

## **OPERATIONAL POLICIES AND PROCEDURE**

### **ADMISSION POLICY**

This nursing facility has been specially constructed and staffed to provide for those persons who require health and protective services beyond that which is available to them in their own home but not requiring hospitalization. The nursing facility meets all standards and regulations outlined by the Texas Health and Human Services Commission (HHSC) and the U.S. Department of Health and Human Services, and are licensed as a nursing facility under the laws of the State of Texas.

It is the policy of this facility to admit or retain only those residents whose health care needs can be met through services of the facility and staff, in cooperation with community resources or other providers under contract with the facility. The facility does not discriminate due to race, color, sex, national origin, age, religion, handicap, marital status, or source of payment in its admission practices. The Corporate Compliance Officer at this facility has been designated to coordinate efforts to comply with Section 504 of the Rehabilitation Act of 1973 which prohibits discrimination on the basis of handicap.

This facility requires a person who has legal access to the resident's income and/or resources available to pay for facility care, to sign a written agreement at the time of admission to provide the facility with payment from the resident's income and/or resources. This does not make the individual financially liable for payment of the account out of their personal income. It does make them responsible to see that all paperwork is completed for

Medicaid residents and all bills incurred are paid out of the resident's personal funds by the responsible party and/or legal representative.

The facility does not admit persons with a mental disorder without prior determination by the state mental health authority that the individual requires the services of the nursing facility.

The resident's medical condition is reviewed by the Director of Nurses to ascertain that the facility can meet all of the resident's needs and the appropriate room assignment is made.

The facility does not:

1. Require a third party to guarantee a payment to the facility as a condition of admission, or to expedite admission, or continued stay in the facility.
2. Charge, solicit, accept, or receive, in addition to any gift, money, donation, or other consideration as a precondition of admission, expedition of admission or continued stay in the facility.
3. Require residents or potential residents to waive their rights to Medicare or Medicaid.
4. Require oral or written assurance that residents or potential residents are not eligible for, or will not be eligible for, or will not apply for, Medicare or Medicaid benefits.

The patient will have, to the extent possible, freedom of choice of rooms, pharmacy, and physician and all other health care services and providers. The facility reserves the right to reassign patients to rooms according to the patient's medical needs. Married residents will be allowed to share rooms except where the physician documents medical reasons why this should not be done.

### **RATES:**

Private charges and Medicaid applied income charges must be paid in advance upon billing. Accounts are due and payable on the first day of the month. Accounts not paid in full by the 10<sup>th</sup> of the month are considered past due. Charges are made for the day of admission regardless of the time of admission. Rates are quoted on a daily basis for private pay residents. Medicaid residents are responsible only for the budgeted amount according to State and Federal guidelines. The rate for Medicaid residents is the

maximum as allowed by the Texas Health and Human Services. Current rate sheets are available which include private room rates, Medicaid RUG rates, and any possible ancillary charges.

### **BED HOLD, HOME VISITS, AND READMISSION:**

After placement in the nursing home, it frequently becomes necessary for a resident to go out of the facility for brief periods of hospitalization or therapeutic home visits. It is the policy of this facility as follows:

1. Private pay and Insurance Reimbursed residents may come and go from the facility as often and for as many days as desired at any time. V.A. Contract residents are allowed up to 48 hours at any one time to be on a home visit per their contract. The daily room rate remains the same. As long as the bill is paid in full the room will be held and the resident may be readmitted to that room.
2. For Medicaid and Medicaid Hospice residents:
  - a.) On therapeutic home visits the state plan allows up to 72 consecutive hours at any one time. The days are counted in 24-hour periods from midnight to midnight. The Medicaid resident must return to the facility for an overnight stay prior to beginning another therapeutic home visit.
  - b.) When the Medicaid resident is admitted to the hospital for a period in excess of 24-hours, the resident's applied income will be used as authorized by the resident and/or his/her responsible party and/or his/her legal representative to reserve his/her bed. Medicaid does not pay to hold a resident's bed when the resident is admitted to the hospital.
3. For Medicare residents:
  - a.) When the Private Pay/Medicare resident is admitted to the hospital for a period in excess of 24 hours, the facility's daily semi-private room rate remains the same. As long as the bill is paid in full the room will be held and the resident may be readmitted to the room. Medicare does not pay to hold a resident's room when the resident is admitted to the hospital.
  - b.) When the Medicaid/Medicare resident is admitted to the hospital for a period in excess of 24-hours, the resident's applied income will be used as authorized by the resident and/or his/her responsible party and/or his/her legal representative to reserve his/her bed. Medicare does not pay to hold a resident's bed when the resident is admitted to the hospital.

