

BAAS POLICY RELEASE (PR)	
PR NUMBER:	25-03
TO:	All Bureau of Adult and Aging Services (BAAS) Staff and Case Management Agency (CMA) Directors
FROM THE OFFICE OF:	Bureau Chief of Adult and Aging Services (BAAS), Wendi Aultman
SIGNATURE:	
SUBJECT:	Revisions To BAAS Form 3705a, Provider Notice (PN) For Guidance On The Individual Rights Poster and Participants Review of BAAS Form 3200
EFFECTIVE DATE:	Upon Release

### **SUMMARY**

This Policy Release (PR) releases revisions to BAAS Form 3705a, *The Rights of Individuals Receiving Choices for Independence (CFI) in the Community*, PN 25-03 which provides guidance to CFI providers for posting of the *Individual Rights* poster and the requirements for reviewing BAAS Form 3200, *How BAAS Can Help You*, or BAAS Form 3705a annually with participants.

### **BACKGROUND**

A temporary version of BAAS Form 3705a, *The Rights Of Individuals Receiving Choices for Independence (CFI) In The Community*, was recently released while we were awaiting a final version in collaboration with the University of New Hampshire, Institute of Disability. For more information, please reference PR 24-19.

### **POLICY AND PROCEDURE**

See attached PN 25-03.

### **DESCRIPTION OF REVISIONS MADE TO FORMS**

The following changes have been made to BAAS Form 3705a:

- BAAS Form 3705a, NHCP *The Rights of Individuals- CFI*
  - Now Contains a specific design consistent with NHCarePath booklets; and
  - Has been translated into Spanish.

### **IMPLEMENTATION**

This policy is effective upon release. The revised version of BAAS Form 3705a and its newly translated Spanish version are available for immediate use. All prior versions must be destroyed.

BAAS Form 3705a, and its Spanish version is available **electronically** on the DHHS website at [www.dhhs.nh.gov/forms-documents-0](http://www.dhhs.nh.gov/forms-documents-0) or [NHCarePath Partner Resources - Consumer Booklets | New Hampshire Department of Health and Human Services](#) and will also be available internally, for Department staff only, on the (N:) drive upon release of this PR.

Paper versions of BAAS 3705a are available for ordering by internal staff through the DHHS Warehouse/Logistics via the Quarterly Forms Order (QFO).

For implementation and distribution guidance related to BAAS Form 3200, *How BAAS Can Help You*, please see PR 24-21.

**FORMS INSTRUCTIONS**

<u>Remove and Destroy</u>	<u>Insert/Replace</u>
BAAS Form 3705a, <i>The Rights of Individuals Receiving Choices for Independence (CFI) in the Community</i> , PR #24-19	BAAS Form 3705a, <i>The Rights of Individuals Receiving Choices for Independence (CFI) in the Community</i> , PR #24-03
None	BAAS Form 3705a(Sp), <i>The Rights of Individuals Receiving Choices for Independence (CFI) in the Community</i> , PR #24-03

**DISTRIBUTION**

This PR and PN will be distributed according to the electronic distribution list for BAAS policy releases and will be available internally on the DHHS (N:) drive for staff to access and on the DHHS website at [Bureau of Adult and Aging Services \(BAAS\) General Memos \(GM\) and Policy Releases \(PR\) | New Hampshire Department of Health and Human Services \(nh.gov\)](#) for public access.

<b><u>Provider Notice (PN) Title:</u></b> Instructions for Posting the ‘Individual Rights Poster’ and Participants Review of BAAS Form 3705a, <i>Individual Rights Booklet</i> and BAAS Form 3200, <i>How BAAS Can Help You</i> .	<b>Number:</b> PR 25-03
	<b>Effective Date:</b> Upon Receipt
	<b>Reviewed By:</b> Kristina Ickes, Stephanie Russell, Joanna Braley, Thom O’Connor, Wendi Aultman and Brian Clark

**Purpose:** The purpose of this PN is to provide instruction for the posting of the attached ‘Individual Rights Poster’ and guidance relating to requirements for providers to review and provide participants with BAAS Form 3705a, *Individual Rights Booklet* and BAAS Form 3200, *How BAAS Can Help You*.

**Procedure**

Pursuant to He- E 310.03:

- Providers shall provide participants with BAAS Form 3200, *How BAAS Can Help You*, a pamphlet published by the Department of Health and Human Services (DHHS), that explains the participant’s rights under these rules in plain language and form, both verbally and in writing, on an annual basis. Meaningful access shall also be provided to participants with limited English proficiency.
- BAAS Form 3200, is available electronically and in paper format based on availability and participants choosing.
- BAAS Form 3705a, *Individual Rights Booklet*, is also available to participants electronically and in paper format, that provides more detailed information regarding individual rights, as well as additional resources.
- Every residential care facility and adult family care provider shall post the attached *Notice of Individual Rights* poster, set forth in these rules, as follows:
  - The notice (*Individual Rights Poster*) shall be posted continuously and conspicuously; and
  - Each residential care facility and adult family care provider residence shall have on the premises complete copies of rules (He-E 310) pertaining to rights of participants which are available for the participant, the participant’s guardian, the participant’s legal representative, and staff to review.
- Each provider shall provide participants meaningful time to review the participant’s rights and **encourage** the participant, the participant’s guardian, or the participant’s legal representative, to sign a statement acknowledging notification of the participant’s rights during the admission process.

<b><u>Responsibility:</u></b> Enrolled Choices for Independence (CFI) Residential and Adult Family Care Providers
<b><u>Resources:</u></b> He-E 310 Rights Of Individual Receiving Choices For Individuals In The Community
<b><u>Attachments:</u></b> He-E 310, Individual Rights Poster, BAAS Form 3705a, <i>Individual Rights Booklet</i> and BAAS Form 3200, <i>How BAAS Can Help You</i> .



Connections to better living

# THE RIGHTS OF INDIVIDUALS RECEIVING CHOICES FOR INDEPENDENCE (CFI) IN THE COMMUNITY



NHCarePath is New Hampshire's "front door" to quickly connect individuals to a full range of community services and supports.

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- Public Law 88-352 (78 Stat. 241). The Civil Rights Act of 1964
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- He-E 310: Rights under the Choices for Independence (CFI) program.
- RSA 151:21: New Hampshire’s Patients' Bill of Rights.
- RSA 161-F:43: Statutes protecting against abuse, neglect and exploitation of vulnerable adults.
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# 1. Introduction

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## 1.1 Overview of Your Rights as a Person Receiving Services

This section explains the basic rights you have when you receive services through the Choices for Independence (CFI) program. These rights are there to make sure you are treated with respect, are involved in decisions about your care, and can live as independently as possible.

Your complete rights under CFI can be found in the Administrative Rule, He – E 310: <https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/inline-documents/sonh/adopted-rule-2024-83-he-e-310.pdf>

**Example:** You have the right to be included in decisions about your care, to be treated with respect, and to have your choices honored.

## 1.2 What is the Choices for Independence (CFI) Program?

The CFI program provides Medicaid services to help adults with a chronic illness and/or disability stay in their home or community rather than moving to a nursing home. It offers support like home care, transportation, and help with daily activities.

**Example:** Mary, who has difficulty bathing and getting dressed, gets home care and help with grocery shopping and help with other housekeeping tasks so she can stay in her own house.



## 2. Definitions of Key Terms

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### 2.1 Abuse (RSA 161-F:43 II)

Abuse is when someone does something that harms or hurts another person on purpose.

