGS TO CONSIDER:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Following are expectations that have been published by the federal government (CMS) in its guidelines for nursing homes.</td>
</tr>
</tbody>
</table>

- **Grooming** residents as they wish to be groomed (e.g., hair combed and styled, beards shaved/trimmed, nails clean and clipped).
- **Dressing**: Encouraging and assisting residents to dress in their own clothes appropriate to the time of day and individual preferences rather than hospital-type gowns; Labeling each resident’s clothing in a way that respects his or her dignity (e.g., placing labels on the inside of shoes and clothing).
- **Promoting Independence & Dignity in Dining**: Facility and staff should avoid:
  - Day-to-day use of plastic cutlery and paper/plastic dishware;
  - Bibs instead of napkins (except by resident choice);
  - Staff standing over residents while assisting them to eat; and
  - Staff interacting/conversing only with each other rather than with residents while assisting residents.
- **Respecting Residents’ Private Space & Property** (e.g., not changing tv station without resident’s permission, knocking on doors and requesting permission to enter, closing doors as requested by the resident, not moving resident’s personal possessions without permission).
- **Speaking Respectfully to (and About) Residents** by addressing the resident with a name of the resident’s choice (not “Honey” or “Sweetie” unless that is what the resident wishes), not excluding residents from conversations or discussing residents in community settings in which others can overhear private information. Focusing on residents as individuals when they talk to them and addressing residents as individuals when providing care and services.
- **Maintaining Resident Privacy Of Body**: including keeping residents sufficiently covered, such as with a robe, while being taken to areas outside their room, such as the bathing area (one method of ensuring resident privacy and dignity is to transport residents while they are dressed and assist them to dress and undress in the bathing room).
- **Refraining From Practices Demeaning to Residents** such as keeping urinary catheter bags uncovered, refusing to comply with a resident’s request for toileting assistance during meal times, and restricting residents from use of common areas open to the general public such as lobbies and restrooms, unless they are on transmission-based isolation precautions or are restricted according to their care planned needs.

<table>
<thead>
<tr>
<th>RESOURCES</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="http://WWW.NURSINGHOME411.ORG">WWW.NURSINGHOME411.ORG</a>. LTCCC’s website includes materials on the relevant standards for nursing home care, training materials and other resources.</td>
</tr>
</tbody>
</table>