The resident's bed will be reserved for him/her as long as the bed hold charges are paid when he/she is out of the facility. Bed hold charges may be discontinued at any time if the resident and/or his/her responsible party and/or legal representative notifies the business office and removes all personal belongings within 24 hours and all claim to the resident's bed is released.

For the residents who do not hold their bed during hospitalization periods, the resident is readmitted to the facility immediately upon the first available semiprivate Medicaid beds.

If bed hold charges from prior hospital stays are not paid in full at the time of subsequent hospitalization, the resident's bed cannot be held.

### **MEDICAID APPLICANTS**

If an individual entering the facility wishes to apply for Medicaid, he/she must meet the current Medicaid requirements. Check with the facility office personnel for a list of current guidelines. The individual must be admitted to a facility before the Medicaid application can be submitted to the Texas Health and Human Services for processing. After admission to the facility, the responsible party or legal representative must contact the Medicaid case worker for the financial packet needed to make the Medicaid application. Failure to follow through on the application process will delay Medicaid payments to the facility. If the application is completed timely and all appointments and requirements of the case worker are met, the Medicaid payment will become effective back to the date of admission to the facility or the date on which

the resident first met all of the above criteria. The resident must be in the facility for 30 consecutive days before the Medicaid will pay. If the resident is discharged before the 30<sup>th</sup> day, Medicaid will not pay and the resident must pay the current private rate.

### **REFUND PROCEDURES**

Refunds will be prorated on the unused days of advance payments. A notice of 10 days to the business office may be requested prior to discharge in order to assure a prompt refund and for payment to be received within 30 days.

### **EMPLOYEES**

The facility has appointed a full time licensed administrator who is qualified by training and experience and has been delegated full authority for the internal operation of this facility in accordance with established policy and procedure. An employee has been designated to take over administrative duties in the absence of the administrator from the facility.

The Director of Nursing (D.O.N) services' is a qualified Registered Nurse (RN) who has full responsibility for the nursing care of residents in this facility. Registered Nurses (RN), Licensed Vocational Nurses (LVN), Certified Medication Aides (CMA), and Certified Nurse Aides (CNA) comprise the nursing service staff and are provided in numbers to ensure quality nursing care to our residents as well as meet all State staffing requirements.

The housekeeping staff is in charge of the appearance and cleanliness of the building. Maintenance personnel are responsible for the grounds, general upkeep, and repairs of the building. The health and safety of each resident is of major concern to all departments of this facility. All work procedures stress both sanitation and safety.

The dietary department is under the direct supervision of a qualified dietary supervisor. This supervisor follows the recommended procedures set forth by the Dietary Consultant of this facility.

This facility employs consultants as needed for nursing, dietary, pharmacy, medical records, and activities as required by state standards.

Employees may not receive tips. Please do not offer them.

### **NURSING SERVICES**

The facility has sufficient nursing and related staff, 24 hours per day. Facility staff provides nursing and related services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, in accordance with each resident's assessment and individual plan of care. There are enough qualified personnel on duty each shift to meet the total nursing needs of the residents.

### **REHABILITATIVE SERVICES**

The facility provides or obtains appropriate therapy services to residents who require rehabilitative services such as physical therapy, speech-language pathology, and occupational therapy as required in the resident's comprehensive plan of care. Interdisciplinary rehabilitation plans are designed for each resident receiving therapy. Qualified therapists are provided to meet the total rehabilitative needs of the resident.

### **PHYSICIAN SERVICES**

Residents are admitted only upon the recommendation of a licensed physician, and must remain under the continuous care of a physician. At admission, the resident must bring from his/her physician: a History and Physical including current medical findings, diagnosis, orders for immediate care and the

resident's discharge and rehabilitation potential and a copy of a recent hospital discharge summary report which contains all of the required information which may be utilized.

