



KENTUCKY VETERANS CENTERS

RESIDENT INFORMATION GUIDE



Kentucky Department of Veterans Affairs
Office of Kentucky Veterans Centers

INTRODUCTION

Welcome. As a Kentucky veteran you are invited to make this your home and are encouraged to take part in the activities of your choice. The staff and management are dedicated to your well-being. This handbook has been compiled to provide information about the rules, regulations and the facility for you and your family members. Hopefully, you will find answers to some of your questions and will benefit from the guidelines provided. Please do not hesitate to ask questions.

You are an individual entitled to live in a caring, safe, sanitary, and secure environment. Your individual rights, needs, and quality of life will be respected as outlined in the Bill of Rights policy of this booklet. You are assured that your health information will be kept confidential, you will be provided privacy, restorative, and rehabilitative care, freedom from restraint, and the opportunity to participate in all decisions related to your living and health care needs. The environment, reasonable accommodations, quality of life, efficient utilization of resources, and respect for individual dignity will guide care planning and administrative decisions. You are expected to adhere to the rules and regulations governing long term care and those of this facility which are based upon the needs and desires of the majority of the residents, available resources, and practicality.

MISSION STATEMENT

This facility is dedicated to promoting and maintaining a standard of excellence. Emphasis shall be placed on preservation of residents' rights and assisting the residents in maintaining the highest possible level of independence. This includes being treated as an individual with the right to privacy and preservation of dignity.

The facility shall adhere to all state and federal laws and regulations and strive to exceed minimum standards to assure the health, safety, and emotional well-being of the residents. Our staff and residents will work as a team to accomplish these goals.

In an effort to remain current on health care trends for the elderly, staff education shall be emphasized. The education shall be accomplished through in-service, both formal and informal, and by collaborating with other agencies for the purpose of sharing knowledge.

The services of volunteers shall be solicited and used to their fullest extent to assist the veterans in achieving their maximum potential of independence. Community involvement with the residents is encouraged.

ADMISSIONS CRITERIA

- 1) To be admitted to a Kentucky Veterans Center, the person shall:
 - a. Be a veteran;
 - b. Be disabled by reason of disease, wounds, age, or otherwise is in need of nursing care
 - c. Be a Kentucky resident as of the date of admission to a KY Veteran Center; and,
 - d. Have a military discharge that is not of a dishonorable nature.
- 2) A person shall not be eligible for admission if the person:
 - a. Has been diagnosed by a qualified health care professional as acutely mentally ill, as an acute alcoholic, as addicted to drugs, as continuously disruptive, or as dangerous to self or others;
 - b. Is ventilator dependent; or
 - c. Has needs that cannot be met by the Veterans' Center.
- 3) No individual shall be denied admission based on race, color, handicap, age, gender, religion, national origin, HIV status or inability to pay.
- 4) The actual charges assessed to a resident of this facility shall not exceed the cost of care which is provided.

TRANSFER AND DISCHARGE RIGHTS

The Kentucky Veteran Center will permit the resident to remain in the facility and not transfer or discharge the resident from the facility unless:

- 1) Transfer or discharge is necessary for the resident's welfare and the resident's needs cannot be met.
- 2) The transfer or discharge is appropriate if a resident's health has improved sufficiently so the resident no longer requires the services of the nursing facility.
- 3) The safety of individuals in the facility is endangered.
- 4) The health of individuals in the facility would otherwise be endangered.
- 5) The resident has failed, after reasonable and appropriate notice to pay for a stay at the facility.
- 6) The nursing home ceases to operate

DEMAND BILLING

You have the right to submit a demand bill to the Medicare intermediary if you dispute the facility's conclusion that billed services are not covered under the Medicare program. You received a copy of the demand billing policy at the time of your admission. Should you have any questions about demand billing or if you wish to request demand billing you should contact the Finance Manager.

DISCHARGE PLANNING

Residents with potential of discharge from this facility will be identified and provided with discharge planning by their treatment team.

Discharge potential will be reviewed as part of admission and on-going during care planning conferences, and more often if active discharge planning is in progress.

When discharge potential is assessed as reasonable for a resident, a comprehensive discharge plan will become a part of the interdisciplinary care plan.

CHARGES FOR ROOM AND CARE

There is a daily charge for room and care at this facility. If any changes in daily charges occur, residents and/or representatives will be notified 30 days in advance of effective date.

Residents will meet with accounting office personnel prior to admission for detailed information on specific charges.

FINANCES AND BILLING

To assure that a resident will have sufficient funds to make purchases of a personal nature, a resident personal fund may be established by/for each resident on or about the date on which the resident is admitted.