**Emotional Abuse:** This includes actions like yelling, insulting, or threatening someone.

*Example:* When someone makes fun of or threatens you, which makes you feel scared or sad.

**Physical Abuse:** This happens when someone uses physical force to hurt you.

*Example:* When someone grabs or hits you.

**Sexual Abuse:** This involves any unwanted sexual contact.

*Example:* Someone touches you inappropriately without your consent.

### 2.2 Neglect (RSA 161-F:43 III)

Neglect is when someone doesn't give you the care you need, which can cause harm.

*Example:* When someone doesn't help you with their assigned tasks.

### 2.3 Exploitation (RSA 161-F:43 IV)

Exploitation happens when someone takes advantage of you or your money for their own benefit.

*Example:* When someone asks to borrow money but does not pay it back.

### 2.4 Informed Decision

An informed decision is when you understand all your options and the consequences, so you can make a choice that's right for you.

*Example:* Your case manager explains all your care options, and you choose what you want after learning the pros and cons.

### 2.5 Guardian (RSA 464-A)

A guardian is someone legally appointed by the court to make decisions for you if you are unable to make them yourself.

*Example:* If you can't make decisions due to illness, a guardian can help manage your care and finances.



**Power of Attorney:** A writing or other record that grants authority to an agent to act in the place of the principal, whether or not the term power of attorney is used. (RSA564-E:102 (15))

**Healthcare POA:** A document delegating to an agent the authority to make health care decisions executed in accordance with the provisions of this chapter. It shall not mean forms routinely required by health and residential care providers for admissions. (RSA 137-J)

**Financial POA:** A power of attorney that is not limited by its terms to a specified transaction or series of transactions, to a specific purpose, or to a specific asset or set of assets, or a power of attorney that grants an agent the authority to do any one or more of the acts described in RSA 564-E:201(a)

## 2.6 Case Management Agency

An organization that oversees case managers, who assist each CFI participant.

A case manager works for a case management agency and helps coordinate your care and makes sure you get the services you need.

*Example:* Your case manager sets up and ensures you receive your home health care services and advocates for your needs.

## 2.7 Provider

A provider is anyone who delivers services to you, such as a nurse, home care aide, or therapist. Some providers might not be CFI providers.

*Example:* Your home care provider helps you with personal care, homemaking tasks, and medication reminders.

## 2.8 Admissions agreement (RSA161-J:4)

A residential services agreement (admissions agreement) outlines what a resident can expect in an assisted living residence, an independent living retirement community, or housing for older persons. The agreement provides protections against evictions and identifies the cost of services to be provided.

*Example:* You must be made aware of and agree to the expectations of the place where you will be living.

### 3. Your Personal Rights in the CFI Program:

Your Personal Rights		
Right:	What that means:	Example:
<b>Respect and Dignity</b>	You have the right to be treated with respect and dignity at all times.	Someone speaks to you politely and listen to your concerns.
<b>Freedom from Abuse and Neglect</b>	You have the right to live free from abuse, neglect, and exploitation.	Someone cannot hurt you, ignore your needs, or take advantage of you.
<b>Privacy</b>	You have the right to privacy, both in your personal life and in your care.	Your caregiver shouldn't talk about you to others or post pictures/videos of you on social media without your permission.
<b>Making Your Own Decisions</b>	You have the right to make your own decisions about your care.	Based on your care plan, you can choose which providers you want and how your services are delivered (time of day, etc.).
<b>Personalized Care Plan</b>	You have the right to a care plan that fits your unique needs and preferences.	Your case manager works with you to create a plan that meets your needs, including how often you receive home care services.
<b>Participation in Community Life</b>	You have the right to stay involved in your community as much as you'd like.	You can participate in social activities or go to community events as you choose.
<b>Civil Rights, like Cultural and Religious Rights; Nondiscrimination (ADA, Civil Rights Act)</b>	You have the right to practice your culture and religion and to not be discriminated against based on things like race, gender, or disability.	A caregiver will respect your cultural and religious values.

## 4. Rights in Residential Care Facilities - CFI:

Rights in Residential Care Facilities		
Right:	What that means:	Example:
<b>Safe and Accessible Environment</b>	You have the right to live in a safe place that is easy for you to access.	The building has safety features like handrails and good lighting. You're able to maneuver around the building easily with an assistive device such as a cane, walker or wheelchair.
<b>Privacy in Your Room</b>	You have the right to privacy in your own room or living space.	Someone knocks before entering your room and asks permission to come in. You can lock your door if you choose.
<b>Personal Choices and Control</b>	You have the right to make choices about your daily life, such as when you wake up or what you eat.	You decide what time you want to have breakfast or what activities you want to do.
<b>Communication and Visitors</b>	You have the right to talk to others and have visitors when you want.	You can have friends or family visit you, and you can make phone calls in private.
<b>Privacy in Personal Care</b>	You have the right to privacy when receiving personal care, such as bathing or dressing.	Your caregiver respects your privacy when helping you bathe by ensuring the door is closed.

## 5. Service Rights - CFI:

Service Rights		
Right:	What that means:	Example:
<b>Adequate and Humane Services</b>	You have the right to receive care that meets your needs and be treated with respect.	Your paid caregivers are properly trained and provide you with the care you need.
<b>Person-Centered Planning</b>	You have the right to be the focus of your care plan, with your needs and preferences guiding the services you receive	Your care plan is tailored to you, not just a one-size-fits-all approach.
<b>Informed Consent</b>	You have the right to be fully informed and to give your permission before any service is provided.	You have the right to review and/or make changes to your care plan and make the decision as to whether you agree with it or not.
<b>Right to Refuse Services</b>	You have the right to refuse any service or treatment you do not want.	You're scheduled for assistance with a bath. When the caregiver arrives, you have the choice if you want to take a bath or not.
<b>Promoting Independence</b>	You have the right to receive services that help you live as independently as possible.	You get support with cooking, but you still decide what meals you want to have prepared for you.
<b>Medical Care</b>	You have the right to receive proper medical care as part of your services.	You have the right to choose your medical providers, and you can make changes at any time.
<b>Self-Direction</b>	You have the right to direct your own care, meaning you choose who provides your services and how they are delivered.	You can express your preference of who supports you and set your own schedule.
<b>Freedom from Restraint</b>	You have the right to be free from physical or chemical restraints unless they are medically necessary.	Someone cannot restrain you.

## 6. Managing Problems and Grievances - CFI

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If someone is dissatisfied or concerned with services being provided or a CFI provider's performance, a grievance can be filed.

**“Grievance”** means an expression of dissatisfaction or complaint by a participant or on behalf of a participant related to the department's administration of CFI or a provider's performance of CFI services regardless of whether action is requested.

If you have a problem or issue, you may:

### 6.1 Talk to Your Provider

If you have a problem, you have the right to talk to your service provider to resolve it.

*Example:* If a caregiver is always late, you can talk to the agency or ask for assistance to talk to the agency in order to fix the issue.

### 6.2 File a Grievance

You have the right to file a grievance if you feel your rights are being violated.

*Example:* If you feel you're being mistreated or are not getting the services that meet your identified needs, you can file a grievance with the agency providing services or with the state.