The attending physician must agree to visit the patient at admission and to conform to the following schedule:

Visit resident of the facility at least every 30 days for the first 90 days after admission and at least once every 60 days thereafter.

The attending physician must provide or arrange for provision of physician services 24 hours a day in case of an emergency.

At the option of the physician, required visits after the initial visit may alternate between personal visits by the physician and visits by a physician assistant or nurse practitioner. If the attending physician selected by the resident uses the services of a physician assistant or nurse practitioner, the permission slip for use of nurse practitioner or physician assistant must be signed and on file in the resident's record.

### **PERSONAL LAUNDRY**

The patient must bring adequate changes of clothing. **All clothing and other personal items must be clearly marked with the patient's name and re-labeled as needed.** The nursing home cannot assume responsibility for loss or damage to personal items. Personal laundry services are available for those who desire the service. The facility does not provide laundry cleaning services. If you prefer to do the laundry, an approved closed container must be provided for soiled clothing. If the resident is incontinent, these clothes must be picked up and laundered daily.

### **MEDICATIONS**

Medication cannot be accepted in the facility unless it is properly labeled and packaged according to state regulation. All medications must be administered by the nurse on duty as ordered by the physician and with the consultation of a registered pharmacist unless the interdisciplinary team determines that the resident is capable of self-administration of his/her medication and the resident makes a written request to administer his/her own medication. If the interdisciplinary team has determined that the resident may self-administer his/her medication, medication must be kept in the secured area provided and the drugs administered and maintained in accordance with the facilities Self Administration of Medication Policy. Except in the aforementioned situation, all medications must be kept in the medication room. The resident is not permitted to keep medication in his/her possession except for emergency drugs on the physician's orders.

### **FOOD PLAN**

Meals are served three times a day; bedtime and between meal snacks are provided according to the patient's individual preference and diet order. Adequate portions of food will be served. Larger portions and/or second servings will be provided on request and/or need. Resident's likes and dislikes and meal patterns are recorded in an interview with the food service supervisor. All efforts are made to honor the resident's wishes.

Therapeutic diets are provided as ordered by the physician. For residents on therapeutic diets, please check with the charge nurse and/ or food service supervisor before bringing in food from outside the facility. All food and beverages brought from the outside to the resident should be reported to the charge nurse so the resident's dietary intake can be properly monitored.

### **TRANSPORTATION**

The facility will provide or assist in arranging for transportation with respect to the outside rehabilitative therapy, laboratory, radiology, dental services, and transfers to the hospital and other needed medical services.

## **RESIDENT POWER MOBILITY DEVICES**

The facility allows a resident to use his/her own power mobility device. The resident will operate and store their device in accordance with the facility's policy and procedure. The facility will make all reasonable accommodations for a resident to use their power mobility device to maintain their individuality and psychosocial well-being. At the same time the facility will protect the resident if the device is a potential risk to the safety and well-being, and property of its user and to others and their property. If the resident has a power mobility device, copies of the facility's policy and procedure on power mobility devices will be given to the resident upon admission or at any time the resident acquires a power mobility device.

## **RELIGION**

This facility is nondenominational, offering a wide range of religious services and complete freedom of religious worship.

## **VISITATION**

Immediate family or other relatives are not subject to visiting hour limitations or other restrictions not imposed by the resident. Likewise, the facility provides 24-hour access to the other non-relative visitors who are visiting with the consent of the resident. These other visitors are subject to "reasonable restrictions" according to the regulatory language. "Reasonable restrictions" are those imposed by the facility that protect the security of all facility residents, such as keeping the facility locked at night; denying access or providing limited and supervised access to a visitor if that individual has been found to be abusing, exploiting, or coercing a resident; denying access to a visitor who has been found to have been committing criminal acts such as theft; or denying access to visitors who are inebriated and disruptive. The facility may change the location of visits to assist care giving of other residents in the facility. For example, a resident's family visits in the late evening, which prevents the resident's roommate from sleeping. The facility is not required to provide sleeping accommodations to a family member or visitor through the night and all special requests will have to be approved by the facility administrator. Residents are permitted to receive visitors and to associate freely inside or outside the facility with persons and groups of their choice unless medically contraindicated and documented in the patient's medical record by attending physician. Telephone requests for information regarding patients are best answered between the hours of 8 a.m. and 11 p.m.

