

An Antidote to Ageism in Nursing Homes

Guest Speaker: Cathy Unsino, LCSW

Long Term Care Community Coalition

www.nursinghome411.org

+ The Long Term Care Community Coalition

- **LTCCC**: Nonprofit organization dedicated to improving care & quality of life for the elderly & adult disabled in long-term care (LTC). Home to two local LTC Ombudsman Programs in NY.
- **Our focus**: People who live in nursing homes & assisted living.
- **What we do**:
 - Policy analysis and systems advocacy;
 - Education of consumers and families, LTC Ombudsmen and other stakeholders.
- **Richard Molloy**: LTCCC's Executive Director.
- **Website**: www.nursinghome411.org.
- **Volunteer**: www.nursinghome411.org/volunteer.



Today's Agenda

- **Guest Speaker**
Cathy Unsino, LCSW.
- **Requirements for Treatment with Dignity & Humane Services and Supports.**
- **Tools to support resident-centered advocacy.**



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An Antidote to Ageism in Nursing Homes



Requirements for Treatment with Dignity & Humane Services and Supports

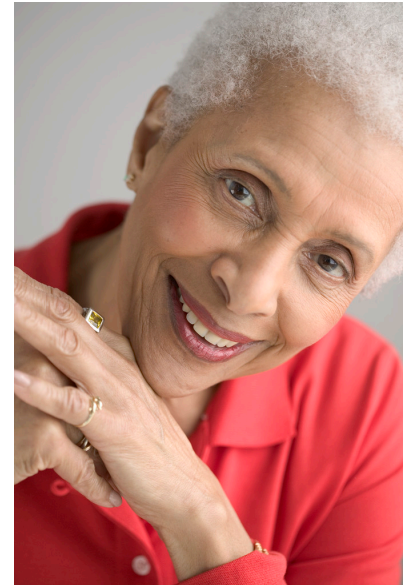
+ The Nursing Home Reform Law

- The Nursing Home Reform Law (aka OBRA 87) requires that **every nursing home resident** is provided the care and quality of life services sufficient to attain and maintain his or her **highest practicable** physical, emotional, and psychosocial **well-being**.
- This is what we pay for.
- This is what providers agree to provide.
- This is what every resident deserves.



+ The Nursing Home Reform Law

- Emphasis on individualized, **resident-centered care** – to reduce problems, including abuse and neglect, and ensure that residents are treated with **dignity** and have a good & meaningful quality of life.
- The law lays out specific **resident rights**, from good care and monitoring to a **quality of life that maximizes choice, dignity, and autonomy**.





The Law



Facility Promotes/Enhances Quality of Life

A facility must care for its residents in a manner and in an environment that promotes maintenance or enhancement of each resident's quality of life.

Dignity

Facility must promote care for residents in a manner that maintains or enhances each resident's dignity and respect in full recognition of his/her individuality.

Activity Program Meets Individual Needs

The facility must provide for an ongoing program of activities designed to meet, in accordance with the comprehensive assessment, the interests and the physical, mental, and psychosocial well-being of each resident.



+ The Law

Medically Related Social Services

The facility must provide medically-related social services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.

Proficiency of Nurse Aides

The facility must ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care.