Individuals may file a grievance with the Bureau of Adult and Aging Services (BAAS) by one of the following:

- Emailing the grievance to [BAASQualityManagement@dhhs.nh.gov](mailto:BAASQualityManagement@dhhs.nh.gov)
- Mailing the grievance to:  
Bureau of Adult and Aging Services  
Attn: Quality Coordinator  
105 Pleasant Street, Concord, NH  
03301
- By telephone to 603-271-2240 or 1-844-ASK-DHHS (1-844-275-3447) ext. 12240
- By fax to 603-271-4643 Attn: Quality Coordinator.

#### Grievance Process:

The BAAS quality coordinator shall resolve grievances by one of the following:

- (1) An informal grievance resolution where the quality coordinator, the participant, and any other appropriate parties shall meet via telephone, internet video meeting software, or any other agreed upon method to address concerns identified in the grievance.
- (2) A formal grievance resolution where the quality coordinator shall investigate the grievance to determine the circumstances of the situation and submit a report to the BAAS bureau chief on the grievance and, if applicable, any systemic factors that played a role in the grievance; or
- (3) Make a referral to another agency as appropriate as described in He-E 310.11.

### 6.3 Keep Track of the Process

You have the right to know about the status of your grievance and what is happening.

Individuals reporting a grievance to BAAS shall be contacted within 5 business days of the receipt of the grievance.

Individuals shall be informed of changes to the status of the grievance until the complaint is resolved.

Grievance Outcome:

All appropriate parties involved in a grievance resolution shall receive a written summary stating the details of the grievance and the resolution made.

### 6.4 Other Resources

If you need help with a problem, you have the right to contact other resources like a Long-Term Care Ombudsman or Adult Protective Services.

***Example:*** You can call the Long-Term Care Ombudsman if you live in Assisted Living, and you feel your complaint is not being addressed.





## 7. Additional Rights Under New Hampshire Law (RSA 151:21 Patients' Bill of Rights)

In addition to your rights under the CFI waiver, you have additional protections under the Patients' Bill of Rights when you receive health care.

Additional Rights Under New Hampshire Law (RSA 151:21 Patients' Bill of Rights)		
Right:	What that means:	Example:
<b>Full Disclosure</b>	You have the right to be fully informed about your medical condition and care.	Your doctor explains your test results and the different treatment options.
<b>Planning</b>	You have the right to help plan your treatment and care.	You can work with your healthcare team to make healthcare decisions based on your preferences.
<b>Refusal of Treatment</b>	You have the right to refuse any treatment you don't want.	You decide not to have surgery after learning about the risks.
<b>Consent for Experimental Research</b>	You have the right to refuse experimental research and treatments.	Before joining a clinical trial, you sign a form saying you understand and agree to participate.
<b>Respect and Dignity</b>	You have the right to be treated with respect and dignity at all times.	Nurses and doctors treat you kindly and value your input during your doctor's visit or hospital stay.
<b>Privacy in Treatment and Personal Care</b>	You have the right to privacy during treatment and personal care.	Your medical exams and treatments are done in a private environment. Your wishes should be respected when receiving your care regarding privacy.
<b>Interpreter Services</b>	You have the right to free interpreter services if you need help communicating.	A translator helps you understand your doctor's instructions if you don't speak English fluently.

## 8. Legal Citations and Resources

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- Public Law 88-352 (78 Stat. 241): The Civil Rights Act of 1964
- Americans with Disabilities Act of 1990 (42 U.S.C. § 12101 et seq.)
- He-E 310: Rights under the CFI program:  
<https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/inline-documents/sonh/adopted-rule-2024-83-he-e-310.pdf>
- RSA 151:21: New Hampshire's Patients' Bill of Rights
- RSA 161-F:43: Statutes protecting against abuse, neglect, and exploitation of vulnerable adults
- 42 CFR 441.301(c)(4) & (c)(7): Federal regulations related to person-centered care and grievance procedures for Medicaid services
- Health Insurance Portability and Accountability Act (HIPAA):  
<https://www.hhs.gov/hipaa/index.html>
- RSA 161-J Assisted Living Residences, Independent Living Retirement Communities, And Housing for Older Persons



## 9. Important Contacts

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### 9.1 Bureau of Adult and Aging Services (BAAS)

Provides information and resources on aging and adult services.

Address: Main Building, 105 Pleasant Street, Concord, NH 03301

Email Address: [BAAS@dhhs.nh.gov](mailto:BAAS@dhhs.nh.gov)

Office Phone: [603-271-9203](tel:603-271-9203)

Alternate Phone: [1-800-351-1888](tel:1-800-351-1888)

<https://www.dhhs.nh.gov/programs-services/adult-aging-care>

### 9.2 Adult Protective Services (APS)

Investigates cases of abuse, neglect, or exploitation.

Address: Main Building, 105 Pleasant Street, Concord, NH 03301

Email: [APSCentralIntake@dhhs.nh.gov](mailto:APSCentralIntake@dhhs.nh.gov)

Phone: [603\) 271-7014](tel:603-271-7014)

Alternate Phone: [800\) 949-0470](tel:800-949-0470)

Fax: [603\) 271-4743](tel:603-271-4743)

Complete and online report:

<https://nheasy.nh.gov/#/aps/start>

<https://www.dhhs.nh.gov/reportconcern/adult-abuse>

### 9.3 Long-Term Care Ombudsman

Helps resolve complaints about long-term care services in assisted living homes and nursing homes.

Address: Brown Building, 129 Pleasant Street, Concord NH, 03301

Email Address: [OLTCO@dhhs.nh.gov](mailto:OLTCO@dhhs.nh.gov)

Phone: [603\) 271-4375](tel:603-271-4375)

Alternate Phone: [800\) 442-5640](tel:800-442-5640)

Fax: [603\) 271-5574](tel:603-271-5574)

TTY: [1-800-735-2964](tel:1-800-735-2964)

<https://www.dhhs.nh.gov/about-dhhs/long-term-care-ombudsman>

### 9.4 Department of Health and Human Services (Ombudsman Office)

Handles concerns and complaints about health and human services.

105 Pleasant Street, Concord, NH 03301

Email Address: [Ombudsman@dhhs.nh.gov](mailto:Ombudsman@dhhs.nh.gov)

Phone: [603\) 271-6941](tel:603-271-6941)

Alternate Phone: [800\) 852-3345](tel:800-852-3345)

Fax: [603\) 271-4632](tel:603-271-4632)

<https://www.dhhs.nh.gov/about-dhhs/office-ombudsman>

Link to RSA 564-E, Uniform Power of Attorney Act:

<https://www.gencourt.state.nh.us/rsa/html/NHTOC/NHTOC-LVI-564-E.htm>

Link to RSA 137-J, Written Directives for Medical Decision Making:

<https://www.gencourt.state.nh.us/rsa/html/NHTOC/NHTOC-X-137-J.htm>

BAAS Form 3705a  
PR 25-03  
01/25

# LOS DERECHOS DE LAS PERSONAS QUE RECIBEN CHOICES FOR INDEPENDENCE (CFI) EN LA COMUNIDAD



NHCarePath es la “puerta de entrada” de New Hampshire que conecta rápidamente a las personas a una amplia gama de servicios y apoyos comunitarios

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- Ley pública 88-352 (78, estatuto 241). Ley de Derechos Civiles de 1964
- Ley de Estadounidenses con Discapacidades de 1990 42 U.S.C. § 12101 y siguientes
- He-E 310: Derechos que otorga el programa Choices for Independence (CFI).
- RSA 151:21: Declaración de Derechos del Paciente de New Hampshire.
- RSA 161-F:43: Leyes de protección contra el abuso, la negligencia y la explotación de adultos vulnerables.
- 42 CFR 441.301(c)(4) & (c)(7): Regulaciones federales relacionadas con el cuidado centrado en la persona y los procedimientos de reclamo de los servicios de Medicaid.

