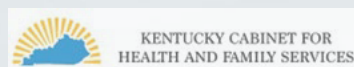


Residents' Rights

A Guide for Kentucky's
Nursing Facility Residents



*This project was made possible by the Kentucky State Survey Agency and CMS.
CMP Project # 2018-04-KY-0918D Residents' Rights Consumer Education Project*





Dear Friends,

The Kentucky Long-Term Care Ombudsman Program prepared this guide to help you and your loved ones be aware of your rights. Your rights are in State and Federal Laws (42 Code of Federal Regulation, Section §483.10 Resident Rights and Kentucky Revised Statute 216.515)

Residents' Rights place a strong emphasis on individual dignity and self-determination. It is easier to exercise your rights for a better long-term care experience if you are knowledgeable and empowered.

In long-term care, there are many factors that affect your sense of empowerment. The experience of living with illness can dampen your sense of self and your capabilities. Sudden changes in health, independence, and living arrangements may cause a sense of powerlessness. New residents (both those planning to stay short-term and those staying long-term) find themselves thrust into an unfamiliar environment with new rules and social codes. It is common to have questions about what you are allowed to do and what your rights are. Long-Term Care Ombudsmen are here to provide you information, support, and encouragement as you exercise your rights.

You have the same rights as your fellow residents. It is our hope that every resident will feel comfortable to be themselves, freely participate in a community of people, and effectively deal with the problems of everyday life. It is equally important that residents respect each other's differences.

Long-Term Care Ombudsmen are advocates that understand you may not want to upset your caregivers, and sometimes you may not have the energy to figure out how to get help. Your Ombudsman is here to provide you with information and help you resolve any concerns you may have. Ombudsmen do not discriminate on the basis of age, race, color, creed, national origin, religion, gender, sexual orientation, or gender identity. Your Ombudsman will visit you. We hope you will enjoy these visits and ask questions, discuss what is on your mind, or let us help you with any complaints or concerns you may have.

Please read this booklet carefully and keep it for future reference. If you have any questions about your rights just ask your Ombudsman.

Sincerely,

Sherry Culp

KY State Long-Term Care Ombudsman

Toll Free (800) 372-2991

www.ombuddy.org

nhoa@ombuddy.org

What does a Long-Term Care Ombudsman do?

- Resolves complaints made by or for residents of long-term care facilities
- Educates consumers and long-term care providers about residents' rights and good care practices
- Promotes community involvement through volunteer opportunities
- Provides information to the public on nursing homes and other long-term care facilities and services, residents' rights and legislative and policy issues
- Advocates for residents' rights and quality care in nursing homes, personal care, residential care, and other long-term care facilities
- Promotes the development of citizen organizations, family councils and resident councils



Residents' Rights

Residents have a right to a dignified existence. A facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's individuality.

Residents' Rights were part of the Nursing Home Reform Law enacted in 1987 by the U.S. Congress. Residents' Rights were also incorporated into Kentucky State Statutes. These laws require nursing homes to care for residents in a manner that promotes and enhances the quality of life of each resident, ensuring dignity, choice, and self-determination. Residents have the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States.

All nursing facilities are required "to provide services and activities to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident in accordance with a written plan of care that... is initially prepared, with participation, to the extent practicable, of the resident, the resident's family, or legal representative." This means a resident should not decline in health or well-being because of the way a nursing facility provides care.

Nursing facilities must protect and promote the rights of residents. Facilities must ensure that the resident can exercise his or her rights without interference, coercion, discrimination, or reprisal from the facility. Residents who have not been adjudged incompetent by the state court have the right to designate a representative who may exercise the resident's rights to the extent provided by state law. The same-sex spouse of a resident must be afforded treatment equal to that afforded to an opposite-sex spouse if the marriage was valid in the jurisdiction in which it was celebrated. The resident retains the right to exercise those rights not delegated to a resident representative, including the right to revoke a delegation of rights, except as limited by State law. The facility shall not extend the resident representative the right to make decisions on behalf of the resident beyond the extent required by the court or delegated by the resident. The resident's wishes and preferences must be considered in the exercise of rights by the representative.

Report abuse!

It's the law.

Call Adult Protective Services at 1-800-752-6200 and notify law enforcement.

Abuse is the infliction of injury, unreasonable confinement, involuntary seclusion, intimidation, or punishment with resulting physical harm, pain, or mental anguish.

Physical abuse includes hitting, slapping, pinching, corporal punishment and kicking.

Sexual abuse is rape, coercion to perform sexual acts, unnecessary medical procedures around the genitals, and vulgar or offensive comments or conversations which make a resident uncomfortable.