The amount held in the resident trust will be included during a review of assets by the Kentucky Medicaid Program.

If a resident does not have personal resources available, this facility will work with the resident and/or representative through volunteer groups to achieve an alternate contribution amount.

If a resident has given Power of Attorney (POA) to a person to handle financial or legal matters, or is under guardianship, copies of such documents must be maintained in the resident's administrative file.

This facility is certified for Medicare and Medicaid. Information regarding Medicare and Medicaid including how a resident may apply for these programs is provided at the time of admission or you may contact the financial office or your social worker at any time to ask questions or obtain information.

ROOM FURNISHINGS

Electrical appliances are prohibited. Since space is limited in our resident rooms, only a few personal items may be brought into the facility. If you need advice on what might be acceptable, you may check with Administration or Social Services.

This facility is not responsible for loss or breakage of residents' personal items.

ADDITIONAL CHARGES

Although every effort will be made to minimize resident costs, certain medical services will not be provided by this facility. Medical services obtained from sources other than this facility may result in a charge from that source to the resident. Among these medical services are:

1. X-rays
2. Dental work
3. Eyeglasses or other optometry services
4. Hospital services (Note: VA charges for services to certain veterans)
5. Ambulance Services
6. Hearing Aids
7. Podiatry services
8. Some specialized medications not on formulary
9. Specialized equipment
10. Therapy

If in doubt as to whether or not there will be a charge for a service, please inquire at the Administration Office.

ABSENCES

Policy

If a resident requires a hospital stay, or is out of the facility over the midnight hour, a resident may choose to hold a bed by signing a bed hold agreement. A resident who chooses not to request a bed hold or who chooses to discontinue a bed hold agreement may be readmitted to an available bed in the facility if the resident:

- a) Chooses to be readmitted; and
- b) Requires the services provided by the facility

Hospital Stays

The bed will be held for the first 14 consecutive days during which the veteran is admitted as a patient for any stay in a VA or other hospital (a hospital stay could occur more than once in a calendar year). Residents are required to continue paying the appropriate portion of their allowable income*.

Medicare does not pay for bed holds.

Medicaid pays 14 days of hospitalization per calendar year.

If a resident wishes to hold the bed privately after 14 days then the resident will be charged the daily rate.

Therapeutic Leave

The bed will be held for the first 12 days in a calendar year during which the veteran is absent for purposes other than receiving hospital care. Residents are required to continue paying the appropriate portion of their allowable income*.

Medicaid will pay for 10 days of therapeutic leave in a calendar year.

If a resident wishes to hold the bed privately after 12 days then the resident will be charged the daily rate.

*Residents classified as “mandatory” are excluded from this requirement.

TELEPHONE CALLS

A telephone can be placed in a room at the resident’s expense. The resident or his/her family should call the local telephone company to apply for telephone service. Telephones are available on each floor for the resident’s use. Long-distance calling cards are required for all long-distance phone calls when made on this facility’s phones.

ALCOHOLIC BEVERAGES/ NON-PRESCRIBED MEDICATIONS

Residents or others are not permitted to bring alcoholic beverages and unauthorized drugs or medication onto our premises. Offending residents will be subject to discharge from this facility.

Residents may be allowed to drink alcoholic beverages only upon written orders of the facility’s physicians and will be dispensed by nursing staff as ordered.

VISITATION POLICY

Routine visiting hours are from 9:00 a.m. to 9:00 p.m., although residents may have visitors of their choosing outside of the standard visiting hours. Visitors allowed during these hours include family members, guardians and friends. Per federal law, a resident or responsible party may also specify who can/cannot visit. Everyone must register at the front desk. In case of serious illness, family members are allowed to stay past visiting times as needed.

Visitors are limited to our common areas such as dining, living, recreation and lounge areas. Consent of the resident must be obtained before a visitor enters the room of the resident.

Visitors who become disruptive or interfere in any way with the operations of the facility will not be allowed to remain on the premises.

Please note: If a resident chooses to have a visitor after posted visiting hours it is requested it is advisable the visitor call ahead to the nursing station or security desk so that entry into the facility can be arranged.

SMOKING POLICY

Our smoking policy is designed to address state and federal regulations regarding smoking in long term care facilities and takes into account the safety, health and well-being of all residents.

Smoking is not permitted in areas other than those designated for smoking and at the designated smoking times. Non-compliance with our smoking policy is grounds for resident discharge.

