Know Your Rights

**BE FULLY INFORMED**
You should receive a copy of all rules and regulations pertaining to your rights and responsibilities as a resident. You should be informed in writing of all matters relating to you, including services and charges not covered by the government or by the facility’s daily rate.

**PARTICIPATE IN YOUR CARE**
You have the right to know your medical condition and the options available for treatment. You may refuse any option.

**REMAIN IN THE FACILITY**
You can be discharged only for medical reasons, nonpayment of a bill, or the threat of physical harm. You must be given written notice 30 days in advance of the transfer or discharge. This notice must tell why you are being discharged and how you can appeal.

**CHOOSE YOUR OWN DOCTOR**
You may continue to use your own doctor or select another who will be responsible for your total care. If you prefer, the facility will assign a doctor.

**RESPONSIBLE PARTY**
You cannot be required to have another person sign a guarantee of payment for your care when you move into the facility.

**MANAGE YOUR OWN FINANCES**
Whether you hold your money or have the facility keep track of it, nobody can tell you how to spend your personal funds. The operator of the home can help you manage your financial affairs.

**PARTICIPATE IN ACTIVITIES**
You may participate in social and religious activities, both inside and outside the facility. The facility should not require you to perform any duties or services.

**KEEP YOUR POSSESSIONS**
You may retain your personal possessions as space permits. On a quarterly basis, you are entitled to receive an accounting for all your personal possessions or funds entrusted to the facility.

**BE FREE FROM ABUSE AND RESTRAINT**
You should not be subjected to physical, sexual or emotional harm. Chemical or physical restraints should not be imposed for purposes of discipline or staff convenience. Restraints are only to be used as treatment for medical symptoms.

**CONFIDENTIALITY**
Medical, personal, social or financial affairs should be considered privileged information.

**HAVE PRIVACY AND RESPECT**
You have the right to privacy in medical treatment, personal care, telephone and mail communications, visits of family and meetings of resident groups. You should be treated with consideration and respect, with full recognition of your dignity and individuality. You should not be required to do things against your will.

**COMMUNICATE FREELY**
You may privately associate and communicate with persons of your choice. You may send and receive unopened mail.

**RETAIN MARITAL PRIVILEGES**
You have the right to private visits with your spouse and may share a room with your spouse if you are both residents.

**PURCHASE GOODS AND SERVICES**
You should receive an itemized bill for all goods and services provided by the facility. You may purchase or rent goods or services not included in your daily or monthly rate.

**VOICE GRIEVANCES**
You may voice concerns and problems, along with recommended changes, to facility staff or outside representatives. Owners and staff of facilities are prohibited by law from retaliating if you complain. You should speak with the director of nursing or the administrator of the home if you encounter problems requiring immediate action. For non-emergencies, speak to the resident council or an ombudsman.

For more information, contact the Long-Term Care Ombudsman Program

1-800-309-3282

LTCOmbudsman@health.mo.gov
www.health.mo.gov/seniors/ombudsman