## **PHOTOGRAPHING OR VIDEOTAPING IN THE FACILITY**

We encourage photographing and videotaping of your loved one while they are a resident in this facility. However, we must also request that you honor the privacy and confidentiality of other residents. Taking pictures or videos of other residents without their permission is prohibited in this facility. No pictures or videos taken in a common area of the facility, such as the living room or dining room, will be allowed without the permission of the administrator. Please check with the administrator if there are questions as to whether or not you can take certain pictures or videos in this facility.

It is the policy of this facility to take pictures of the resident for both identification purposes and recording any special injury/treatment while they are a resident in the facility. For example, a resident's picture will be taken and placed in the medication administration/treatment record for identification purpose.

Unless you notify us that you object, the resident's photograph may be taken during social/activity functions within and outside the facility to be used in our facility scrapbook or be placed on our facility activity board to encourage and promote activity/social participation.

## **SOCIAL CARE-ACTIVITIES AND CARE PLANNING**

Medically orientated social care is deemed necessary to give the patient the most satisfying life possible. Personnel, facilities, and equipment are provided for parties, games, programs, singing, reading, movies, and arts and crafts. The activity plan for each resident is approved by their personal physician.

Residents and/or responsible parties and/or legal representatives are invited to participate in the care planning of each resident so the facility can stay informed on how to best meet the resident's needs. Each resident is scheduled for a full care plan review every 90 days. You will be informed in advance of the time and place of this conference. If you cannot attend, please feel free to make an appointment with the social worker at your convenience. Your input into the care of the resident is vital to provide the best efforts to maintain his/her quality of life. You may also request a conference at any time you feel it may be needed.

### **NOTIFICATION OF CHANGE**

Except in a medical emergency or when the resident is incompetent, the facility must consult with the resident immediately and notify the resident's legal representative and/or responsible party within 24 hours when any of the following occurs:

- a. An accident involving the resident which results in an injury and has the potential for requiring physician intervention;
- b. A significant change in the resident's physical, mental, or psycho-social status such as deterioration in health, mental, or psychosocial status in either life-threatening conditions or clinical complications;
- c. A need to alter treatment significantly;
- d. A decision to transfer or discharge the resident from the facility;
- e. A change in room or roommate assignment; or
- f. A change in resident rights under Federal or State law or regulations pertaining to care of the resident.

The resident's physician is notified if there is a medical problem or any change in the resident's condition or in any emergency. If the attending physician or his designated alternate is not available the facility reserves the right to call the Medical Director to handle the emergency.

The resident and/or responsible party and/or legal representative will be consulted when possible before contacting the Medical Director.

### **VALUABLES**

The facility requires residents to list their valuables and personal property on an Inventory Sheet upon admission and to inform the facility when there is a change or addition to their personal property inventory. The facility shall only be responsible or liable for the loss or damage of personal property listed on the resident's personal Inventory Sheet. The "Resident Trust Fund" is available to provide safekeeping for the resident's funds. It is suggested that residents should never have more than \$ 5 in cash. Locked security boxes may be purchased at the front office.

### **DISCHARGE-TRANSFERS**

A resident may be discharged only with a physician's order. Accounts must be paid in full at time of discharge. All personal effects must be picked up from the facility immediately after discharge. Those items left more than 60 days will be handled according to Property Disposal Policy.

Transfers within the building may be made at the request of the resident and/or responsible party and/or legal representative. The facility will transfer or discharge a resident from the facility, or within the facility only under the following conditions:

- a. When the resident's needs cannot be met by the facility where he/she is located.
- b. The resident's health has improved and he/she no longer needs the services of the facility, or the section of the facility in which he/she is located.
- c. The safety and/or health of individuals in the facility are endangered.
- d. Failure to pay the bill after reasonable notice and 15 days.

- e. The facility ceased to operate.
- f. The resident and/or his/her responsible party and/or legal representative request the transfer or discharge.

All discharges or transfers to other facilities are made under the orders and direction of the attending physician or Medical Director. The resident and/or his responsible party and/or legal representative are given 30 days advance notice except:

- a. In a medical emergency when the health and/or safety of the resident or other individuals is threatened.
- b. The resident has not resided in the facility for 30 days.