GIFTS TO EMPLOYEES

State law prohibits our employees, on or off duty, from accepting gifts or gratuities of any kind from residents, potential residents, former residents or families. If you wish to recognize an employee or group of employees, you may give something, such as a basket of fruit or box of candy, to be placed in a common area for all staff to share. A donation to our VETERANS PROGRAM FUND or purchase of an item that can be donated for the benefit of all residents is also acceptable. A complimentary letter is always appreciated.

USE OF TELEVISIONS

Televisions are provided to each resident and each resident has a right to use it as long as it doesn't infringe upon another resident's rights.

The resident has a responsibility to be considerate of the rights of other residents by keeping the volume low and curtains pulled to prevent light and sound from disturbing roommates.

Although there are no restrictions for when televisions may be used, all residents are to use earphones between the hours of 10:00 p.m. and 6:00 a.m.

The televisions in the main living room and unit lounges may be used at any time.

RESIDENT COUNCIL

Our resident council meets monthly. The resident council has an elected chairman and vice chairman who address issues that residents may have regarding the facility. Council meetings may be attended by selected staff members at various times upon the request of members. All residents are invited to attend these meetings.

Family councils are encouraged in our facilities. Please contact your social worker to check the availability of a family council.

OXYGEN USE

Oxygen is provided via wall outlets in each resident's room. Residents in need of oxygen are asked to use the wall outlets rather than portable tanks when they are in their rooms. Portable oxygen tanks are provided for use outside the residents' rooms for activities such as meals, physical therapy, participation in activities within the facility, transportation to and from doctor's appointments and other facility-sponsored activities.

Portable oxygen tanks and gauges will be released for personal use such as family outings or passes for up to 24 hours. The resident or the resident's family is responsible for making arrangements for providing oxygen while the resident is away from the facility for other than facility-sponsored events in the event the outing or pass is for an extended period of time longer than 24 hours.

Residents must have a physician's order for oxygen and must adhere to the facility's smoking policy regarding oxygen.

MEDICAL CARE

The Center's attending physicians will direct the overall resident medical care. Upon admission, a primary physician will be assigned to each resident or you may elect your own attending physician so long as the physician has been credentialed by the facility.

After admission, a routine physical examination will be performed. The facility is sufficiently staffed to provide appropriate care and treatment for residents. You should consult with your attending physician prior to any "outside" medication intervention.

If hospital care is required during your stay at the facility, arrangements will be made upon an order by your attending physician. Cost of care while a patient is in any hospital will be the sole responsibility of the resident.

Transportation is provided for medical appointments arranged by this facility's staff. Medical appointments arranged by those other than the facility's staff will require that transportation be arranged by the resident or resident's family.

PHARMACY

Medications ordered by your attending physician will be provided and readily available to the residents of the facility.

All medications obtained by a resident while on leave from this facility must be turned in to the nursing staff upon his/her return to the facility for a physician review.

To ensure safety of visitors and other residents, medications cannot be kept at the bedside unless approved by your staff physician and care team.

Residents should give 96 hours notice to the nursing department when planning to go on leave. This will allow sufficient time for medications to be packaged and dispensed by the pharmacy.

COMPLAINTS/GRIEVANCES

If you feel your rights have been violated, you may discuss the situation with a representative from the resident council, physician, supervising nurse, social worker, state ombudsman or administrator. Grievance forms are available and when completed will be acted upon in a timely manner. You may obtain these forms at any nurse's station or from your social worker.

INTERDISCIPLINARY CARE PLAN CONFERENCE

Care plan conferences are held every three months and as needed to discuss the resident's care. Prior to each interdisciplinary care plan conference, the resident and/or next of kin, Power of Attorney, or guardian will receive written notification. The responsible individual or resident is encouraged to attend these meetings in order to promote the best possible care for the resident.

SERVICES

Dietary Services

The Center provides three meals a day that are designed to meet the resident's daily nutritional needs. Snacks are also provided. All residents are encouraged to eat their meals in the dining rooms. A registered dietitian supervises the total operation of the Dietary Department.

Barber/Beauty Services

A barber/beauty shop is available. These services are provided at no additional cost. The staff at this facility may refer a resident to the barber, or the resident may request the services of the barber as needed by contacting nursing personnel or Social Worker.

Laundry Services

Laundry services are provided for all residents. Laundry is picked up from the resident's room and returned promptly. The facility is not responsible for dry cleaning services; arrangements for dry cleaning services should be made by the resident or the resident's family.

All clothing will be labeled by our laundry services staff upon admission. All new clothing must be given to our staff to ensure proper labeling.