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- 9.1 Oficina de Servicios para Adultos y Ancianos (BAAS)
- 9.2 Servicios de Protección de Adultos
- 9.3 Defensor del cuidado a largo plazo
- 9.4 Departamento de Salud y Servicios Humanos (Oficina del Defensor)

# 1. Introducción

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## 1.1 Descripción de sus derechos como persona receptora de los servicios

En esta sección, se explican los derechos básicos que tiene cuando recibe servicios a través del programa Choices for Independence (CFI). Estos derechos permiten garantizar que se lo/a trate con respeto, que participe en las decisiones sobre su cuidado y que pueda vivir de la forma más independiente posible.

Todos sus derechos del programa CFI se encuentran en la regla administrativa, He – E 310: <https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/inline-documents/sonh/adopted-rule-2024-83-he-e-310.pdf>

**Ejemplo:** Tiene derecho a que se lo/a incluya en las decisiones sobre su cuidado, a que se lo/a trate con respeto y a que se respeten sus opciones.

## 1.2 ¿Qué es el programa Choices for Independence (CFI)?

El programa CFI brinda servicios de Medicaid para ayudar a los adultos con una enfermedad crónica o una discapacidad a permanecer en su hogar o comunidad en lugar de trasladarse a una residencia. Ofrece apoyo, como atención domiciliaria, transporte y ayuda con las actividades diarias.

**Ejemplo:** Mary, que tiene dificultades para bañarse y vestirse, recibe atención domiciliaria y ayuda con las compras de comestibles y otras tareas domésticas para que pueda permanecer en su casa.



## 2. Definiciones de términos clave

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### 2.1 Abuso (RSA 161-F:43 II)

Abuso es cuando alguien hace algo que daña o hiere a otra persona a propósito.

**Abuso emocional:** Incluye acciones como gritar, insultar o amenazar a alguien.

*Ejemplo:* Cuando alguien se burla de usted o lo/a amenaza, y eso lo/a hace sentir miedo o tristeza.

**Abuso físico:** Esto ocurre cuando alguien utiliza la fuerza física para hacerle daño.

*Ejemplo:* Cuando alguien lo/a agarra o lo/a golpea.

**Abuso sexual:** Implica contacto sexual no deseado.

*Ejemplo:* Alguien lo/a toca de forma inapropiada sin su consentimiento.

### 2.2 Negligencia (RSA 161-F:43 III)

Negligencia es cuando alguien no le da los cuidados que necesita, lo cual puede causarle un daño.

*Ejemplo:* Cuando alguien no lo/a ayuda con las tareas asignadas.

### 2.3 Explotación (RSA 161-F:43 IV)

La explotación se produce cuando alguien se aprovecha de usted o de su dinero en beneficio propio.

*Ejemplo:* Cuando alguien pide dinero prestado, pero no lo devuelve.

### 2.4 Decisión informada

Una decisión informada es aquella en la que entiende todas sus opciones y las consecuencias, para poder tomar la decisión más adecuada.

*Ejemplo:* El administrador de casos le explica todas las opciones de cuidado y usted elige lo que quiere después de conocer las ventajas y las desventajas.

### 2.5 Tutor (RSA 464-A)

Un tutor es una persona designada legalmente por el tribunal para tomar decisiones en su nombre en caso de que usted no pueda tomarlas por sí mismo/a.

*Ejemplo:* Si no puede tomar decisiones debido a una enfermedad, un tutor puede ayudarlo/a a gestionar sus cuidados y sus finanzas.

**Poder notarial:** Un escrito u otro registro que faculta a un agente a actuar en lugar del mandante, se utilice o no el término "poder". (RSA564-E:102 (15))

**Poder notarial de atención médica:** Documento por el que se delega en un agente la facultad para tomar decisiones en materia de atención médica, otorgado de conformidad con las disposiciones del presente capítulo. No incluye los formularios exigidos habitualmente por los proveedores de atención médica y residencial para las admisiones. (RSA 137-J)

**Poder notarial financiero:** Un poder que no está limitado por sus términos a una transacción específica ni a una serie de transacciones, a un propósito específico, o a un activo específico o conjunto de activos, o un poder que otorga a un agente la facultad para hacer cualquiera o más de los actos que se describen en RSA 564-E:201(a).

## 2.6 Agencia de administración de casos

Organización que supervisa a los administradores de casos, que ayudan a cada participante del programa CFI.

El administrador de casos trabaja para una agencia de administración de casos, ayuda a coordinar sus cuidados y se asegura de que reciba los servicios que necesita.

*Ejemplo:* El administrador de casos organiza todo para garantizar que usted reciba los servicios de atención médica en el hogar y aboga por sus necesidades.

## 2.7 Proveedor

Un proveedor es cualquier persona que le presta servicios, como una enfermera, un auxiliar de atención en el hogar o un terapeuta. Puede que algunos proveedores no sean proveedores de CFI.

*Ejemplo:* Su proveedor de atención en el hogar le ayuda con el cuidado personal, las tareas domésticas y los recordatorios de su medicación.

## 2.8 Acuerdo de admisión (RSA161-J:4)

El acuerdo de servicios residenciales (acuerdo de admisión) describe lo que un residente puede esperar en una residencia de vida asistida, una comunidad de jubilados de vida independiente o una vivienda para personas mayores. El acuerdo establece protecciones contra desalojo y el costo de los servicios que se prestarán.

*Ejemplo:* Usted debe conocer y aceptar las expectativas del lugar donde va a vivir.

### 3. Sus derechos personales del programa CFI:

Sus derechos personales		
Derecho:	Lo que significa:	Ejemplo:
<b>Respeto y dignidad</b>	Tiene derecho a ser tratado con respeto y dignidad en todo momento.	Deben hablarle de forma educada y escuchar sus preocupaciones.
<b>Vivir libre de abuso y negligencia</b>	Tiene derecho a vivir libre de abusos, negligencia y explotación.	Nadie puede hacerle daño, ignorar sus necesidades ni aprovecharse de usted.
<b>Privacidad</b>	Tiene derecho a tener privacidad, tanto en su vida personal como en sus cuidados.	Su cuidador no debe hablar de usted a otras personas ni publicar fotos/videos suyos en las redes sociales sin su permiso.
<b>Tomar sus propias decisiones</b>	Tiene derecho a tomar sus propias decisiones sobre el cuidado que recibe.	De acuerdo con su plan de cuidado, puede elegir qué proveedores desea y cómo le prestarán los servicios (hora del día, etc.).
<b>Plan de cuidado personalizado</b>	Tiene derecho a un plan de cuidado que se adapte a sus necesidades y preferencias.	Su administrador de casos trabajará con usted para crear un plan que satisfaga sus necesidades, incluida la frecuencia con la que recibirá los servicios de atención en el hogar.
<b>Participar en la vida en comunidad</b>	Tiene derecho a participar en su comunidad todo lo que quiera.	Puede participar en actividades sociales o asistir a actos comunitarios cuando lo desee.
<b>Derechos civiles, como culturales y religiosos; no discriminación (ADA, Ley de Derechos Civiles)</b>	Tiene derecho a practicar su cultura y su religión y a no ser discriminado por motivos de raza, sexo o discapacidad.	El cuidador respetará sus valores culturales y religiosos.

