



pennsylvania
DEPARTMENT OF AGING



Know Your Rights as a Personal Care Home Resident

Long-Term Care Ombudsman Program



The Pennsylvania Department of Aging's Long-Term Care Ombudsman Program contracts with 52 Area Agencies on Aging to provide Ombudsman services.

An Ombudsman is a trained individual who helps protect the **RIGHTS** of older Pennsylvanians living in long-term care facilities.

Ombudsmen provide information, answer questions, investigate complaints and offer assistance to resolve your problems about the quality of care or treatment provided to you.





Personal care homes have regulations that safeguard the **RIGHTS** of the residents who live in personal care homes in Pennsylvania

The Pennsylvania Department of Public Welfare is the state agency that licenses, inspects, and investigates personal care homes.

This brochure contains general information on many of those **RIGHTS**.

For a more complete explanation of your **RIGHTS**, contact the Long-Term Care Ombudsman Helpline at 1-717-783-8975 and/or your local Ombudsman listed below.

YOUR LOCAL OMBUDSMAN:

Name:

Address:

Phone Number:

**All communications with the Ombudsman
are FREE and CONFIDENTIAL**





YOU HAVE

The **RIGHT** to be informed and receive a written copy of your rights and responsibilities as a resident on admission.

The **RIGHT** to be informed of the rules of the home. You must be given 30 days written notice before the effective date of a new or amended rule.

The **RIGHT** not to be discriminated against because of race, color, religious creed, disability, ancestry, sexual orientation, national origin, age or gender.

The **RIGHT** not to be neglected, intimidated, physically or verbally abused, mistreated, or subjected to corporal punishment.





The **RIGHT** to be treated with dignity and respect.

The **RIGHT** to your personal privacy and possessions. Privacy shall be provided during bathing, dressing, changing and medical procedures.

The **RIGHT** to be free from restraints.

The **RIGHT** to access the local Ombudsman and communicate privately.

The **RIGHT** to freely associate, organize, and communicate with others privately.

The **RIGHT** to receive visitors daily for a minimum of 12 hours.





The **RIGHT** to have access to a telephone in the home to make calls in private. Toll-free calls shall not be charged to you.

The **RIGHT** to receive and send unopened mail. Incoming and outgoing mail may not be opened or read by staff persons unless requested by you.

The **RIGHT** to a system that safeguards your money and property.

The **RIGHT** to keep \$60 or \$85 per month of your own funds for your personal use. (Specific amount determined by your pay status.)

The **RIGHT** to practice, or refrain from practicing, the religion or faith of your choice.





The **RIGHT** to receive assistance in accessing health services.

The **RIGHT** to receive assistance in obtaining and keeping clean, seasonal clothing.

The **RIGHT** to furnish your room and to purchase, receive, use and retain personal clothing and possessions.

The **RIGHT** to access, review, and request corrections to your record.

The **RIGHT** to leave and return to the home at times consistent with the home's rules and your support plan.

The **RIGHT** to relocate to another facility, including the right to request and receive relocation assistance from the home.





The **RIGHT** to be compensated for labor performed on behalf of the home according to State and Federal labor laws.

The **RIGHT** to file complaints with any individual or agency and recommend changes in policies, home rules, and personal care home services without intimidation, retaliation or threat of discharge.

The **RIGHT** to remain in the home, as long as it is licensed, except if:

- you are a danger to yourself or others
- the legal entity chooses to close the home or a portion of the home
- a home determines that your functional level has advanced or declined so that your needs cannot be met in the home





- your needs would create an undue financial or programmatic burden on the home.

The **RIGHT** to receive services in the home that have been contracted for you.

The **RIGHT** to use both the home's procedures and external procedures, if any, to appeal involuntary discharge.

The **RIGHT** to choose your own health care providers without interference by the home.

The **RIGHT** to at least three nutritionally well-balanced meals daily and to choose alternative food and beverages.





The **RIGHT** to drinking water at all times.

The **RIGHT** to safely self-administer medication. You must be able to recognize and distinguish the medications, know how much medication you are to take, and know the times you are to take the medication.

For a complete explanation of your **RIGHTS**, contact your local Ombudsman.



YOUR LOCAL OMBUDSMAN:

Name:

Address:

Phone Number:

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For more information about services
in your community, contact your local
Area Agency on Aging.



local AAA labels

Office of the State
Long-Term Care Ombudsman

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