



Recipe for a Good Life

Recommended Participants: Residents, staff, and/or family members

Activity Type: Individual or small group discussions using recipe writing

Time: 1 hour

Explanation: This activity demonstrates the right to make choice to make the facility their home. The desired outcome for this activity is for participants to identify how personal preferences impact the right to free choice. The activity begins with an explanation of the right to free choice. The three criteria are summarized at the top of the first page of the handout. Next, the group or individual lists the qualities which each person believes are important to choosing a physician. Preferences under being fully informed about treatment and care plan participation are also compiled. The fourth step involves taking the group's or individual's choices and making a recipe using a cooking term to start each choice. An example is included.

This activity can be expanded to include a discussion of what makes life have quality. Participants can then create a Recipe for a Good Life.

Adaptations: Enlarging the handout on page three or using a flip chart assists visually impaired as well as residents with hearing deficits. The participation of residents who have early, or middle stage dementia is improved by using simple explanations and repetition. Family members of residents with severe dementia benefit from being reminded of their role in assuring residents rights are honored.



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Step 1: Begin the activity by asking the residents what home means to them. Write these descriptions down on the flip chart. Share a list of Residents' Rights with the residents and point out how the things they listed are rights that they have as residents.



Examples:



I. Choosing a Physician



List the physician qualities you believe are important:



Examples: Kind, considerate, knowledgeable



II. Fully Informed about Treatment



List what care and treatments you want to be informed about:



Examples: Medications, surgery, restraints



III. Care Plan Participation



List what input you want in your care plan:



Examples: Time of showers, meal schedules, meal choices, activities



Step 2: Take the individual's or group's preferences and make a Recipe for Home using a cooking term to start each choice.



Example of a Free Choice Recipe:

Knead a *kind* doctor into a pie of goodness

Serve my favorite *medication* before lunch

And Cut my *shower* time in half

Melt the *restraints* in the oven and Pour them in the trash

Layer my *meal choices* with love and Shape my *activities* into gardening

Combine it all together and mix it up for fun.

COOKING TERMS

KNEAD BAKE STIR COOK FOLD MEASURE
BEAT BLEND SHAPE RUB STUFF FILL
MIX POUR SIFT WHIP CUT MELT
SHAKE COMBINE LAYER BASTE SKIM SERVE

Step 3: Post the Resident Recipe in the facility newsletter, on bulletin boards, in staff lounge and dining room.



RESIDENT RIGHTS

As a resident of this facility, you have the right to a dignified existence and to communicate with individuals and representatives of choice. The facility will protect and promote your rights as designated below.

Exercise of Rights

You have the right and freedom to exercise your rights as a resident of this facility and as a citizen or resident of the United States without fear of discrimination, restraint, interference, coercion or reprisal. If you are unable to act in your own behalf, your rights are exercised by the person appointed under state law to act in your behalf.

Notice of Rights and Services

- You will be informed of your rights and of all rules and regulations governing resident conduct and responsibilities both orally and in writing.
- You have the right to inspect and purchase photocopies of your records.
- You have the right to be fully informed of your total health status.
- You have the right to refuse treatment and the right to refuse to participate in experimental research.
- You have the right to formulate an advance directive in accordance with facility policy.
- You will be informed of Medicare and Medicaid benefits. This information will be posted.
- You will be informed of facility services and charges.
- The facility will inform you of procedures for protecting personal funds. If you deem necessary, you may file a complaint with the state survey and certification agency.
- You will be informed of your physician, his or her specialty, and ways of contacting him or her.
- The facility must consult with you and notify your physician and interested family member of any significant change in your condition or treatment, or of any decision to transfer or discharge.
- The facility will notify you and interested family member of a room or roommate change.
- You may have the right to refuse a room change if your move is from a Medicare bed to a non-Medicare bed or from a Medicaid bed to a non-Medicaid bed.



- The facility will periodically update the address and telephone number of your legal representative or interested family member.
- The facility will notify you and interested family member of change in your rights as a resident.



Protection of Funds



- You may manage your own financial affairs. You are not required to deposit personal funds with the facility.
- The facility must manage your deposited funds with your best interests in mind. Your money will not be commingled with facility funds.
- The facility will provide you with an individualized financial report quarterly and upon your request.
- Any remaining estate will be conveyed to your named successor.
- All funds held by the facility will be protected by a security bond.



Free Choice



- You may choose your own personal physician.
- You will be informed of and may participate in your care and treatment and any resulting changes.



Privacy



- You have the right of privacy over your personal and clinical records.
- Your privacy will include personal care, medical treatments, telephone use, visits, letters and meetings of family and resident groups.
- You may approve or refuse the release of your records except in the event of a transfer or legal situation.