## 4. Derechos en los centros residenciales de cuidados - CFI:

Derechos en los centros residenciales de cuidados		
Derecho:	Lo que significa:	Ejemplo:
<b>Seguridad y entorno accesible</b>	Tiene derecho a vivir en un lugar seguro y de fácil acceso.	El edificio cuenta con elementos de seguridad, como pasamanos y buena iluminación. Puede moverte fácilmente por el edificio con un dispositivo de ayuda, como un bastón, un andador o una silla de ruedas.
<b>Privacidad en la habitación</b>	Tiene derecho a la privacidad de su propia habitación o espacio vital.	Deben llamar antes de entrar en la habitación y pedir permiso para entrar. Si quiere, puede cerrar la puerta con llave.
<b>Opciones personales y control</b>	Tiene derecho a tomar decisiones sobre su vida diaria, como a qué hora se levanta o qué comer.	Usted decide a qué hora desayunar o qué actividades hacer.
<b>Comunicación y visitas</b>	Tiene derecho a hablar con otras personas y a recibir visitas cuando quiera.	Puede recibir visitas de amigos o familiares y hacer llamadas telefónicas en privado.
<b>Privacidad en el cuidado personal</b>	Tiene derecho a la privacidad cuando recibe cuidado personal, como bañarse o vestirse.	El cuidador debe respetar su privacidad cuando le ayuda a bañarse y asegurarse de que la puerta esté cerrada.



## 5. Derechos de servicio - CFI

Derechos de servicio		
Derecho:	Lo que significa:	Ejemplo:
<b>Servicios adecuados y dignos</b>	Tiene derecho a recibir cuidado de forma tal que se satisfagan sus necesidades y a ser tratado con respeto.	Los cuidadores remunerados están debidamente capacitados y le brindarán el cuidado que necesita.
<b>Planificación centrada en la persona</b>	Tiene derecho a ser el centro de su plan de cuidado, y a que los servicios que recibe se guíen por sus necesidades y preferencias.	El plan de cuidado debe adaptarse a usted, no ser generalizado.
<b>Consentimiento informado</b>	Tiene derecho a estar plenamente informado y a dar su autorización antes de que se le preste cualquier servicio.	Tiene derecho a revisar o modificar su plan de cuidado y decidir si está de acuerdo con él o no.
<b>Derecho a rechazar los servicios</b>	Tiene derecho a rechazar cualquier servicio o tratamiento que no desee.	Le programarán asistencia para el baño. Cuando llegue el cuidador, podrá elegir si quiere bañarse o no.
<b>Promover la independencia</b>	Tiene derecho a recibir servicios que le ayuden a vivir de la forma más independiente posible.	Lo ayudarán a cocinar, pero usted decide qué comidas quiere que le preparen.
<b>Cuidado médico</b>	Tiene derecho a recibir una atención médica adecuada como parte de sus servicios.	Tiene derecho a elegir a sus proveedores médicos. Puede hacer cambios en cualquier momento.
<b>Autodirección</b>	Tiene derecho a dirigir su propia asistencia, es decir, a elegir quién le presta los servicios y cómo se prestan.	Puede expresar sus preferencias sobre quién le presta asistencia y fijar sus horarios.
<b>Liberarse de una restricción</b>	Tiene derecho a no ser sometido a restricciones físicas o químicas, a menos que sean médicamente necesarias.	Nadie puede imponerle restricciones.

## 6. Gestión de problemas y quejas - CFI

En caso de estar insatisfecho/a o preocupado/a por los servicios prestados o por el desempeño de un proveedor de CFI, puede presentar una queja.

Una "**Queja**" es la expresión de insatisfacción o queja de un participante o en nombre de un participante en relación con la administración del departamento de CFI o el desempeño de un proveedor de servicios de CFI, independientemente de si se solicita una acción.

Si tiene un problema o una inquietud, haga lo siguiente:

### 6.1 Hable con su proveedor

Si tiene un problema, tiene derecho a hablar con su proveedor de servicios para resolverlo.

*Ejemplo:* Si el cuidador siempre llega tarde, puede hablar con la agencia o pedir ayuda para hablar con esta a fin de solucionar el problema.

### 6.2 Presente una queja

Si considera que se están vulnerando sus derechos, tiene derecho a presentar una queja.

*Ejemplo:* Si cree que es víctima de maltrato o que no está recibiendo servicios que satisfagan sus necesidades identificadas, puede presentar una queja ante la agencia que le brinda los servicios o ante el estado.

Las personas pueden presentar una queja ante la Oficina de Servicios para Adultos y Ancianos (BAAS) por uno de los siguientes medios:

- Por correo electrónico:  
[BAASQualityManagement@dhhs.nh.gov](mailto:BAASQualityManagement@dhhs.nh.gov)
- Por correo postal:  
Bureau of Adult and Aging Services  
Attn: Quality Coordinator  
105 Pleasant Street, Concord, NH  
03301
- Por teléfono al 603-271-2240 o al 1-844-ASK-DHHS (1-844-275-3447) ext. 12240
- Por fax al 603-271-4643 At.:  
Coordinador de calidad.

#### Proceso de queja:

El coordinador de calidad de BAAS resolverá las quejas de una de las siguientes maneras:

- (1) Una resolución informal de la queja, en la que el coordinador de calidad, el participante y otras partes pertinentes se reunirán por teléfono, mediante un programa de videoconferencias por Internet o por cualquier otro método acordado, para abordar los problemas identificados en la queja.
- (2) Una resolución formal de la queja, en la que el coordinador de calidad investigará para determinar las circunstancias de la situación y presentará un informe al jefe de la oficina de BAAS sobre la queja y, si corresponde, sobre cualquier factor sistémico que haya influido en la queja.
- (3) Derivación de la queja a otra agencia, según corresponda, tal como se describe en He-E 310.11.

### 6.3 Haga un seguimiento del proceso

Tiene derecho a conocer el estado de su queja y lo que está sucediendo.

Las personas que presenten una queja ante BAAS serán contactadas en un plazo de 5 días hábiles contados desde la recepción de la queja.

Se mantendrá informada a la persona de los cambios en el estado de la queja hasta que se resuelva.

Resultado de la queja:

Todas las partes involucradas en la resolución de la queja recibirán un resumen por escrito en el que se expondrán los detalles de la queja y la resolución adoptada.

### 6.4 Otros recursos

Si necesita ayuda para resolver un problema, tiene derecho a contactarse con otros recursos, como el defensor del cuidado a largo plazo o los Servicios de Protección de Adultos.

**Ejemplo:** Puede llamar al defensor del cuidado a largo plazo si vive en una residencia asistida y cree que su queja no está siendo atendida.



## 7. Otros derechos que otorga la Ley de New Hampshire (Declaración de Derechos del Paciente, RSA 151:21)

Además de sus derechos del CFI, cuenta con otras protecciones en virtud de la Declaración de Derechos del Paciente cuando recibe atención médica.