A resident is relocated to another room in the facility in accordance with the reasons listed above. Except in an emergency or when the resident and/or the responsible party and/or the legal representative requests the move, the resident and/or his responsible party and/or legal representative was notified in writing at least five days before the relocation of the resident in the facility. The relocation is made in accordance with the facility's Relocation of Resident Policy.

### **INSPECTION OF RECORDS**

It is the policy of this facility to allow residents who are competent and have not signed any legal documents giving away their personal rights to inspect their clinical records within twenty-four hours (excluding hours occurring during a weekend or holiday) after making such a request. For persons other than the resident or his/her legal representative to see the record, they must have written permission from the resident. All requests to see medical records must be referred to the Administrator or Director of Nursing and the appropriate forms must be completed before giving the resident the clinical record. The resident's records are to be kept confidential at all times. Photocopies of all or any portion of the records may be purchased upon request and two workdays advance written notice to the facility. For further information on cost, call the business office.

### **PRIVATE SITTERS**

Private nurses or sitters will be allowed to perform only those duties for which they are qualified by training and licensure or certification. Nurse Aides must have passed all training and skills exams and be registered with the Texas Nurse Aide Registry. Nurse Aides, LVN's and RN's are allowed to assist in bathing, dressing, feeding, ambulating, toileting and other duties as related to activities of daily living. All care will be provided in accordance with the Resident Assessment and Comprehensive Care Plan and under the direction and supervision of the facility's charge nurse. Payment for private nurses or sitters is the responsibility of the resident and/or his/her legal representative. Private duty nurses or sitters may not be employees of the facility. All private duty nurses or sitters will be required to sign an "Agreement to Hold Harmless, and Indemnity Agreement for Private Duty Nurses" prior to beginning work in this facility.

### **INSPECTION REPORTS**

Inspection reports from the Texas Health and Human Services are posted by the information board. All inspection reports for the last 3 years are kept in the Administrator's office and are available for review during normal business hours. If you are interested in reviewing these reports, please call the Administrator for an appointment.

Copies of these reports may be obtained by calling the Austin office of the Texas Health and Human Services at the following number, 1-800-458-9858.

### **MANAGEMENT OF PERSONAL FUNDS**

The resident has the right to select how his/her personal funds will be handled. The resident has the right to manage his/her financial affairs. The resident has a right to apply to the Social Security Administration

to have a representative payee designated for federal or state benefits to which he/she may be entitled. The resident has the right to designate in writing another person to manage his/her personal funds except when the Social Security Administration has appointed a representative payee. This facility does not require residents to deposit their personal funds with the facility. However, if the resident, legal guardian and/or responsible party, decides to use the "Resident Trust Fund," a Resident Trust Agreement must be signed, giving the facility permission to handle the resident's funds. Upon written authorization of the resident, this facility has an obligation to hold, safeguard, manage, and account for the personal funds of the resident deposited with the facility. There is no charge to any resident (private pay or Medicaid) for handling the resident's personal funds.

### **CORPORATE COMPLIANCE PROGRAM**

This facility has developed a Corporate Compliance Program. It is our desire to ensure that we comply with all federal, state and local laws, regulations and standards of care. This admission agreement complies with the Federal and State Licensure regulations. Should the Federal or State licensure regulations change, the facility maintains the right to modify this agreement to meet the revised regulations.

### **GRIEVANCE AND COMPLAINT PROCEDURE**

The resident/responsible party has the right to voice grievances to the facility or other agency or entity that hears grievances without fear of reprisal or discrimination. Such grievances include those with respect to treatment or care which has not been furnished, the behavior of staff, and of other residents, and other concerns regarding their LTC facility stay. This facility will make prompt efforts to resolve the grievance, including those with respect to the behavior of other residents within 7-14 days. All grievances must be investigated and may be oral or written and anonymous. The resident/responsible party has a right to obtain a written decision regarding their grievance. This facility will not retaliate or discriminate against a resident if the resident, the resident's guardian or any other person makes a complaint or files a grievance concerning the facility. The resident has a right to notify state agencies of complaints against the facility.