Verbal abuse is the use of oral, written, or gestured language that willfully includes disparaging and derogatory terms towards residents or their families, or within their hearing.

Mental abuse includes, but is not limited to, humiliation, harassment, threats of punishment or deprivation.

Neglect or the deprivation of goods or services that are necessary to attain or maintain physical, mental, and psychosocial well-being.

YOU HAVE THE RIGHT:

➤ Dignity, Respect, and Freedom

- To be treated with consideration, respect, and dignity. All residents have the right to be addressed how they want to be addressed (e.g. using a resident's preferred pronoun) and the right to be clothed and groomed consistent with their gender identity.
- To be free from mental and physical abuse, corporal punishment, involuntary seclusion, and physical and chemical restraints. Facility staff cannot refuse to provide care due to a resident's sexual orientation nor can staff harass a resident due to his/her gender identity.
- To self-determination.
- To share a room with your spouse when married residents live in the same facility and both spouses consent to the arrangement.
- To share a room with your roommate of choice when practicable, when both residents live in the same facility and both residents consent to the arrangement.
- To interact with members of the community and participate in community activities both inside and outside the facility.
- To security of your possessions.

Self-determination is the concept that individuals are qualified to make their own decisions about their lives. Self-determination is based upon the principle that the individual is the best judge of his or her own interests and that each person has the right to make his or her own decisions.

The Elder Justice Act requires an owner, operator, employee, manager, agent, or contractor of applicable long-term care facilities to report any reasonable suspicion of crimes committed against a resident of that facility to the Secretary and at least one local law enforcement entity. The Act establishes two time limits for the reporting of reasonable suspicion of a crime, depending on the seriousness of the event that leads to the reasonable suspicion.

- 1 Serious Bodily Injury – 2 Hour Limit: If the events that cause the reasonable suspicion result in serious bodily injury to a resident, the covered individual shall report the suspicion immediately, but not later than 2 hours after forming the suspicion;
- 2 All Others – Within 24 Hours: If the events that cause the reasonable suspicion do not result in serious bodily injury to a resident, the covered individual shall report the suspicion not later than 24 hours after forming the suspicion.

Keep all passwords for your accounts secure to protect yourself from identity theft. Report fraud to credit reporting agencies such as

Experian

Online: www.experian.com/disputes/main.html

By mail: Use the address provided on your credit report or mail your letter to:

Experian

P.O. Box 4500

Allen, TX 75013

By phone: Phone number provided on credit report or (888) 397-3742

TransUnion

Online: <https://dispute.transunion.com>

By mail: Download the dispute form

Mail the dispute form with your letter to:

TransUnion LLC

Consumer Dispute Center

P.O. Box 2000

Chester, PA 19016

By phone: (800) 916-8800

Security of Personal Belongings

Responsibilities of the Nursing Facility

- Establish and post policies regarding theft and investigation procedures. The facility cannot ask or require residents to agree to refrain from holding the facility liable for losses of personal property.

An admission contract is a legally binding document that describes the relationship between the nursing facility and the resident, services the facility provides, the rights and responsibilities of the resident, and the amounts charged for care. The facility is required to use clear language, both written and oral, to inform residents of services they will receive. When entering a nursing facility, you do not have to sign papers that require mandatory arbitration in the event of a dispute with the nursing facility. You can ask that any arbitration provisions be stricken from the contract prior to signing. You may be able to withdraw a signed arbitration agreement.

How to protect personal belongings

Preventative Measures for Theft/Loss of Possessions

- 4 Mark/personalize all personal items, including watches, dentures, eyeglasses, and hearing aids.
- 4 Maintain a written inventory system for clothing and other valuables, signed by the resident and a representative from the facility. The resident and responsible party need to make sure to update the inventory listing periodically during your stay.
- 4 Residents and family members should keep a copy of the inventory. Consider copying, scanning receipt or maintaining an electronic file of online purchases.
- 4 Take pictures of valuables.
- 4 Keep copies of all receipts for any items taken into the facility, if possible.
- 4 Use locks for drawers/cabinets, where only the resident/representative and the administrator have a key.
- 4 Safeguard ATM, credit cards, and identification that could be used to steal funds or identity.

YOU HAVE THE RIGHT:

➔ Be Fully Informed

- To available services and notice of the charges for each service
- To facility rules and regulations, including a written copy of residents' rights
- To the address and telephone number of the State Long-Term Care Ombudsman Program and state survey agency
- To state survey reports and the nursing home's plan of correction
- To advance plans of a change in rooms or roommates
- To assistance if a sensory impairment exists
- To receive information in a language you understand (Spanish, Braille, etc.)