<b>Otros derechos que otorga la Ley de New Hampshire (Declaración de Derechos del Paciente, RSA 151:21)</b>		
<b>Derecho:</b>	<b>Lo que significa:</b>	<b>Ejemplo:</b>
<b>Divulgación total</b>	Tiene derecho a estar plenamente informado sobre su estado de salud y el cuidado que recibe.	Su médico le explicará los resultados de las pruebas y las distintas opciones de tratamiento.
<b>Planificación</b>	Tiene derecho a colaborar en la planificación de su tratamiento y atención.	Usted puede colaborar con su equipo de atención médica para tomar decisiones acordes a sus preferencias.
<b>Rechazo del tratamiento</b>	Tiene derecho a rechazar cualquier tratamiento que no desee.	Usted puede optar por no operarse tras conocer los riesgos.
<b>Consentimiento para una investigación experimental</b>	Tiene derecho a rechazar la investigación y los tratamientos experimentales.	Antes de participar en un ensayo clínico, deberá firmar un formulario en el que declare que comprende y acepta participar.
<b>Respeto y dignidad</b>	Tiene derecho a ser tratado con respeto y dignidad en todo momento.	Las enfermeras y los médicos deben tratarlo/a con amabilidad y valorar su opinión durante la visita al médico o la estadía en el hospital.
<b>Privacidad en el tratamiento y el cuidado personal</b>	Tiene derecho a la privacidad de su tratamiento y cuidado personal.	Sus exámenes médicos y tratamientos se realizarán en un entorno privado. Cuando recibe atención, sus deseos deben respetarse en lo que respecta a la privacidad.
<b>Servicios de interpretación</b>	Tiene derecho a servicios de interpretación gratis si necesita ayuda para comunicarse.	Un traductor lo/a ayudará a entender las indicaciones del médico si no habla inglés con fluidez.

## 8. Citaciones legales y recursos

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- Ley pública 88-352 (78, estatuto 241): Ley de Derechos Civiles de 1964
  - Ley de Estadounidenses con Discapacidades de 1990 (42 U.S.C. § 12101 y siguientes)
  - He-E 310: Derechos que otorga el programa CFI:  
<https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/inline-documents/sonh/adopted-rule-2024-83-he-e-310.pdf>
  - RSA 151:21: Declaración de Derechos del Paciente de New Hampshire
  - RSA 161-F:43: Leyes de protección contra el abuso, la negligencia y la explotación de adultos vulnerables
  - 42 CFR 441.301(c)(4) & (c)(7): Regulaciones federales relacionadas con el cuidado centrado en la persona y los procedimientos de reclamo de los servicios de Medicaid
  - Ley de Responsabilidad y
- Portabilidad del Seguro de Salud (HIPAA): <https://www.hhs.gov/hipaa/index.html>
- RSA 161-J Residencias de vida asistida, comunidades de jubilados de vida independiente y viviendas para personas mayores



## 9. Contactos importantes

### 9.1 Oficina de Servicios para Adultos y Ancianos (BAAS)

Ofrece información y recursos sobre los servicios para adultos y ancianos.

Dirección: Main Building, 105 Pleasant Street, Concord, NH 03301

Dirección de correo

electrónico: [BAAS@dhhs.nh.gov](mailto:BAAS@dhhs.nh.gov)

Teléfono de la oficina: 603-271-9203

Número de teléfono alternativo:

1-800-351-1888

<https://www.dhhs.nh.gov/programs-services/adult-aging-care>

### 9.2 Servicios de Protección de Adultos (APS)

Investiga casos de abuso, negligencia o explotación.

Dirección: Main Building, 105 Pleasant Street, Concord, NH 03301

Correo electrónico:

[APSCentralIntake@dhhs.nh.gov](mailto:APSCentralIntake@dhhs.nh.gov)

Teléfono: (603) 271-7014

Número de teléfono alternativo:

(800) 949-0470

Fax: (603) 271-4743

Informe completo en línea

<https://nheasy.nh.gov/#/aps/start>

<https://www.dhhs.nh.gov/reportconcern/adult-abuse>

### 9.3 Defensor del cuidado a largo plazo

Ayuda a resolver quejas sobre los servicios de cuidado a largo plazo en residencias de vida asistida y residencias de ancianos.

Dirección: Brown Building, 129 Pleasant Street, Concord NH, 03301

Dirección de correo

electrónico: [OLTCO@dhhs.nh.gov](mailto:OLTCO@dhhs.nh.gov)

Teléfono: (603) 271-4375

Número de teléfono alternativo:

(800) 442-5640

Fax: (603) 271-5574

TTY: 1-800-735-2964

<https://www.dhhs.nh.gov/about-dhhs/long-term-care-ombudsman>

### 9.4 Departamento de Salud y Servicios Humanos (Oficina del Defensor)

Maneja las inquietudes y quejas sobre la salud y los servicios humanos.

105 Pleasant Street, Concord, NH 03301

Dirección de correo

electrónico: [Ombudsman@dhhs.nh.gov](mailto:Ombudsman@dhhs.nh.gov)

Teléfono: (603) 271-6941

Número de teléfono alternativo:

(800) 852-3345

Fax: (603) 271-4632

<https://www.dhhs.nh.gov/about-dhhs/office-ombudsman>

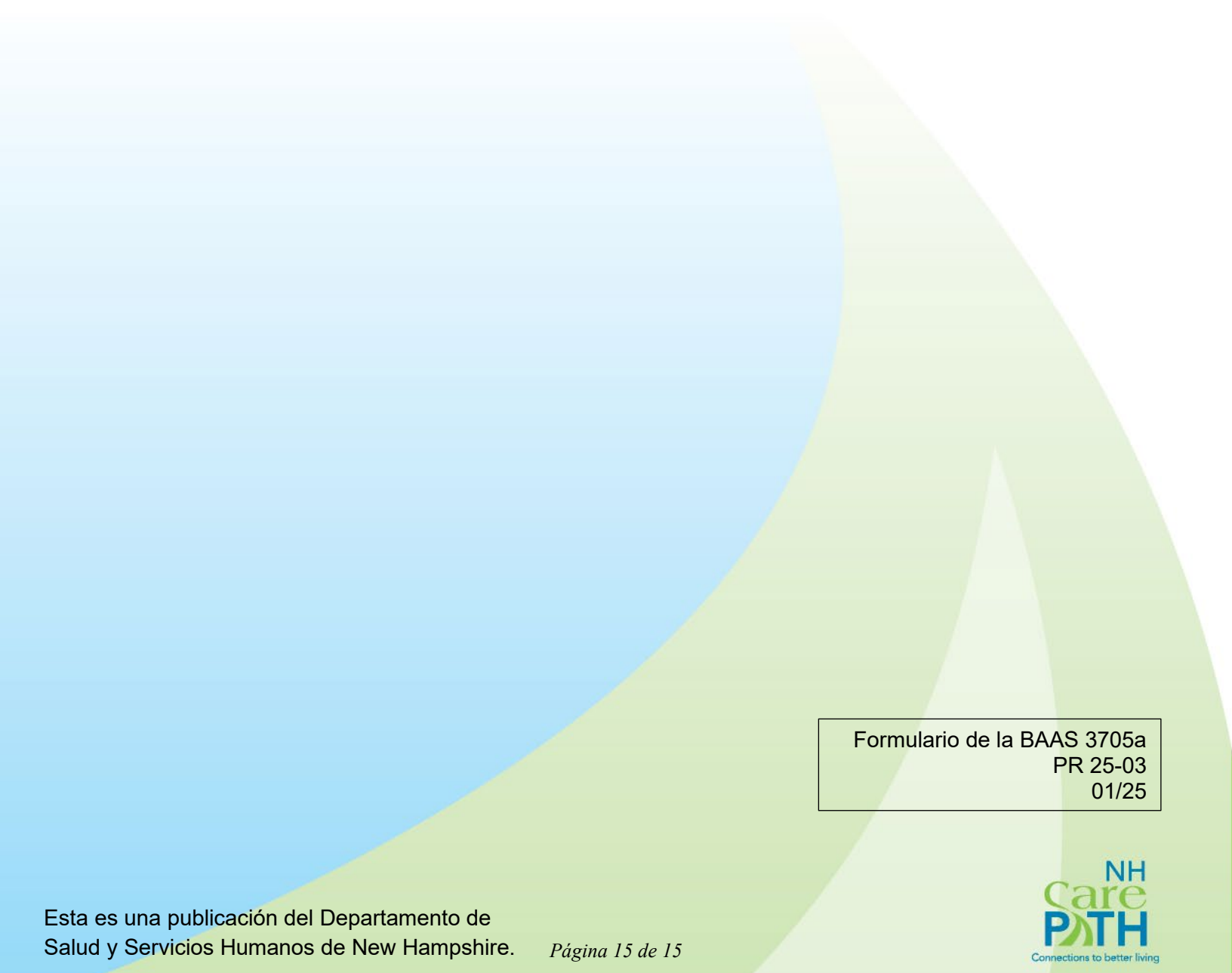
Enlace a RSA 564-E, Ley Uniforme de Poder Notarial:

<https://www.gencourt.state.nh.us/rsa/html/NHTOC/NHTOC-LVI-564-E.htm>

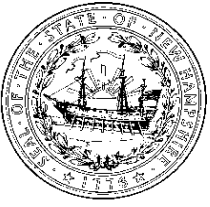
Enlace a 137-J, Directivas escritas para la toma de decisiones médicas:

<https://www.gencourt.state.nh.us/rsa/html/NHTOC/NHTOC-X-137-J.htm>





Formulario de la BAAS 3705a  
PR 25-03  
01/25



**NH DEPARTMENT OF HEALTH AND HUMAN SERVICES (DHHS)  
DIVISION OF LONG TERM SUPPORTS AND SERVICES (DLTSS)  
BUREAU OF ADULT AND AGING SERVICES (BAAS)**

## **PARTICIPANTS RIGHTS**

### **He-E 310.04 Fundamental Rights.**

- (a) All participants shall be entitled to any legal right to which all citizens are entitled.
- (b) The legal rights protected shall include, at a minimum:
  - (1) The right to freedom of religious preference and practice, the right to be free from engaging in any religious activity, and the right to receive reasonable assistance in attending places of worship;
  - (2) The right to register to vote and to vote, if eligible, in public elections and, as provided in 52 USC 10508, the right to receive assistance from the person of the participant's choice in registering to vote and in voting;
  - (3) The following civil rights, unless a court has determined that a participant is legally incapacitated pursuant to RSA 464-A and the participant's guardian or the participant's legal representative has been appointed to make certain decisions:
    - a. The right to manage affairs;
    - b. The right to contract;
    - c. The right to hold professional, occupational, or motor vehicle driver's licenses;
    - d. The right to marry or to obtain a divorce; and
    - e. The right to make a will;
  - (4) The right to not be discriminated against in any manner because of race, color, sex, religion, national origin, age, disability, marital status, sexual orientation, gender identity, or degree of disability as provided in state and federal laws, title VII of the civil rights act of 1964, section 504 of the rehabilitation act of 1973, the age discrimination act of 1975, the Americans with Disabilities Act of 1990, and the provisions of certain block grants, including:
    - a. Access to auxiliary aids needed by the participant;
    - b. Services which are accessible to participants of limited English proficiency; and
    - c. Service locations that are accessible and meet the participant's physical, sensory, intellectual, or emotional needs;
  - (5) The right to legal remedies including the right to petition for and receive the benefits of a writ of habeas corpus and to seek any other remedy provided by law; and
  - (6) The right to receive copies of the participant's care plans, as defined in He-E 310.02 (i) and (u) .

### **He-E 310.05 Personal Rights.**

- (a) Participants and applicants shall be treated with dignity and respect at all times.
- (b) Participants shall be free from abuse, neglect, and exploitation including, at a minimum, personal or financial exploitation.
- (c) Participants shall have the right to privacy.
- (d) Participants shall have the right to be free from coercion.
- (e) Any participant who uses or has used CFI provider services shall have the right to confidentiality of all information and records.
- (f) Access to records shall be as follows:
  - (1) Information pertaining to a participant shall be released to the participant and the participant's guardian or the participant's legal representative upon request including all information provided by third parties;
  - (2) Information shall be released to any person or organization that has obtained the written consent of the participant, the participant's guardian, or the participant's legal representative;
  - (3) In cases where a participant, the participant's guardian, or the participant's legal representative of the participant requests copies of the record, such copies shall be made available free of charge; and
  - (4) Information regarding the medical treatment of a participant shall be released to law enforcement officials or health facility personnel if necessary to address an emergency situation involving danger to the participant's health or safety, but only specific information necessary to the relief of the emergency may be released without the participant's, the participant's guardian, or the participant's legal representative's consent.

(g) In accordance with RSA 329:31, RSA 329-B:29, and RSA 330-A:35, when a participant has made a serious threat of physical violence against a clearly identified or reasonably identifiable victim or victims, or a serious threat of substantial damage to real property, the following shall be obligated to make reasonable efforts to disclose the threat to the third party or law enforcement officials:

- (1) Physicians licensed pursuant to RSA 329;
- (2) Psychologists licensed pursuant to RSA 329-B; and
- (3) Persons licensed pursuant to RSA 330-A and those who work under the supervision of the mental health practitioner.

#### **He-E 310.06 Service Rights.**

(a) Participants shall have the right to adequate and humane service and treatment, including:

- (1) The right to quality services including services provided in accordance with licensing requirements and rules adopted by the department in He-P 800 and other applicable rules of state agencies and services provided in keeping with generally accepted clinical and professional standards;
- (2) The right to receive services in the participant's community that will promote the participant's full community participation;
- (3) The right to a person-centered planning process that:
  - a. Is directed by the participant to the maximum extent possible;
  - b. Is intended to identify the strengths, capacities, preferences, needs, and desired outcomes of the participant;
  - c. Includes individuals freely chosen by the participants;
  - d. Provides information and support to assist the participant to direct the process and to make informed choices and decisions;
  - e. Reflects cultural considerations of the participant and is conducted in plain language and form and provides meaningful access to participants with limited English proficiency;
  - f. Occurs at times and location of convenience to the participant;
  - g. Includes strategies for solving conflict or disagreement within the process;
  - h. Offers informed choices to the participant, the participant's guardian, or legal representative, if applicable, regarding services and supports;
  - i. Involves the family of the participant or other individuals the participant chooses in enabling and assisting the participant to identify and access a personalized mix of paid and non-paid services and supports that will assist the participant to achieve personally defined outcomes in the most integrated setting appropriate to the needs of the participant;
  - j. Includes identification of the participant's planning goals to achieve personal outcomes in collaboration with those whom the participant has identified;
  - k. Results in a comprehensive care plan that identifies the strengths, capacities, preferences, and desired outcomes of the participant and other services the participant is to receive to achieve those outcomes; and
  - l. Includes a method for the participant to request changes to the comprehensive care plan;
- (4) The right to a comprehensive care plan developed, reviewed, and revised in accordance with He-E 805;
- (5) The right to services in accordance with the time frame set in the comprehensive care plan;
- (6) The right to services in a setting that is:
  - a. Based on the participant's needs and preferences;
  - b. Chosen by the participant, the participant's guardian, or the participant's legal representative from among options that are identified in the comprehensive care plan and include non-disability specific settings; and
  - c. Integrated in, and supportive of full access of participants to, the greater community, including opportunities to:
    1. Seek employment and work in competitive integrated settings;
    2. Engage in community life;
    3. Control schedules and activities;
    4. Control personal resources; and
    5. Live in a private unit in a residential setting, based on personal resources available for room and board;
- (7) The right to be informed of all significant risks, benefits, and alternative services and to give consent to any service or referral following an informed decision;
- (8) The right to refuse any service;
- (9) The right to be fully informed of one's own diagnosis and prognosis by the participant's health care provider;
- (10) The right to voluntary participation in services, as decided by the participant, the participant's guardian, or the participant's legal representative, including the right to seek changes in services or providers at any time or to withdraw from any form of service or from a provider;