Grievances



- You may voice grievances concerning your care without fear of discrimination or reprisal.
- You may expect prompt efforts for the resolution of grievances.



Examination of Survey Results



- You may examine survey results and the plan of correction. These, or a notice of their location will be posted in a readily accessible place.
- You may contact client advocate agencies and receive information from them.





Work

- You may perform or refuse to perform services for the facility.
- All services performed must be well documented in the care plan to include nature of the work and compensation.



Mail

- You may promptly send and receive your mail unopened and have access to writing supplies.



Access and Visitation Rights

- You have the right to receive or deny visitors.
- You have the right and the facility must provide access to visit with any relevant agency of the state or any entity providing health, social, legal or other services.



Telephone

- You have the right to use the telephone in private.



Personal Property

- You can retain and use personal possessions as space permits.



Married Couples

- A married couple may share a room



Self-Administration of Drugs

- You may self-administer drugs unless determined unsafe by the interdisciplinary team.



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Admission, Transfer and Discharge Rights



Transfer and Discharge

- You may not be transferred or discharged unless your needs cannot be met, safety is endangered services are no longer required, or payment has not been made.
- Notice of and reason (s) for transfer or discharge must be provided to you in an understandable manner.
- Notice of transfer or discharge must be given 30 days prior, except in cases of health and safety needs.
- The transfer or discharge notice must include the name, address and telephone number of the appropriate, responsible protective agency.
- A facility must provide sufficient reparation to ensure a safe transfer and discharge.



Notice of Bed-Hold Policy and Readmission

- You and a family member must receive written notice of state and facility bed-hold policies before and at the time of a transfer.
- The facility must follow a written policy for re-admittance if the bed-hold period is exceeded.



Equal Access to Quality Care

- The facility must use identical policies regarding transfer, discharge, and services for all residents.
- The facility may determine charges for a non-Medicaid resident as long as written notice was provided at the time of admission.



Admission Policy

- The facility must not require a third-party guarantee of payment or accept any gifts as a condition of admission or continued stay.



- The facility cannot require you to waive your right to receive or apply for





 Medicare or Medicaid benefits. 

 • The facility may obtain legal financial access for payment without incurring your personal liability. 

 • The facility may charge a Medicaid-eligible resident for items and services requested. 

 • The facility may only accept contributions if they are not a condition of admission or continued stay. 

 

Resident Behavior and Facility Practices

 **Restraints** 

 • The facility may not use physical restraints or psychoactive drugs for discipline or convenience or when they are not required to treat medical symptoms. 

 

 **Abuse** 

 • You have the right to be free from verbal, sexual, physical or mental abuse, corporal punishment and involuntary seclusion. 

 **Staff Treatment** 

 • The facility must implement procedures that protect you from abuse, neglect or mistreatment, and misappropriation of your property. 

 • In the event of an alleged violation involving your treatment, the facility is required to report it to the appropriate officials. 

 • All alleged violations must be thoroughly investigated and the results reported. 

 **Quality of Life** 

 • The facility must care for you in a manner that enhances your quality of life. 

 **Dignity** 

 • The facility will treat you with dignity and respect in full recognition of your individuality. 

 **Self-Determination** 

 • You may choose your own activities, schedules and health care and any other aspect affecting your life within the facility. 

 • You may interact with visitors of your choice. 

 **Participation in Resident and Family Groups** 





- You may organize or participate in groups of choice.
- Families have the right to visit with other 'families.
- The facility must provide a private space for group meetings.
- Staff or visitors may attend meetings at the group's invitation.
- The facility will provide a staff person to assist and follow up with the group's requests.
- The facility must listen to and act upon requests or concerns of the group.



Participation in Other Activities

- You have the right to participate in activities of choice that do not interfere with the rights of other residents.



Accommodations of needs

- You have the right as a resident to receive services with reasonable accommodations to individual needs and preferences.
- You will be notified of room or roommate changes.
- You have the right to make choices about aspects of your life in the facilities that are important to you.



Activities

- The facility will provide a program of activities designed to meet your needs and interests.



Social Services

- The facility will provide social services to attain or maintain your highest level of well-being.



Environment

- The facility must provide a safe, clean, comfortable, home-like environment, allowing you the opportunity to use your personal belongings to the extent possible.
- The facility will provide housekeeping and maintenance services.
- The facility will assure you have clean bath and bed linens and that they are in good repair.
- The facility will provide you with private closet space as space permits.
- The facility will provide you with adequate and comfortable lighting and sound levels. The facility will provide you with comfortable and safe temperature levels.