Services Meet Professional Standards of Quality

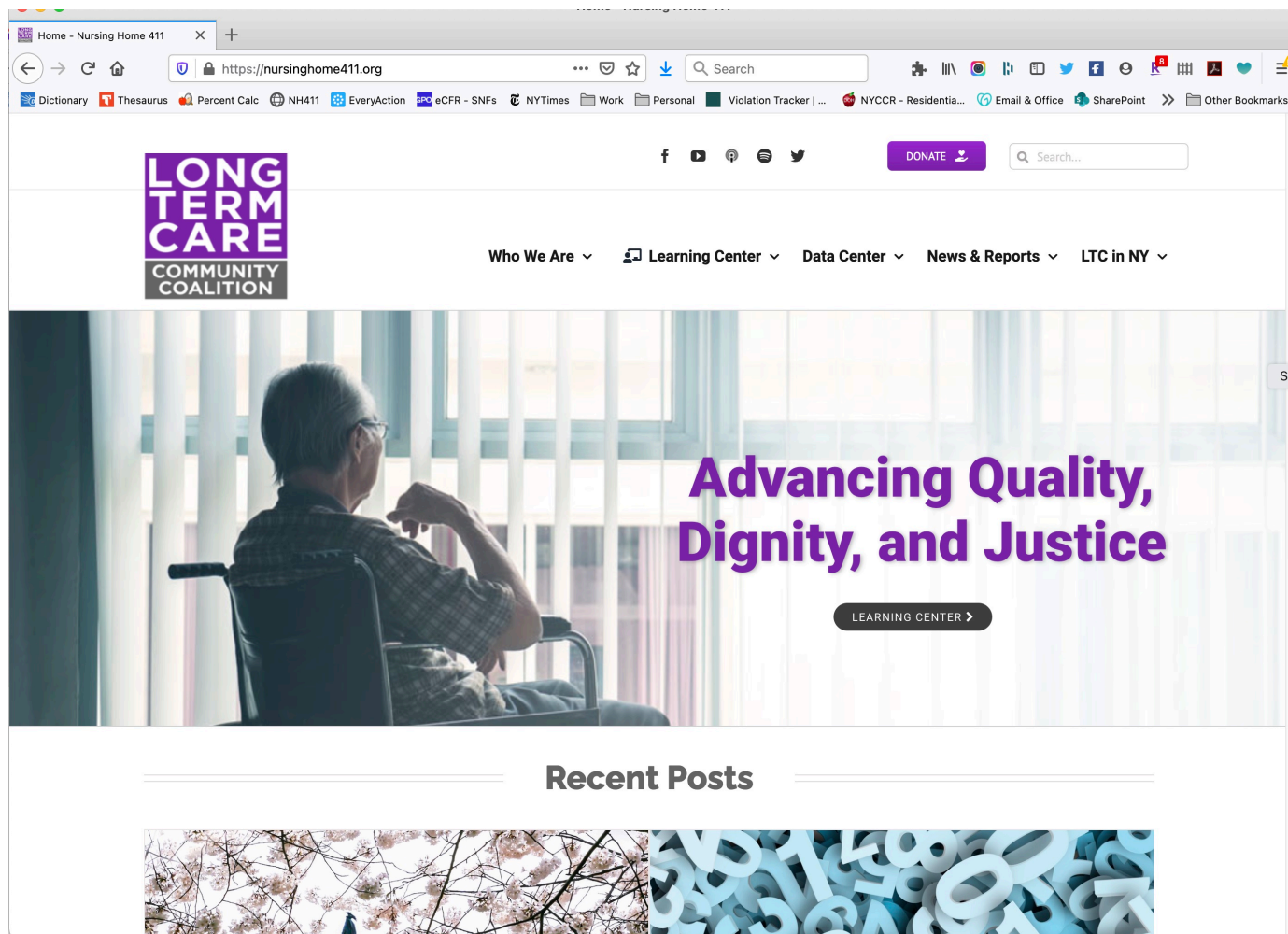
The services provided or arranged by the facility must meet professional standards of quality.

Sufficient Nursing Staff on 24-hour Basis

The facility must provide services by sufficient numbers of each of the following types of personnel on a 24-hour basis to provide nursing care to all residents in accordance with resident care plans.



Advocacy Tools & Resources to Support Resident-Centered Advocacy



[www.nursinghome411.org](https://nursinghome411.org)

+ Learning Center

Select boxes below to access our latest materials and resources to support good care and resident-centered advocacy. Scroll to the bottom of this page for LTCCC's most recent Learning Center resources. For COVID-19, see [LTCCC's Coronavirus Resource Center](#).



Webinars

Learn about long-term care issues at LTCCC's monthly Zoom webinars. Attend programs live or watch recordings on YouTube.



Get the Facts

Fact sheets providing information on care standards to support better care and quality of life for long-term care residents.



Families & Ombudsmen

LTCCC's Family & Ombudsman Resource Center provides resources, tools, and information to support resident-centered advocacy.



Dementia Care & Antipsychotic Drugging

Resources for promoting good dementia care and reducing dangerous antipsychotic drugging.



Podcasts

Listen to interviews and conversations with a variety of leading experts in long-term care.



Abuse & Neglect

Information and resources to help identify and address nursing home resident abuse and neglect.



Resident Advocacy

Forms and printouts to help you advocate for residents in long-term care and promote resident rights.



Assisted Living

Guidebooks, reports, fact sheets, and other resources to advocate for residents in assisted living.

www.nursinghome411.org/learning-center/

+ Family & Ombudsman Resource Center

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Family & Ombudsman Resource Center

Welcome to our dedicated Family & LTC Ombudsman page. We will be updating it frequently with resources and tools that you can use to support your resident-centered advocacy.