PET THERAPY

Some of our residents have been responsible pet owners and have a natural affinity for animals. Animal visits can be scheduled through the Activities Department.

VEHICLES

Resident vehicles are not permitted on the facility grounds.

ACTIVITY CALENDAR

A calendar is published monthly and contains current information and news.

LIBRARY

Library services are also available, providing newspapers, magazines, audio-visual materials, as well as numerous books. For residents who are unable to read standard print, large print books, recorded fiction and periodicals are available through the Library for the Blind. If you would like these services, please see a member of the Activity Staff or your Social Worker.

WIRELESS INTERNET ACCESS

This facility has a wireless system for Internet access. Residents may use this system with a personal computer or other device only after agreeing to the rules of KDVA's Policy Directive 17, Use of Wireless Internet Access at State Veterans Nursing Homes, and signing an individual agreement.

ACTIVITIES

This facility has a full time activity director who plans daily activities, which you are encouraged to attend. There is staff available to assist you in going to the activities of your choice.

A monthly activity schedule, printed in large type, is posted on each bulletin board and contains a schedule of events. Check this schedule for activities such as bingo, exercise sessions, movies, religious services, craft classes, outings, picnics, visiting groups and special parties.

VOLUNTEER SERVICES

Volunteers serve both residents and staff. Individuals, as well as several service-related groups from surrounding communities, come to the Center to volunteer their services and/or materials. A resident may wish to fill some of his/her leisure time helping in crafts, assisting other residents, or helping staff with various duties. The activity director will coordinate assignment of duties for volunteers.

Anyone wishing to become a volunteer should contact our Activities Director.

CHAPLAIN SERVICES

Chaplain Services exist to provide positive and meaningful religious experiences for residents during their stay at the facility. Chaplain Services seek to support residents in a positive and constructive manner.

Worship experiences or other religious activities are made available for residents of all faiths. The activity director will contact community clergy to schedule services as necessary.

RESIDENT CASH TRANSACTIONS

Our cashier's office is open for resident cash transactions at various times Monday through Friday except on holidays. The facility may make arrangement for residents to obtain cash from their resident trust after hours, on weekends and holidays should the need arise. Please consult the cashier's office for further information.

SOCIAL SERVICES

A social worker is available to each resident and will maintain contact with the resident and their family throughout their stay. Your social worker will assist you with any concerns you may have regarding your placement, care needs, adjustment, interactions with others, etc.

If you decide to visit with your family and/or to live independently, it is important that you notify your social worker as far in advance as possible.

Your social worker can assist you in making the necessary plans with people in your community or other agencies as appropriate.

Your social worker can also assist you/your family in obtaining information on possible funeral/burial benefits and burial honors that you may be eligible for. Any changes in addresses/phone numbers, contact persons, funeral home preferences, etc., should be relayed to your social worker as soon as possible so this change can be noted on your medical record.

ADVANCE DIRECTIVE INFORMATION

An Advance Directive is a written document that tells us how to provide care for you should you become unable to speak for yourself.

You have been given a booklet entitled **Advance Directives**; any questions you have concerning advance directives may be answered by a member of our staff.

ADVANCE DIRECTIVES POLICY

This facility will adhere to State and Federal Laws and Regulations on Advance Directives (KRS 311.000).

Procedure:

- 1 A written copy of this policy shall be provided to each resident and/or legal representative at the time of admission.
- 2 The social service staff (and others as directed by the administrator) shall meet with the resident and/or legal representative and explain Advance Directives.
- 3 An Advance Directive is a written instrument, such as a living will, durable power of attorney, or health care surrogate which states treatment preferences in accordance with KRS 311.000.
- 4 This facility shall not condition the provision of care or otherwise discriminate against an individual who chooses not to execute an Advance Directive.
- 5 This facility shall provide education in-services to the staff and community on Advance Directives.
- 6 The facility's staff will document in an individual's medical record whether or not an Advance Directive has been executed.
- 7 The resident and/or legal representative will date and sign a statement attesting that the Advance Directive and facility policy has been explained.
- 8 Social workers or designated others will assist those residents who elect to execute an Advance Directive.
- 9 Pursuant to law, no employee of the facility may witness the execution of an Advance Directive or serve in the capacity of health care surrogate.
- 10 An Advance Directive may be revoked by the resident at any time by:
 - a. A written declaration signed and dated by the grantor;
 - b. An oral statement in front of two witnesses, one of whom will be a health care provider.
 - c. Destruction of the document by the grantor or by some person in the presence of the grantor, who has been directed by the grantor.
- 11 We will provide nutrition and hydration to terminally ill patients who are alert and oriented. Such patients may make their own decision on whether to eat or drink.
- 12 The facility reserves the right to not withhold hydration and nutrition
- 13 The facility reserves the right to review, on a case by case basis, circumstances which may be questionable under our policy and/or KRS 311.000.

