

Maryland Nursing Home Regulations:

Be Familiar with the Regulations in your State, Law Office of Jeffrey J. Downey

- Providing advocacy in Maryland, Virginia and Washington DC
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If you are selecting a nursing home for your loved one or if you already have a loved one in a facility, it's a good idea to have a working knowledge of your rights and the regulations which protect those rights.

Nursing homes are typically regulated by both the state and federal government. Federal regulations can be found under 42 C.F.R. 483.10, et seq. A link regarding nursing home residents' rights under federal law can be found [here](#).

Regulations are enforced through the nursing home's licensing agency. In Maryland that agency is called the Department of Health and the regulations are under COMAR 10.02-08 et seq. A violation of these regulations could create civil or administrative liability for the nursing facility.

Here in Maryland, Section 19-343 of the Health General Article provide Maryland nursing home residents with the basic right which can be found in COMAR (Code of Maryland Regulation) 10.07.09.08.

In Maryland, a resident has the right to:

- (1) Reside and receive services in a nursing facility with reasonable accommodations of individual needs and preferences, except when accommodations would endanger the health or safety of the resident or other residents;
- (2) Receive treatment, care, and services that are in an environment that promotes maintenance or enhancement of each resident's quality of life;
- (3) A dignified existence, self-determination, and communication with and access to individuals and services inside and outside the nursing facility;
- (4) Be free of interference, coercion, discrimination, or reprisal from the nursing facility when exercising the resident's rights;

(5) Be free from: (a) Physical abuse; (b) Verbal abuse; (c) Sexual abuse; (d) Physical or chemical restraints imposed for purposes of discipline or convenience; (e) Mental abuse; and (f) Involuntary seclusion;

(6) Choose an attending physician, if the physician agrees to abide by nursing facility policies and procedures, and the regulations in this chapter;

(7) Choose a pharmacy to obtain medications as set forth in COMAR 10.07.02.15B(3) and D(3);

(8) Be fully informed in advance about care and treatment, and of proposed changes in that care or treatment;

(9) Participate in planning care and treatment, or changes in care or treatment;

(10) Seek advice from the resident care advisory committee concerning the options for medical care and treatment for an individual with a life-threatening condition in accordance with Health-General Article, §19-370 et seq., Annotated Code of Maryland;

(11) Consent to or refuse treatment, including the right to accept or reject artificially administered sustenance in accordance with State law;

(12) Self-administer drugs if the interdisciplinary team determines that the practice is safe;

(13) Access the resident's records within 24 hours, excluding weekends and holidays, upon an oral or written request;

(14) Purchase copies of all or part of the resident's records upon request by giving 2 working days advance notice to the nursing facility;

(15) Approve or refuse the release of personal and clinical records to an individual outside the nursing facility unless:

(a) Otherwise provided by Health-General Article, §4-301 et seq., Annotated Code of Maryland; or (b) The release is required by law;

(16) Personal privacy, including:

(a) Confidentiality of personal records; and (b) Privacy in: (i) Medical treatment, and (ii) Personal care;

(17) Privacy in the resident's room, including the right to have nursing facility staff knock before entering the resident's room;

(18) Privacy in written communication, including the right to:

(a) Send and receive mail promptly without it being opened by anyone other than the resident, except when the resident requests assistance; and (b) Have access to stationery, postage, and writing implements at the resident's own expense;

(19) Reasonable access to the private use of a telephone;

(20) Meet or visit privately with any individual the resident chooses, subject to reasonable restrictions by the nursing facility on visiting hours and places;

(21) Visit or meet privately with the following, to whom the nursing facility shall provide reasonable access:

(a) A representative of the Secretary of the U.S. Department of Health and Human Services; (b) A representative of the Department; (c) The resident's personal physician; (d) A representative of the State Long-Term Care Ombudsman Program; (e) The agency responsible for advocacy and protection of developmentally disabled and mentally ill individuals in Maryland; or (f) Any other legal representative;

(22) Visit privately with the resident's spouse;

(23) Consent or deny consent to all visits, and may deny or withdraw consent at any time;

(24) Examine the results of the most recent federal and State surveys, including the annual survey and any subsequent complaint investigations, not otherwise prohibited by law, of the nursing facility and any plans of correction prompted by these surveys;

(25) Receive notice before the resident's roommate is changed and, to the extent possible, have input into the choice of roommate;

(26) Voice grievances, including those about treatment or care that is or fails to be furnished, and recommend changes in policies and services, to the staff or administrator of the nursing facility, the Licensing and Certification Administration, the Office on Aging, or any other person, without fear of reprisal, restraint, interference, coercion, or discrimination;

(27) Prompt efforts by the nursing facility to resolve grievances the resident may have, including those with respect to the behavior of other residents;

(28) Contact and receive information from agencies acting as client advocates;

(29) Refuse to perform services for the nursing facility;

(30) Perform services for the nursing facility if the resident chooses, only if:

(a) The nursing facility has documented the need or desire for work in the plan of care; (b) The plan specifies the nature of the services to be performed and whether the services are voluntary or paid; (c) Compensation for paid services is at or above prevailing rates; and

(d) The resident agrees in writing to the work arrangement described in the plan of care, and the contract is part of the resident's record;

(31) Share a room with the resident's spouse if both spouses consent and it is not medically contraindicated; and

(32) Participate in social, religious, and community activities if the activities do not interfere with the rights of other residents in the nursing facility.

(Editors Note – We can just link all 32 rights here in a PDF.

http://mhcc.maryland.gov/consumerinfo/longtermcare/documents/resident_rights.pdf)

This link takes you a list of Ombudsmen for assisted living and nursing home residents who need assistance in having problems addressed. All conversations are kept confidential unless permission is given to use a person's name. (Attached PDF)

Lastly, the nursing home must investigate and report all suspected violations and any injuries of unknown origin within 5 working days of the incident to proper authorities

If you or a loved one have suffered a personal injury or have suffered negligence as a result of inadequate treatment at a nursing home or living facility and want to pursue a claim, contact the Law Office of Jeffrey J. Downey, 8270 Greensboro Drive, Suite 810, McLean, VA, 22101, Phone 703-564-7318. On the web at www.jeffdowney.com.