



IMPORTANT FACTS

Daughters of Sarah Nursing Home is committed to providing a homelike atmosphere for our residents. It is our hope that residents will become comfortable and at ease in our home.

However, there are various realities of skilled nursing care that are necessary for you to review and understand prior to admission to ensure that unrealistic expectations are not set. Please document your acknowledgement of each issue by initialing on the space provided. Among the issues for review are:

FALLS / RESTRAINTS/SIDE RAILS

Daughters of Sarah strives to be a restraint-free facility and side rail free. Consistent with maintaining the dignity and promoting the highest quality of life for our residents, interventions other than restraints may be used. Daughters of Sarah offers a protective environment, but cannot provide 24-hour one-on-one constant supervision and care to prevent residents from falling.

Initials _____

FAMILY INVOLVEMENT WITH CARE

Family members are encouraged to play an active role in the care of their loved one. However, while family members are an important part of the decision-making process, they cannot direct care or medications. This includes changing or discontinuing medications and switching to generic medications. Family members are also asked not to provide or supply their loved ones with medications, treatments, medical supplies, or prescriptions. Daughters of Sarah provides all of these services to residents including consulting, auditing, consistency of quality, and training of staff through specific vendors and providers.

Initials _____

MAINTAINING SAFE AND APPROPRIATE LIVING ENVIRONMENTS

Daughters of Sarah reserves the right to transfer a resident to another room on the same or different nursing pavilion in order to appropriately meet his/her needs. Furthermore, Daughters of Sarah reserves the right NOT to readmit residents to the same room they occupied prior to hospitalization if deemed necessary. The need to maintain the safety and well-being of residents and staff could necessitate a room change, referral or transfer to an appropriate alternative care facility, and/or the implementation of clinically appropriate medications or interventions.

Initials _____

STAFFING

It is Daughters of Sarah's intention that all units of our facility are staffed in a manner appropriate to the needs of its residents. Guidelines from various entities (the Center for Medicaid / Medicare Services, the New York State Department of Health, the American Association of Homes and Services for the Aged, etc.) are considered when determining appropriate staffing levels. Periodically, unavoidable circumstances will occur that may cause staffing to fall below these levels. During these times, Daughters of Sarah will implement alternatives to augment neighborhood staffing. It is our intention that all care givers will be Daughters of Sarah staff members. However, if circumstances dictate, Daughters of Sarah will be supplemented with agency staff

Initials _____

OUTSIDE FOOD

Daughters of Sarah upholds Jewish tradition of strict kosher dietary law. All public areas of the Nursing Home are considered Kosher. Only food items prepared in the Home's kitchens may be consumed in these areas. Resident bedrooms, however, are considered non-Kosher areas. Food from home or outside vendors must be brought directly to resident rooms, and must only be eaten on paper/plastic plates and with plastic silverware. Such food from home or outside vendors may not be served or eaten in any of the dining rooms or other public areas of the Nursing Home.

Initials _____

OUT-OF-HOUSE APPOINTMENTS/ROUTINE CARE

In order for Daughters of Sarah to facilitate an out-of-house medical appointment or Routine Cancer Screening Tests, such as Chest X-rays, Mammograms, Colonoscopy, Pap Smears, Prostate and Stool we must have a medical order from a member of our medical staff exams are done only at the discretion of the Attending Physician. Families/Residents who schedule appointments on their own, are responsible for all aspects of the appointment: scheduling, transportation and personnel to accompany the resident, and billing. If a resident has a medically ordered consultation through Daughters of Sarah, and the family intends on accompanying the resident, however, they may schedule the appointment for their convenience. They need to inform our staff of the appointment time, and we will arrange transportation if the family requests. The appointment, once made, cannot be changed for family convenience. If the family is no longer available to accompany the resident, Daughters of Sarah will make arrangements for a companion.

Initials _____

SMOKING POLICY

Daughters of Sarah Nursing Center maintains a smoke-free environment.

Initials _____

SECURITY CAMERAS

The safety and security of the Residents, Guests and Employees of the Daughters of Sarah Campus is of the utmost priority. Daughters of Sarah utilizes a closed-circuit camera system with digital video recording software as part of the safety and security program for the facility.

Initials _____

INSURANCE COVERAGE

Daughters of Sarah will make every attempt to have skilled services authorized by your insurance carrier. If insurance carriers fail to authorize or pay for services, you hereby agree to pay for such charges in full. This includes residents who choose to remain in the nursing center past their planned discharge date. Insurance coverage received during your rehabilitation program will not continue to pay for services, and you will be responsible for private pay charges for your continued care.

Initials _____

RESIDENT MAIL

Daughters of Sarah requests you have business mail sent to a responsible party and not to the nursing home. If mail is received here, you authorize Daughters of Sarah to open mail for the purpose of determining to whom it needs to be redirected. Such mail includes, but is not limited to, items from: Social Security, Medicare, Medicaid, Veterans' Administration, Physicians and Hospitals.

Initials _____

SURVEY RESULTS

Results of the most recent Federal and State Surveys of the Nursing Center (including any Statements of Deficiencies, Plans of Correction in effect, and enforcement actions) are located on the wall across the hall from the Office of the Director of Activities, on the right hand side of the entrance to the Village Square. They are available for viewing at any time.

Initials _____

NOTICE OF PRIVACY PRACTICES

By initialing this form, the undersigned acknowledges that they have received a copy of the Daughters of Sarah "Notice of Privacy Practices". If any questions arise with respect to any of our Privacy Practices, you should contact the Daughters of Sarah Privacy Officer at the facility.

Initials _____

I acknowledge that I have reviewed and understand these matters.

Name of Resident or Resident Representative

Signature

Date: _____