- 14 The Advance Directive Committee will review such cases and the decision of the Committee will be followed.
- 15 The Advance Directive Committee shall consist of the following facility staff and individuals:
 - a. administrator/assistant administrator
 - b. director
 - c. medical director of nursing
 - d. director of social services
 - e. primary care nurse
 - f. resident/resident's responsible party
 - g. concerned individual/family member
- 16 Any person may bring a situation of concern to any member of the Advance Directive Committee. That member shall be responsible for calling a committee meeting.
- 17 The Advance Directive Committee will meet on an "as required" basis.
- 18 The decision of the Advance Directive Committee will be given to the resident and/or legal representative.
- 19 The facility will assist the resident and/or legal representative in transfer to another facility, when necessary.
- 20 This transfer assistance may include:
 - a. Talking with the resident and/or legal representative concerning preferences for location or proximity of another facility;
 - b. Referral to another facility;
 - c. Help with transport arrangements;
 - d. Other measures deemed necessary to meet the wishes of the resident and/or legal guardian.

REHABILITATION SERVICES

Physical, Occupational and Speech Therapy services are offered to restore, improve, and maintain physical function. Each resident is encouraged to achieve and maintain the highest level of independence possible in performing activities of daily life. Licensed physical, occupational and speech therapists plan and supervise the treatment programs prescribed by the staff physician.

POWER AND MANUAL WHEELCHAIRS NOT BELONGING TO THE CENTER

The facility cannot accommodate electric chairs that require wet cell batteries. All needed repairs will be financially supported by the resident or their responsible party. If a personally owned wheelchair is no longer in good working condition, it is the resident's or his/her legal representative's responsibility to make the wheelchair safe and in good operating condition or remove it completely from the facility.

All residents using power wheelchairs must be evaluated by Rehabilitation Services and physicians for need and ability to operate in a safe manner. If evaluation deems the resident is unable to operate in a safe manner, approval to use a power wheelchair will not be granted.

Safety Rules: Courtesy to pedestrians must be displayed by wheelchair operators at all times. Intentional reckless driving will result in loss of the privilege of operating a wheelchair at the facility.

SAFETY

This facility will provide a safe environment for all residents. Due to potential safety hazards, residents are not permitted in the warehouse, shipping area, laundry area, maintenance area, boiler area, dietary area, employee dining area or any other area within support services including the lower level (basement area).

BILL OF RIGHTS POLICY

Upon admission, every resident shall receive an explanation of the **Resident Bill of Rights**. On or prior to admission, the resident's bill of rights will be read and explained to the resident and the resident's responsible party. The residents' signature or that of the responsible party will be obtained, showing understanding and acceptance of the bill of rights.

RESPONSIBILITIES

1. The resident is expected to follow the treatment plan recommended by the practitioner primarily responsible for his/her care. This includes following the instructions of health professionals on his/her treatment planning team as they carry out the coordinated plan of care and enforce the applicable rules and regulations governing the operation of the facility.
2. The resident is expected to accept responsibility for the consequences of his/her actions if he/she refuses treatment or does not follow instructions.
3. The resident has a responsibility to be considerate of the rights of other residents, our employees, volunteers, visitors and any other persons with whom he/she may have contact.
4. The resident has a responsibility to follow this facility's rules and regulations affecting resident care and conduct, especially health, fire safety and any other rules or regulations established for the welfare of all residents.
5. The resident has a responsibility to meet any legitimate financial obligation which has been agreed to prior to admission or adjusted at any later date with the knowledge and consent of the resident or his/her representative. Failure to meet this responsibility will result in discharge from the facility.
6. The resident has the responsibility to participate in maintaining safety for others. Behavior which may bring harm to others is not acceptable and will result in discharge from the facility.

NON-DISCRIMINATION POLICY

As a recipient of Federal financial assistance this center does not exclude, deny benefits to, or otherwise discriminate against any person on the basis of race, color, national origin, disability, or age in admission to, participation in, or receipt of the services and benefits under any of its programs and activities, whether carried out by the center or through a contractor or any other entity which the center does arrange to carry out its programs and activities.

This statement is in accordance with the provision of Title VI of the Civil Right Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Regulations of the U.S. Department of Health and Human Services issued pursuant to these statutes as Title 45 Code of Federal Regulations Parts 80, 84, and 91.