You can sign up for updates by emailing info@ltccc.org or calling 212-385-0355.

You may also use LTCCC's Zoom video conference room to host family councils or family members meetings. [Click here to request an appointment.](#)

We would love to include you and support your efforts to improve care!



FACT SHEETS ON CARE STANDARDS & RESIDENT RIGHTS

DEMENTIA CARE ADVOCACY TOOLKIT

SEARCH FOR THE STAFFING LEVELS IN YOUR NURSING HOME

HANDOUTS ON KEY NURSING HOME ISSUES

FAMILY COUNCIL ZOOM MEETING REQUEST

FORMS & TOOLS FOR RESIDENT-CENTERED ADVOCACY

TELL YOUR STORY

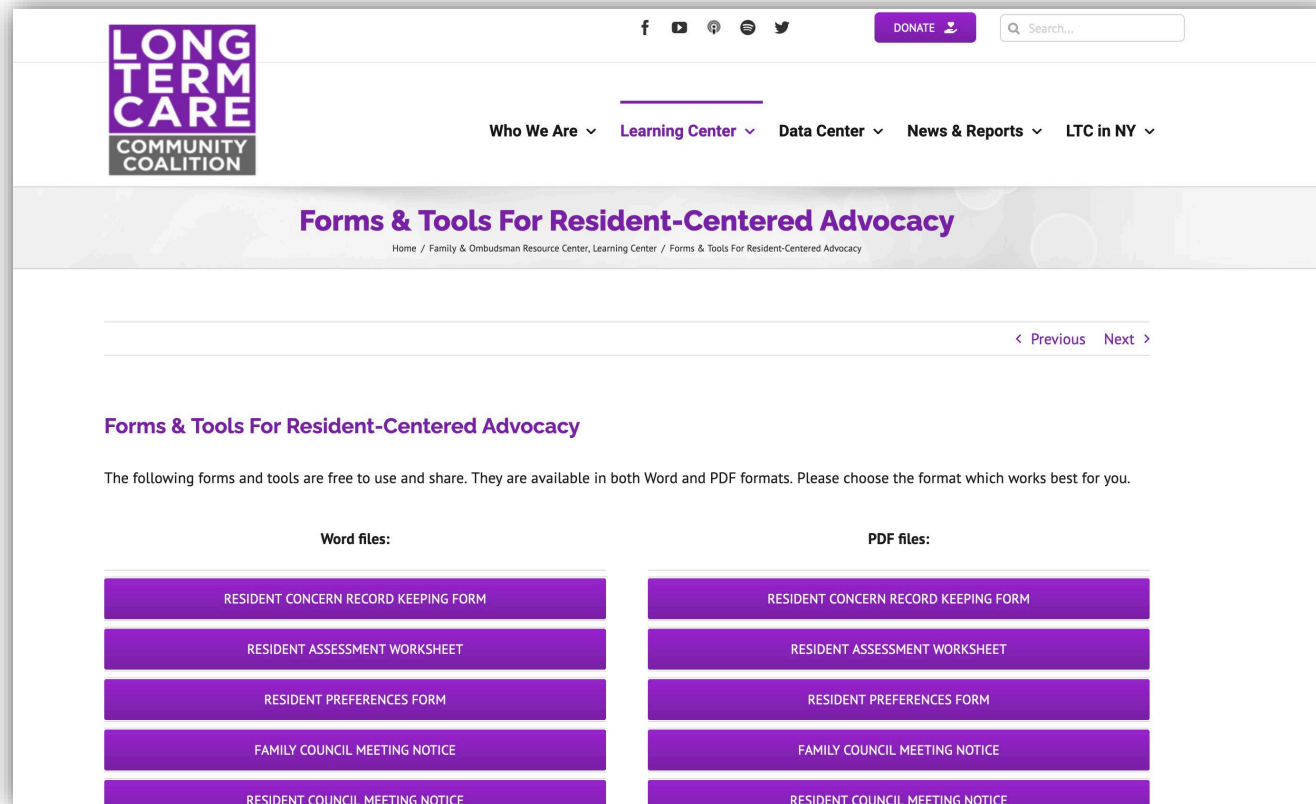
LTCCC WEBINARS

Sign up for
LTCCC's Family
Council Zoom
Meeting
Room!

www.nursinghome411.org/families-ombudsmen/

+ Forms & Tools for Resident-Centered Advocacy

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www.nursinghome411.org/forms-advocacy/

+ Fact Sheet: Dignity & Respect

LONG TERM CARE COMMUNITY COALITION

Advancing Quality, Dignity & Justice

Fact Sheet: The Fundamentals of Resident Rights – Dignity & Respect

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. **YOU** can use these standards as a basis for advocating in your nursing home and community.