Reprisal is a retaliatory act. Some call it revenge or vengeance. It is not okay for anyone to mistreat a resident in any way for filing a complaint or grievance. Residents should never be shamed, isolated, or harmed (physically or mentally) for bringing attention to a problem and seeking to resolve problems. Harming a resident who files a complaint can be an abusive criminal act punishable by law.

YOU HAVE THE RIGHT:

➔ Complain

- To share grievances or complaints with the facility or other agencies like the Long-Term Care Ombudsman Program, Office of Inspector General, Adult Protective Services, Protection and Advocacy and others.
- To share grievances without discrimination or reprisal and without fear of discrimination or reprisal. You can complain about care and treatment, the lack of care and treatment, the behavior of staff and of other residents; and other concerns regarding your stay in the facility. The facility must make prompt efforts to resolve grievances.
- If English is not your primary language the facility is required to provide translation services to you so you can express your complaints.

Your nursing home may have an anonymous complaint phone line.

A facility must not prohibit or in any way discourage a resident from communicating with federal, state, or local officials, including, but not limited to, federal and state surveyors, other federal or state health department employees, including representatives of the Office of the State Long-Term Care Ombudsman, and any representative of the agency responsible for the protection and advocacy system for individuals with mental disorders (established under the Protection and Advocacy for Mentally Ill Individuals Act of 2000 (42 U.S.C. 10801 et seq.), regarding any matter, whether or not subject to arbitration or any other type of judicial or regulatory action.

YOU HAVE THE RIGHT: Participate in Your Own Care

- To receive adequate and appropriate care.
- To be informed of all changes in your medical condition.
- To participate in your own assessment, care-planning, treatment, and discharge plans.
- To identify individuals to be included in the planning process.
- To request meetings about your care and request revisions to the person-centered plan of care.
- To participate in establishing goals and outcomes of care, the type, amount, frequency, and duration of care, and any other factors related to the effectiveness of the plan of care.
- To receive the services and items included in the plan of care and to be informed, in advance, of changes to the plan of care.
- To refuse medication and treatment
- To see the care plan and receive a copy of the signed plan of care.
- To review one's medical record.
The facility must provide the resident with access to personal and medical records pertaining to him or herself, upon an oral or written request, within 24 hours (excluding weekends and holidays).
- The facility must allow the resident to obtain a copy of the records or any portions thereof (including in an electronic form or format when such records are maintained electronically) upon request and 2 working days advance notice to the facility. The facility may impose a reasonable, cost-based fee on the provision of copies, provided that the fee includes only the cost of labor for copying the records; supplies for creating the paper copy or electronic media if the individual requests that the electronic copy be provided on portable media; and postage, when the individual has requested the copy be mailed.
- To refuse chemical and physical restraints.
You have the right to be free from any physical or chemical restraints imposed for purposes of discipline or convenience and not required to treat your medical symptoms. If restraints are required to treat your medical symptoms, the facility must use the least restrictive alternative for the least amount of time and must document evaluation of continued need for the restraint.
- To be free from charge for services covered by Medicaid or Medicare

Care Planning

A care plan is an agreement between the resident and the facility about how both medical and non-medical care will be provided. A good care plan should: be specific, individualized, written in a common language that everyone can understand; reflect your concerns and support your well-being, functioning, and rights; use a multi-disciplinary team approach and use outside referrals as needed; should not label your choices or needs as problem behaviors; and be re-evaluated and revised routinely.

At a care planning conference, staff, residents, family, and/or the resident's chosen representative may talk and ask questions about aspects of life in the facility. The conference is an ideal time to discuss meals, activities, therapies, personal schedules, medical and nursing care, and emotional needs. You can bring up concerns about daily routines, ask questions, or offer information to help staff provide your care.

An initial care plan must be created within 48 hours of admission. Care plan conferences must occur every three months and whenever there is a significant change in your physical or mental health that might require a change in care. If you want a family member, friend, or the Ombudsman at the meeting, ask the staff to hold the meeting at a convenient time for them to attend.

You have a right to a complete and detailed copy of the care plan, and the name of the person you can speak with to change the care plan. The Ombudsman is available to assist in preparing for the meeting and to attend, at the resident's request.

YOU HAVE THE RIGHT:

➤ Privacy and Confidentiality

- To private and unrestricted communication with any person of your choice.
- To reasonable access to a telephone, including TTY and TDD services, and a place in the facility where calls can be made without being overheard. This includes the right to retain and use a cellular phone at your own expense. You have the right to privacy in using electronic communications such as email and video communications and for internet research.
- To send and promptly receive unopened mail, letters, packages and other materials delivered to the facility.
- To privacy regarding your body, and all care must be given in a manner that maximizes that privacy.
- To privacy regarding medical, personal, or financial affairs.