Complaints against any area of operation of this nursing facility or against any employee of this facility should be directed to the Grievance Officer who is the Administrator of this facility. The Administrator will receive and track grievances through to their conclusions, maintain confidentiality and coordinate with state and federal agencies in light of specific allegations. The Administrator will take immediate action to prevent further potential violations of resident rights while the alleged violation is being investigated.

The Administrator will direct this investigation along with his or her designee. The appropriate Department Head(s) will investigate the complaint to determine its validity. If the complaint is found to be valid, the Administrator and Department Heads will take the necessary action to correct the situation. The person making the complaint will be notified of the validity of the complaint and, if valid, the steps taken to correct the complaint.

The resident may file a complaint with the State Survey Agency concerning any suspected violation of state or federal nursing facility regulations, including but not limited to resident abuse, neglect, exploitation, misappropriation of resident property in the facility, non-compliance with the advance directive requirements and requests for information regarding returning to the community.

All alleged violations involving neglect, abuse, including injuries of unknown source, exploitation and/or misappropriation of resident property, shall be reported to the administrator of the facility and to the Texas Health and Human Services at 1-800-458-9858.

### **EMERGENCY PLANNING**

In order to ensure the safety and well-being of our residents while in the facility an emergency management plan is in place to ensure that our staff reacts accordingly to certain emergency situations. A risk analysis was performed and specific types of emergencies were identified that the facility might be



susceptible to. The facility has incorporated emergency planning and preparedness to deal with these emergencies to include any types of evacuation, if needed.

Depending on the nature of the emergency, the Administrator and selected department heads will meet and decide the best available information to relay to residents and family. Basic information may include: the condition of the family member's resident; the nature and scope of the threat; whether or not the facility's emergency plan has been initiated; the intent of whether or not the facility intends to shelter-in-place or evacuate at the point of the initial call; and if evacuation is intended, the receiving host facility information as appropriate. The facility keeps updated, at all times, contact information on each resident's guardians, responsible parties, and or legal representatives.

In case of a facility evacuation, you may prefer to pick-up your loved one. We will discharge the resident to your care with their prescribed medications, belongings and any other items needed for continuing care. We will readmit to the facility upon our return to the facility, if feasible. You will be given this option when our staff contacts you regarding any evacuation.

Our staff conducts tabletop disaster exercises and actual emergency drill rehearsals in order to be ready for any emergency that may come our way. We maintain the resources and commitment to be ready to participate within our community, if needed, and to ensure the safety of our residents and the community we serve.

Questions regarding our emergency preparedness or evacuation plan may be directed to the facility Administrator.

### **OTHER CONTACTS**

It is your right as a resident to contact the following agencies for assistance:

Texas Department of Health and Human Services  
Consumer Advocate for  
Nursing Home Residents  
1100 W. 49<sup>th</sup>  
Austin, TX 78756  
Phone: 1-800-458-9858

Texas Department of Health and Human Services  
Office of LTC Ombudsman  
P.O. Box 149030  
MC-W250  
Austin, TX 78714-9030  
Phone: 1-800-252-2412

Medicaid Fraud Control Unit  
3900 South IH 35 #200  
Austin, TX 78770-6536  
Phone: 1-800-252-8011

Advocacy, Inc.  
MHMR & Development Disabilities  
7800 Shoal Creek Blvd.  
Austin, TX 7857  
Phone: 1-800-252-9108

North Texas Council of Governments  
Area Agency on Aging  
Regional Ombudsman  
P.O. Box 5888  
Arlington, TX 76005-5888  
Phone: 1-800-272-3921  
Hotline: 1-800-252-9240

Area Agency on Aging of North Texas  
Regional Ombudsman  
P.O. Box 5144  
Wichita Falls, Texas 76307  
Phone: 1-800-460-2226  
Phone: 940-322-5281

Area Agency on Aging of Central Texas  
Regional Ombudsman  
P.O. Box 729  
Belton, TX 76513  
Phone: 1-800-447-7169  
Phone: 254-770-2345

Area Agency on Aging of the Permian Basin  
Regional Ombudsman  
P.O. Box 60660  
Midland, Texas 79711  
Phone: 1-800-491-4636  
Phone: 432-563-1061