Following are two important federal standards. They apply to every nursing home resident in licensed facilities in the U.S. On the following page are some examples that illustrate how these standards are to be realized by nursing homes. [Note: 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.]

STANDARD 1: RESIDENT RIGHTS [42 CFR 483.10(a) F-550]

- *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 under the State plan for all residents regardless of payment source.*

STANDARD 2: EXERCISE OF RIGHTS [42 CFR 483.10(a) F-550]

- *The resident has the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States.*
- *The facility must ensure that the resident can exercise his or her rights without interference, coercion, discrimination, or reprisal from the facility.*
- *The resident has the right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights and to be supported by the facility in the exercise of his or her rights as required under this subpart.*

INTENT OF THIS REGULATION

- *Each resident has the right to be treated with dignity and respect. All staff activities and interactions with residents must focus on assisting the resident in maintaining and enhancing his or her self-esteem and self-worth and incorporating the resident's preferences and choices. Staff must respect each resident's individuality when providing care and services while honoring and valuing their input.*
- *All residents have rights guaranteed to them under Federal and State law and regulations. This regulation is intended to lay the foundation for the rights requirements. A resident must be allowed to exercise their rights based on his or her degree of capability.*

Examples From the Federal Guidelines to Support Your Advocacy

- **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 radio or television station without resident's permission, knocking on doors and requesting permission to enter, closing doors as requested by the resident, not moving or inspecting 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), avoiding use of labels for residents such as "feeders," 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.

+ Resident Preferences Form

Name: _____

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My Personal Preferences

Like everyone else, residents have preferences in respect to how they live their lives. Federal law requires that every residents' preferences are recognized, respected, and reflected in the care and services they receive. While living with other people inevitably results in some compromises, the facility must take meaningful steps to meet each resident's needs and preferences as an individual.

For example, Sam likes to eat meat. This does not mean that the facility must feed Sam filet mignon. However, it is required to provide tasty, appealing, and nutritious food at every meal, and should endeavor to regularly offer dishes that Sam enjoys. Offering Sam a cheese sandwich as a meal substitute on a regular basis is not appropriate.

Residents and families are encouraged to use this form to document preferences which can be shared with staff to foster person-centered care. This page provides basic information. The following pages provide more specifics.

PLEASE NOTE THAT THIS FORM IS TO PROVIDE INFORMATION ON PERSONAL PREFERENCES ONLY. IT IS NOT TO BE USED TO IDENTIFY A RESIDENT'S CLINICAL OR MEDICAL NEEDS, NOR DOES IT SUPPLANT PLANS OF CARE OR MEDICAL RECORDS.

A Little Bit About Me	
I prefer to be called:	
I like to wake up:	Naturally Around _____ o'clock
My preferred morning routine:	Is important to me Includes: _____
My bathing preferences: (check all that apply)	Bath Shower Sponge bath _____ (other or special notes)
My music/tv preferences:	TV _____ Music _____ I generally prefer quiet time in my room
Some things that I enjoy or find comforting:	

For additional information and resources, please visit www.nursinghome411.org.

Additional topics covered:

- Personal background
- Sleeping
- Dressing
- Grooming
- Activities
- TV & Music
- Social interactions
- Religious/spiritual

Form is available in both PDF & Word formats. Add as little or as much information as you like.

+ Thank You For Joining Us Today!

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UPCOMING WEBINAR

May 18 @ 1pm Eastern

Nursing Home Advocacy Priorities for 2021 & Beyond

See webinar chat for registration link:

https://nursinghome411.zoom.us/webinar/register/WN_At_eqBJCRDaJL7KsRUqn4w

For updates & invites to future programs: www.nursinghome411.org/join/.

LTC Ombudsmen: If your program supervisor allows credit for attending this training program, please take the quick survey at:

<https://www.surveymonkey.com/r/ltccc-ltcop1>.



Questions?

Comments?