Everyone who enters a nursing home deserves quality, person-centered care. Too many residents, however, particularly those living with dementia, are being given off-label antipsychotic drugs to control their behavior instead of quality care. These drugs can have serious, life-threatening side effects for older people.

Antipsychotic drugs are NOT a treatment for dementia or Alzheimer's disease, they are only appropriate for patients with specific mental disorder diagnoses such as Schizophrenia.

When antipsychotics are given to patients without these disorders it is often to control challenging behaviors or for caregiver convenience. Instead of treating the underlying causes of their behavior, these drugs are being used to mask the individual's symptoms and restrain their behavior. When used this way, antipsychotic drugs are a form of chemical restraint.

Antipsychotic drugs, when given to older adults with dementia, can be unsafe. In fact, they often come with a black box warning about their dangerous, life-threatening risks. A black box warning is the most serious warning by the US Food and Drug Administration.

You have the right to question the use of these drugs and raise concerns. You have the right to decline medications.

YOU HAVE THE RIGHT:

➔ During Transfers and Discharges

➔ To remain in the nursing facility unless a transfer or discharge:

- (a) is necessary for your welfare and your needs cannot be met in the facility
- (b) is appropriate because your health has improved sufficiently so you no longer need the services provided by the facility
- (c) is needed because the safety of individuals in the facility is endangered due to your clinical or behavioral status
- (d) is needed because the health of individuals in the facility would otherwise be endangered
- (e) is an option for the facility when you have failed, after reasonable and appropriate notice, to pay for (or to have paid under Medicare or Medicaid) your stay at the facility.
- (f) is necessary because the facility ceases to operate
- To receive thirty-day notice of transfer or discharge which includes the reason, effective date, location to which you are transferred or discharged, the right to appeal, and the name, address, and telephone number of the State Long-Term Care Ombudsman. For evictions based on a nursing facility's supposed inability to meet your needs, the nursing home must document its attempts to meet your needs, and the ability of a receiving nursing home to meet those needs. The law requires the nursing home to problem-solve and attempt to resolve the issue before discharge.
- To safe transfer or discharge through sufficient preparation by the nursing home.
- To be informed of the bed-hold or bed reservation policy. Before a nursing facility transfers you to a hospital or you go on leave, the nursing facility must provide written information to you or your representative that specifies the duration of the state bed-hold policy during which you are permitted to return and resume residence in the nursing facility. If your hospitalization or therapeutic leave exceeds the bed-hold period under the Medicaid State Plan, and you return to the facility, you should be able to return to your room. If your previous room is not available and you need nursing facility care, you should be able to return to the first available bed in a semi-private room.

Transfer is movement from a certified institution to another institutional setting that assumes legal responsibility for the resident's care.

Discharge is movement from a certified institutional setting to a non-institutional setting. After discharge, the facility is no longer legally responsible for the resident's care.

Notice of transfer or discharge must be given to you at least 30 days in advance, if you have resided in the facility for 30 days or more, or as soon as practicable if safety or medical reasons require immediate transfer. If the nursing home voluntarily closes you have the right to a 60 day written notice to make an informed decision about a new home.

If a resident is to be transferred or discharged, the facility must record the reason for transfer in the resident's clinical record, and notify the resident and the resident's family member, guardian, or legal representative in writing. The facility must send a copy of the notice to the Office of the State Long-Term Care Ombudsman.

The notice must include:

- the reason for the transfer or discharge,
- the location to which the resident will be moved,
- the date of transfer or discharge, and
- information about the resident's right to appeal to the state concerning the transfer or discharge,
- the name, address, and telephone number of the State Long-Term Care Ombudsman.

The location the resident will be moved to must be specific, appropriate, available, and agreeable to taking the resident.

YOU HAVE THE RIGHT:

➔ Visits

- To visits by relatives, friends, and others of your choosing. You have the right to receive visits from who you choose at the time you choose, including, but not limited to, a spouse (including a same-sex spouse), a domestic partner (including a same-sex domestic partner), another family member, or a friend.
- To visits by your personal physician and representatives from the state survey agency and ombudsman programs.
- To deny, refuse or end visits by anyone at any time

A resident has the right to appeal the facility's decision to transfer/discharge him or her. The transfer or discharge notice must include information about how to request a hearing, the resident's right to use legal counsel or other spokesman at the hearing, and the mailing address and telephone number of the State Long-Term Care Ombudsman. A complaint may also be filed with the state survey agency. If you appeal a discharge you have the right remain in the facility while the appeal is pending unless the failure to discharge or transfer would endanger the health or safety of the resident or other individuals in the facility.