(11) The right to services which promote independence including services which shall be directed toward:

- a. Eliminating or reducing the participant's need for continued services; and
- b. Promoting the ability of the participant to function at the participant's highest capacity and as independently as possible;

(12) The right to receive or to refuse medical care, medications, and treatment;

(13) The right to consultation and second opinion at the participant's own expense the consultative services of private physicians, psychologists, dentists, or other health practitioners;

(14) The right to choose, or have the participant's guardian or the participant's legal representative choose, one or more person(s) to be present at any person-centered planning meeting or other service planning meeting;

(15) The right to freedom from restraint except when allowed by RSA 151:21; and

(16) The right to freely and privately communicate with others, including:

- a. The right to send and receive unopened and uncensored written and electronic
- b. The right to have access to telephones and to be allowed to make and to receive telephone calls that do not interfere with other residents;
- c. The right to receive and to refuse to receive visitors; and
- d. The right to engage in social, recreational, and religious activities including the provision of regular opportunities for participants to engage in such activities.

(b) Individuals applying for CFI shall have the right to evaluation to determine an the individual's eligibility for services and the type of services needed and to determine which provider agencies are most suited to provide the services needed.

(c) Providers shall, whenever possible, maximize the decision-making authority of the participant.

(d) Providers may restrict access by participants to various locations to:

- (1) Ensure the privacy or safety of participants; or
- (2) Comply with provisions of law and orders of court.

(e) These rules shall not require any prescribing practitioner to administer treatment contrary to such professional's clinical judgment.

#### **He-E 310.08 Rights of Participants in Residential Care Facilities.**

(a) In addition to the foregoing rights, participants living in residential care facilities shall also have the following rights:

- (1) The right to a safe, sanitary, and humane living environment;
- (2) The right to settings that are physically accessible to the participant;
- (3) The right to freely and privately communicate with others, including:
  - a. The right to send and receive unopened and uncensored written and electronic correspondence;
  - b. The right to have access to telephones and to be allowed to make and to receive telephone calls that do not interfere with other residents;
  - c. The right to receive and to refuse to receive visitors; and
  - d. The right to engage in social, recreational, and religious activities including the provision of regular opportunities for participants to engage in such activities;
- (4) The right to privacy in the participant's sleeping or living unit, including the following:
  - a. The right to courtesies such as knocking on closed doors before entering and ensuring privacy for telephone calls, electronic communications, and visits;
  - b. The right to entrance doors lockable by the participant with only appropriate staff having keys to doors;
  - c. The right to receive visitors of the participant's choosing at any time;
  - d. The right to opportunities for personal interaction in a private setting except that any conduct or activity which is illegal shall be prohibited;
  - e. The right to receive personal care in private; and
  - f. The right to be free from searches of their persons and possessions except in accordance with applicable constitutional and legal standards;
- (5) The right to participant choice, including the following:
  - a. The right to keep and wear their own clothes;
  - b. The right to space for personal possessions;
  - c. The right to keep and to read materials of the participant's own choosing;
  - d. The right to keep and spend the participant's own money;
  - e. The right to be compensated for any work performed and the right not to work;
  - f. The right to have a choice of one's room if multiple rooms are available;
  - g. The right to have a choice of one's roommate when bedrooms are shared;

h. The right to furnish and decorate one's sleeping or living unit within the limits of the lease or other agreement; and

i. The freedom and support to control one's own activities and schedules, including but not limited to access to food at any time; and

(6) The right to be reimbursed for the loss of any money held in safekeeping by the residential care facility.

(b) Nothing in He-E 310.08 shall require a residential care facility to have policies governing the behavior of the residents.

(c) Participants, the participant's guardians, and the participant's legal representatives shall have the right to be informed in writing of any residential care facility policies prior to admission to the residential care facility including a copy of the residential services agreement and standard disclosure summary.

(d) Residents shall have the right to participate in the development and modification of any house policies and be provided the opportunity to review the house policies at least annually.

(e) Residential care facility policies shall be in conformity with He-E 310.

(f) Residential care facility policies shall be reviewed annually for compliance with He-E 310 in connection with department site visits.

(g) Any modification to (a)(4) or (5) above shall be supported by a specific assessed need and documentation described in (h) below.

(h) A residential care facility shall only make modifications pursuant to (g) above by documenting in the provider care plan the following:

(1) The specific and individualized assessed need with a description of the condition that is directly proportionate to the need;

(2) Positive interventions and supports used prior to any modification to the provider care plan;

(3) Less intrusive methods of meeting the need that have been tried unsuccessfully;

(4) A method for the regular collection and review of data to measure the ongoing effectiveness of the modification with established timelines for periodic review to determine whether the modification is still necessary or can be terminated;

(5) Informed consent of the participant, the participant's guardian, or the participant's legal representative; and

(6) An assurance that the interventions and supports will not cause harm to the participant.

#### **He-E 310.09 CFI Grievances**

(a) A grievance may be made by any person including but not limited to:

(1) A participant;

(2) A participant's guardian or family member;

(3) An employee, contractor, consultant, or volunteer for the department; or

(4) An employee, contractor, consultant, or volunteer for a CFI provider.

(b) Individuals may file a grievance with the bureau of adult and aging services (BAAS) by:

(1) Emailing the grievance to [BAASQualityManagement@dhhs.nh.gov](mailto:BAASQualityManagement@dhhs.nh.gov);

(2) Mailing the grievance to:

**Bureau of Adult and Aging Services**

**Attn: Quality Coordinator**

**105 Pleasant Street, Concord, NH 03301**

(3) By telephone to 603-271-2240; or

(4) By fax to 603-271-4643, Attn: Quality Coordinator.

(c) Individuals reporting a grievance to BAAS shall be contacted within 5 business days of the receipt of the grievance.

(d) Reporters shall be informed of changes to the status of the grievance until the complaint is resolved.

(e) BAAS shall resolve each grievance and provide notice as expeditiously as the participant's health condition requires pursuant to 42 CFR 441.301(c)(7)(v)(A).

(f) BAAS shall provide assistance to individuals filing a grievance including ensuring accessibility to individuals with disabilities and individuals with limited English proficiency.

(g) Anonymous grievances shall be accepted, but follow up information will not be provided to a grievant who fails to provide contact information.

(h) The name and identity of a grievant shall be kept confidential during the resolution of the grievance unless the grievant requests that the grievant's name be shared.

(i) Nothing in this section shall affect a participant's right to file an appeal pursuant to He-C 200.