

Introduced by

Human Services Committee

(At the request of the Department of Human Services)

1 A BILL for an Act to amend and reenact section 50-10.2-02 of the North Dakota Century Code,
2 relating to health care facility residents' rights.

3 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

4 **SECTION 1. AMENDMENT.** Section 50-10.2-02 of the North Dakota Century Code is
5 amended and reenacted as follows:

6 **50-10.2-02. Residents' rights - Implementation.**

7 1. All facilities shall, upon a resident's admission, provide in hand to the resident and a
8 member of the resident's immediate family or any existing legal guardian of the
9 resident a statement of the resident's rights while living in the facility. Within thirty days
10 after admission, the statement must be orally explained to the resident and, if the
11 resident is unable to understand, to the resident's immediate family member or
12 members and any existing legal guardian of the resident, and thereafter annually so
13 long as the resident remains in the facility. The statement must include rights,
14 responsibilities of both the resident and the facility, and rules governing resident
15 conduct. Facilities shall treat residents in accordance with provisions of the statement.
16 The statement must include provisions ensuring each resident the following minimum
17 rights:

18 a. The right to civil and religious liberties, including knowledge of available choices,
19 the right to independent personal decisions without infringement, and the right to
20 encouragement and assistance from the staff of the facility to promote the fullest
21 possible exercise of these rights.

22 b. The right to have private meetings, associations, and communications with any
23 person of the resident's choice within the facility.

- 1 c. The right of each resident, the resident's immediate family, any existing legal
2 guardian of the resident, friends, facility staff, and other persons to present
3 complaints on the behalf of the resident to the facility's staff, the facility's
4 administrator, governmental officials, or to any other person, without fear of
5 reprisal, interference, coercion, discrimination, or restraint. The facility shall adopt
6 a grievance process and make the process known to each resident and, if the
7 resident is unable to understand, to the resident's immediate family member or
8 members and any existing legal guardian of the resident. An individual making a
9 complaint in good faith is immune from any civil liability that otherwise might
10 result from making the complaint.
- 11 d. The right to send and receive unopened personal mail and the right of access to
12 and use of telephones for private conversations.
- 13 e. The right to assured private visits by one's spouse, or if both are residents of the
14 same facility, the right to share a room, within the capacity of the facility, unless
15 sharing a room is not medically advisable as documented in the medical records
16 by the attending physician.
- 17 f. The right to manage one's own financial affairs if not under legal guardianship, or
18 to delegate that responsibility in writing to the administrator or manager of the
19 facility, but only to the extent of funds held in trust by the facility for the resident. If
20 such a trust is established, then a written quarterly accounting of any transactions
21 made on behalf of the resident must be furnished along with an explanation by
22 the facility to the resident or the person legally responsible for the resident.
- 23 g. The right to be fully informed in writing prior to or at the time of admission and
24 during one's stay, of services provided and the charges for those services,
25 including ancillary charges. Residents, or their legal guardians, must be informed
26 at least thirty days prior to any change in the costs or availability of the services.
27 No facility may demand or receive any advance payment or gratuity to assure
28 admission.
- 29 h. The right to be adequately informed of one's medical condition and proposed
30 treatment and to participate in the planning of all medical treatment, including the
31 right to refuse medication and treatment, to be discharged from the facility upon

- 1 written request, and to be notified by the resident's attending physician of the
2 medical consequences of any such actions.
- 3 i. The right to have privacy in treatment and in caring for personal needs, to use
4 personal belongings, to have security in storing and using personal possessions,
5 and to have confidentiality in the treatment of personal and medical records. The
6 resident has the right to view, and authorize release of, any personal or medical
7 records.
- 8 j. The right to be treated courteously, fairly, and with the fullest measure of dignity.
- 9 k. The right to be free from mental and physical abuse and the right to be free from
10 physical or chemical restraint except in documented emergencies or when
11 necessary to protect the resident from injury to self or to others. In such cases,
12 the restraint must be authorized and documented by a physician for a limited
13 period of time and, if the restraint is a chemical one, it must be administered by a
14 licensed nurse or physician. Except as provided in this subdivision, drugs or
15 physical restraints may not be used or threatened to be used for the purposes of
16 punishment, for the convenience of staff, for behavior conditioning, as a
17 substitute for rehabilitation or treatment, or for any other purpose not part of an
18 approved treatment plan.
- 19 l. The right not to be transferred or discharged except for:
- 20 (1) Medical reasons;
- 21 (2) The resident's welfare or that of other residents; or
- 22 (3) Nonpayment of one's rent or fees-
- 23 ~~Residents may be temporarily transferred; or~~
- 24 (4) A temporary transfer during times of remodeling.
- 25 m. The right to receive at least a thirty-day written advance notice of any transfer or
26 discharge when the resident is being discharged to another facility or the
27 resident's own home, or when the resident is being transferred or discharged
28 because of a change in the resident's level of care; and the right to receive
29 advance notice of transfer or discharge under all other circumstances to the
30 extent not prohibited by sound medical reasons, or incompatibility which affects a
31 resident's welfare or that of another resident.

- 1 n. The right to refuse to perform services on behalf of the facility, unless agreed to
2 by the resident or legal guardian and established in the plan of care.
- 3 o. The right to a claim for relief against a facility for any violation of rights
4 guaranteed under this chapter.
- 5 p. The right to have each facility display a notice that the following information is
6 available for public review and make the information available on request:
- 7 (1) A complete copy of every inspection report, deficiency report, and plan of
8 correction the facility received during the previous two years.
- 9 (2) The facility's grievance process.
- 10 (3) A copy of the statement of ownership, board membership, and partners.
- 11 (4) A statement of ownership setting forth any conflict of interest in the
12 operation of the facility.
- 13 q. The right to a pharmacist of the resident's choice irrespective of the type of
14 medication distribution system used by the facility.
- 15 r. The right to not be discriminated against by a facility in the admissions process or
16 in the provision of appropriate care on the basis of the resident's source of
17 payment to the facility. Any applicant for admission to a facility who is denied
18 admission must be given the reason for the denial in writing upon request.
- 19 s. The right of residents and their families to organize, maintain, and participate in
20 resident advisory and family councils.
- 21 t. The right of residents receiving services performed by a provider from outside the
22 facility to be informed, on request, of the identity of the provider.
- 23 2. Waiver of any of the rights guaranteed by this chapter may not be made a condition of
24 admission to a facility.
- 25 3. Each facility shall prepare a written plan and provide staff training to implement this
26 chapter.
- 27 4. ~~The department shall hold open meetings at least once every two years in each region~~
28 ~~established by the governor's executive order 1978-12 dated October 5, 1978, having~~
29 ~~a facility, to advise and to facilitate communication and cooperation between facility~~
30 ~~personnel and the residents in their mutual efforts to improve resident care; and to~~

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- 1 ~~document concerns and issues needing to be addressed. Appropriate advance notice-~~
2 ~~must be given.~~
- 3 5. The department shall develop and coordinate with the facility licensing and regulatory
4 agencies a relocation plan in the event a facility is decertified or unlicensed.