The facility must document the danger that failure to transfer or discharge would pose. Contact the Long-Term Care Ombudsman program if you are concerned about plans for transfer or discharge from a nursing home.

YOU HAVE THE RIGHT:

➤ Make Independent Choices

- To make personal decisions, such as what to wear and how to spend free time. You have the right to choose activities, schedules (including sleeping, waking, and bathing times), health care and providers of health care services consistent with your interests, assessments, and plan of care. You have the right to make choices about your life in the facility that are significant to you.
- To reasonable accommodation of your needs and preferences.
- To choose a physician
- To participate in community activities, both inside and outside of the nursing home.
- To organize and participate in a Resident Council.
- To manage your own financial affairs. This includes the right to know, in advance, what charges a facility may impose against your personal funds.

The facility must not require you to deposit your personal funds with the facility. If you choose to deposit personal funds with the facility, upon your written authorization, the facility must act as a fiduciary of your funds and hold, safeguard, manage, and account for your personal funds deposited with the facility. The facility must establish and maintain a system that assures a full and complete and separate accounting, according to generally accepted accounting principles, of your personal funds entrusted to the facility on your behalf. Your financial record must be available to you through quarterly statements and upon request.

If you receive Medicaid benefits, the facility must notify you when the amount in your account reaches \$200 less than the Supplemental Security Income (SSI) resource limit. The limit for one person is \$2,000 and \$3,000 for a couple. The facility must let you know when your resources are at this limit because you may lose eligibility for Medicaid or SSI if these resources are not spent down on allowable expenses.

Upon the discharge, eviction, or death of a resident with a personal fund deposited with the facility, the facility must convey within 30 days the resident's funds, and a final accounting of those funds, to the resident, or in the case of death, the individual or probate jurisdiction administering the resident's estate, in accordance with state law.



Resident and Family Groups/Councils

The resident has a right to organize and participate in resident groups in the facility.

The facility must provide a resident or family group, if one exists, with private space; and take reasonable steps, with the approval of the group, to make residents and family members aware of upcoming meetings in a timely manner.

Staff, visitors, or other guests may attend resident group or family group meetings only at the respective group's invitation.

The facility must provide a designated staff person who is approved by the resident or family group and the facility and who is responsible for providing assistance and responding to written requests that result from group meetings.

The facility must consider the views of a group and act promptly upon the grievances and recommendations of such groups concerning issues of resident care and life in the facility.

The facility must be able to demonstrate their response and rationale for such response.

This should not be construed to mean that the facility must implement as recommended every request of the resident or family group.

The resident has a right to participate in family groups.

The resident has a right to have family member(s) or other resident representative(s) meet in the facility with the families or resident representative(s) of other residents in the facility.

Resources

THE KENTUCKY LONG-TERM CARE OMBUDSMAN PROGRAM

A Long-Term Care Ombudsman is a voice for nursing facility residents and, as a designated advocate, helps them solve problems and improve their quality of life. The program is federally mandated in the Older American's Act. Long-Term Care Ombudsmen are trained to impartially investigate and resolve concerns of residents in long-term care facilities after getting consent from the residents to do so. LTC Ombudsmen work closely with residents, families, and legal representatives as well as LTC facility staff to resolve resident complaints about care and quality of life. They also provide information and refer residents to additional community resources when appropriate. Concerns LTC Ombudsmen address includes all aspects of residents' care, residents' rights, abuse/neglect, questions or problems with Medicaid, Medicare, or any other service for which they are eligible. LTC Ombudsmen are not state surveyors/inspectors or adult protective services. Join our email list by emailing nhoa@ombuddy.org to get our newsletters.

STATE LONG-TERM CARE OMBUDSMAN OFFICE

Sherry Culp, State LTC Ombudsman
sherry@ombuddy.org

Mark Burress, Western Regional LTC Ombudsman
mark@ombuddy.org

Jodi Holsclaw, Eastern Regional LTC Ombudsman
jodi@ombuddy.org

Discharge/Transfer notification and general information nhoa@ombuddy.org

Nursing Home Ombudsman Agency
of the Bluegrass, Inc. (NHOA)
3138 Custer Drive, Suite 110, Lexington, KY 40517
(859) 277-9215, 1-800-372-2991 Toll Free
www.ombuddy.org

DISTRICT LONG-TERM CARE OMBUDSMEN

Barren River District Ombudsman

Lynda Love
Kentucky Legal Aid, 1700 Destiny Lane,
Bowling Green, KY 42104
Phone (270) 780-8835, 1-800-355-7580 Toll Free
llove@klaid.org

Counties: Allen, Barren, Butler, Edmonson, Hart,
Logan, Metcalfe, Monroe, Simpson, and Warren

Big Sandy District Ombudsman

Shelly Akers
Big Sandy Area Development District, 110
Resource Drive, Prestonsburg, KY 41653
Phone (606) 886-2374, ext. 335,
1-800-737-2723 Toll Free
Shelly.Akers@BigSandy.org

Counties: Floyd, Johnson, Magoffin, Martin,
and Pike

Bluegrass District Ombudsman

Alice Salyers
Nursing Home Ombudsman Agency of the
Bluegrass, Inc., 3138 Custer Drive, Suite 110,
Lexington, KY 40517
Phone (859) 277-9215, 1-800-372-2991 Toll Free
alice@ombuddy.org

Counties: Anderson, Bourbon, Boyle, Clark, Estill,
Fayette, Franklin, Garrard, Harrison, Jessamine,
Lincoln, Madison, Mercer, Nicholas, Powell, Scott,
and Woodford

Buffalo Trace District Ombudsman

Amanda Grooms
Buffalo Trace Area Development District,
P.O. Box 460, Maysville, KY 41056
Phone (606) 564-6894, 1-800-998-4347 Toll Free
agrooms@btadd.com

Counties: Bracken, Fleming, Lewis, Mason,
and Robertson

Cumberland Valley District Ombudsman

Arlene Gibson
Cumberland Valley Area Development District,
P.O. Box 1740, London, KY 40743
Phone (606) 864-7391, (606) 309-7600 work cell,
1-800-795-7654 Toll Free
agibson@cvadd.org
Counties: Bell, Clay, Harlan, Jackson, Knox,
Laurel, Rockcastle, and Whitley

FIVCO District Ombudsman

Amanda Hamilton
Legal Aid of the Bluegrass, 1616 Greenup Ave.,
Suite. 1, Ashland, KY 41101
Phone (606-780-2258)
ahamilton@lablaw.org
Counties: Boyd, Carter, Elliott, Greenup,
and Lawrence

Gateway District Ombudsman

Sara Waynne Caudill
Legal Aid of the Bluegrass, 546 East Main Street,
Suite 1, Morehead, KY 40351
Phone (606) 784-8921 ext. 2127, (606) 755-0006
direct line, 1-800-274-5863 Toll Free
wcaudill@lablaw.org
Counties: Bath, Menifee, Montgomery, Morgan,
and Rowan

Green River District Ombudsman

Heather Mullican
Green River Area Development District, 300
GRADD Way, Owensboro, KY 42301
Phone (270) 926-4433, 1-800-928-9094 Toll Free
heathermullican@gradd.com
Counties: Daviess, Hancock, Henderson,
McLean, Ohio, Union, and Webster

Kentucky River District Ombudsman

Sheila Cornett
Kentucky River Area Development District,
941 North Main Street, Hazard, KY 41701
Phone (606) 436-3158, (606) 560-0777 work cell,
1-800-928-5723 Toll Free
sheila@kradd.org
Counties: Breathitt, Knott, Lee, Leslie, Letcher,
Owsley, Perry, and Wolfe

Kentuckiana Regional Planning and Development

Agency (KIPDA) District Ombudsman
Natalie Brown-Radtke
Catholic Charities, 2911 South Fourth Street,
Louisville, KY 40208
Phone (502) 637-9786, 1-800-854-3233 Toll Free
nbrownradtke@archlou.org
Counties: Bullitt, Henry, Jefferson, Oldham,
Shelby, Spencer, and Trimble

Lake Cumberland District Ombudsman

Mandy Weston
Lake Cumberland Area Development District,
P.O. Box 1570, Russell Springs, KY 42642
Phone (270) 866-4200, 1-800-264-7093 Toll Free
mandy@lcadd.org
Counties: Adair, Casey, Clinton, Cumberland,
Green, McCreary, Pulaski, Russell, Taylor, and
Wayne counties

Lincoln Trail District Ombudsman

Beverly Broadus
Catholic Charities, 2911 South Fourth Street,
Louisville, KY 40208
Phone (502) 965-8304 work cell, 1-800-854-3233
Toll Free, (502) 637-9786 Office
bbroadus@archlou.org
Counties: Breckinridge, Grayson, Hardin, Larue,
Marion, Meade, Nelson, and Washington

Northern Kentucky District Ombudsman

Bethany Breckel
Northern KY Area Development District,
22 Spiral Drive, Florence, KY 41042
Phone (859) 283-8185, 1-866-766-2372 Toll Free
bethany.breckel@nkadd.org
Counties: Boone, Campbell, Carroll, Gallatin,
Grant, Kenton, Owen, and Pendleton

Pennyrile District Ombudsman

Cindy Tabor
Pennyrile Area Development District,
300 Hammond Drive, Hopkinsville, KY 42240
Phone (270) 886-9484, 1-800-928-7233 Toll Free
cindy.tabor@ky.gov
Counties: Caldwell, Christian, Crittenden, Hopkins,
Livingston, Lyon, Muhlenberg, Todd, and Trigg

Purchase District Ombudsman

Traci Lawrence

Purchase Area Development District,

P.O. Box 588, Mayfield, KY 42066

Phone (270) 251-6120, 1-877-352-5183 Toll Free

traci.lawrence@purchaseadd.org

Counties: Ballard, Calloway, Carlisle, Fulton,

Hickman, Graves, Marshall, and McCracken

ADULT PROTECTIVE SERVICES

Abuse Hotline 1-800-752-6200 or 1-877-597-2331

Adult Protective Services (APS) is the agency responsible for investigating complaints concerning abuse, neglect, and exploitation of vulnerable adults as prescribed in Kentucky law KRS 209. Reports can be filed online at <https://chfs.ky.gov/agencies/dcbs/dpp/apb/Pages/default.aspx>

OFFICE OF INSPECTOR GENERAL

Division of Health Care (502) 564-7963

The Office of Inspector General (OIG) also known as the Kentucky state survey agency is responsible for regulating and licensing long-term care facilities, as well as investigating complaints in those facilities. When facilities violate resident rights, provide poor care, fail to provide care, or fail to protect residents from predators, OIG can investigate and sometimes provide sanctions against the facility. Concerns about infection control and safe practices can be reported to OIG. For more information visit online at <https://chfs.ky.gov/agencies/os/oig/dhc/Pages/default.aspx>.

Complaint information should include:

- Was the complaint reported to the county Department for Community Based Services?
- Name of facility.
- Who is the complainant?
- What is the complaint? Describe the facts of the complaint situation.
- Who is/are the alleged perpetrator(s)?
- How was the resident affected?
- When did the complaint situation occur? Was it an isolated event or an ongoing situation? Include the date, time, time between different events.
- Where did it happen? In what unit or resident room?

- How did it happen? What was the sequence of events?
- Is a resident or the family of a resident involved?
- Who witnessed the complaint situation?
- Names of staff or other residents involved. Also, include other persons involved, such as volunteers or visitors.
- Was facility made aware of complaint?
- What actions were taken by the facility?

To report a complaint regarding a licensed long-term or health care facility or service, contact the Complaint Coordinator in the appropriate enforcement branch.

Western OIG Branch

Phone: 270-889-6052 Fax: 270-889-6089

E-Mail: WEB.Complaints-Reports@ky.gov

Northern OIG Branch

Phone: 502-595-4958 Fax: 502-595-4540

E-Mail: NEBComplaints-Reports@ky.gov

Southern OIG Branch

Phone: 606-330-2030 Fax: 606-330-2054

E-Mail: SEBComplaints-Reports@ky.gov

Eastern OIG Branch

Phone: 859-246-2301 Fax: 859-246-2307

E-Mail: EEB.Complaints-Reports@ky.gov

If you filed a complaint with Adult Protective Services, the Office of Inspector General, or your local law enforcement, you may be able to follow up to determine what action has been taken on your complaint. Be aware, however, that some agencies, due to procedural policies, may not be able to provide specific information to you. If you have filed a complaint, make note of which agency you contacted, who you spoke to, and what you were told. Kentucky Open Records law allows citizens to request records of complaints, investigations, reports, complaint resolutions, statements of deficiencies, Type A or B citations, allegations of compliance, plans of correction, continuous quality assessments and all other records pertaining to your facility.

KENTUCKY OFFICE OF THE ATTORNEY GENERAL

Patient Abuse Tip Line at 1-877-ABUSE TIP
(1-877-228-7384).

The Office of the Attorney General (OAG) houses Kentucky's Medicaid Fraud and Abuse Control Unit, which prosecutes fraud perpetrated by providers against the Medicaid program. In addition to Medicaid fraud, this unit also prosecutes crimes of abuse, neglect, and exploitation of long-term care residents.

QUALITY IMPROVEMENT ORGANIZATION (QIO)

Toll-free Phone Number: 888-317-0751,
Fax: 844-878-7921, Local Phone Number:
813-280-8256 <https://www.keproqio.com>

A Quality Improvement Organization (QIO) is a group of health quality experts, clinicians, and consumers organized to improve the quality of care delivered to people with Medicare. KEPRO is the Beneficiary and Family Centered Care QIO (BFCC-QIO) for Kentucky. KEPRO offers information regarding beneficiary complaints, hospital discharge and skilled service termination appeals.

CARE COMPARE

<https://www.medicare.gov/nursinghomecompare/search.html>

Care Compare has detailed information about every Medicare and Medicaid certified nursing home in the country. Medicare.gov contains quality of resident care and staffing information for more than 15,000 nursing homes around the country. Nursing homes provide skilled care to people who can't be cared for at home and need 24-hour nursing care. The information on Nursing Home Compare can help you learn: how nursing homes have performed on health and fire safety inspections; how the nursing home is staffed with nurses and other healthcare providers; and how well nursing homes care for their residents. Information on Nursing Home Compare is not an endorsement or advertisement for any nursing home and should be considered carefully.

THE KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF OMBUDSMAN AND ADMINISTRATIVE REVIEW COMPLAINT REVIEW BRANCH

Phone:(502) 564-5497, Toll Free:(800) 372-2973,
CHFS.Listens@ky.gov

The Complaint Review Branch reviews and works to resolve customer issues with programs in the Kentucky departments for Community Based Services, Child Support, Medicaid Services, Behavioral Health/Developmental and Intellectual Disabilities and Public Health. The branch issues reports to these agencies concerning complaint trends and patterns and recommends corrective action.



Long-Term Care Facilities in Northern Kentucky Boone County

Belmont Terrace Nursing and Rehabilitation Center

7300 Woodspoint Drive

Florence, KY 41042

859-371-5731

Boonesprings Transitional Care Center

10250 US Highway 42

Union, KY 41091

859-384-1200

Florence Park Care Center

6975 Burlington Pike

Florence, KY 41042

513-605-5000

Campbell Country

Carmel Manor

100 Carmel Manor Road

Fort Thomas, KY 41075

859-781-5111

Coldspring Transitional Care

300 Plaza Drive

Cold Spring, KY 41076

859-441-4600

Highland Spring of Fort Thomas

960 Highland Avenue

Fort Thomas, KY 41075

859-572-0660

St. Elizabeth Ft. Thomas, Skilled Nursing Facility

85 North Grand Avenue

Fort Thomas, KY 41075

859-572-3530

The Seasons at Alexandria

7341 East Alexandria Pike

Alexandria, KY 41071

859-694-4450

Carrollton County

Signature Healthcare of Carrollton Rehab and Wellness

1206 Eleventh Street

Carrollton, KY 41045

502-732-6683

Gallatin County

Gallatin Nursing and Rehab

499 Center Street

Warsaw, KY 41095

859-567-4548

Grant County

Grant Healthcare and Rehabilitation

201 Kimberly Lane

Williamstown, KY 41097

859-824-7803

Kenton County

Emerald Trace

3802 Turkeyfoot Rd

Elsmere, KY 41018

859-342-0200

Madonna Manor

2344 Amsterdam Road

Villa Hills, KY 41017

859-426-6400

Rosedale Green

4250 Glenn Avenue

Covington, KY 41015

859-431-2244

St. Elizabeth Edgewood, Skilled Nursing Facility

1 Medical Drive

Edgewood, KY 4017

859-301-9980

The Pavilion at Kenton

401 East 20th Street

Covington, KY 41014

859-283-6600

Village Care Center

2990 Riggs Avenue

Erlanger, KY 41018

859-727-9330

Villasprings of Erlanger

4220 Houston Road

Erlanger, KY 41018

859-727-6700

Woodcrest Nursing and Rehabilitation

3876 Turkeyfoot Road

Elsmere, KY 41018

859-342-8775

Owen County

Owenton Healthcare and Rehabilitation

905 Highway 127 North

Owenton, Ky 40359

502-484-5721

Pendleton County

River Valley Nursing Home

305 Taylor Street #402

Butler, KY 41006

859-472-2217

Notes

NKY Local Ombudsman

Bethany Breckel (859) 283-8185

Paula Wigger (859) 980-1984

Amy Morris (859) 980-1986

Ombudsman Line (859) 818-6730

22 Spiral Drive, Florence, KY 41042

Fax (859) 283-8178

nkyombuddy@nkadd.org

