

## 42 CFR 483.15

This section is current through the March 20, 2014 issue of the Federal Register

**Code of Federal Regulations > TITLE 42-- PUBLIC HEALTH > CHAPTER IV-- CENTERS FOR MEDICARE & MEDICAID SERVICES, DEPARTMENT OF HEALTH AND HUMAN SERVICES > SUBCHAPTER G-- STANDARDS AND CERTIFICATION > PART 483-- REQUIREMENTS FOR STATES AND LONG TERM CARE FACILITIES > SUBPART B-- REQUIREMENTS FOR LONG TERM CARE FACILITIES**

**§ 483.15 Quality of life.**

A facility must care for its residents in a manner and in an environment that promotes maintenance or enhancement of each resident's quality of life.

- (a) Dignity. The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality.
- (b) Self-determination and participation. The resident has the right to--
  - (1) Choose activities, schedules, and health care consistent with his or her interests, assessments, and plans of care;
  - (2) Interact with members of the community both inside and outside the facility; and
  - (3) Make choices about aspects of his or her life in the facility that are significant to the resident.
- (c) Participation in resident and family groups.
  - (1) A resident has the right to organize and participate in resident groups in the facility;
  - (2) A resident's family has the right to meet in the facility with the families of other residents in the facility;
  - (3) The facility must provide a resident or family group, if one exists, with private space;
  - (4) Staff or visitors may attend meetings at the group's invitation;
  - (5) The facility must provide a designated staff person responsible for providing assistance and responding to written requests that result from group meetings;
  - (6) When a resident or family group exists, the facility must listen to the views and act upon the grievances and recommendations of residents and families concerning proposed policy and operational decisions affecting resident care and life in the facility.
- (d) Participation in other activities. A resident has the right to participate in social, religious, and community activities that do not interfere with the rights of other residents in the facility.
- (e) Accommodation of needs. A resident has the right to--
  - (1) Reside and receive services in the facility with reasonable accommodation of individual needs and preferences, except when the health or safety of the individual or other residents would be endangered; and
  - (2) Receive notice before the resident's room or roommate in the facility is changed.

**(f) Activities.**

- (1) The facility must provide for an ongoing program of activities designed to meet, in accordance with the comprehensive assessment, the interests and the physical, mental, and psychosocial well-being of each resident.
- (2) The activities program must be directed by a qualified professional who--
  - (i) Is a qualified therapeutic recreation specialist or an activities professional who--
    - (A) Is licensed or registered, if applicable, by the State in which practicing; and
    - (B) Is eligible for certification as a therapeutic recreation specialist or as an activities professional by a recognized accrediting body on or after October 1, 1990; or
  - (ii) Has 2 years of experience in a social or recreational program within the last 5 years, 1 of which was full-time in a patient activities program in a health care setting; or
  - (iii) Is a qualified occupational therapist or occupational therapy assistant; or
  - (iv) Has completed a training course approved by the State.

**(g) Social Services.** (1)--The facility must provide medically-related social services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.

- (2) A facility with more than 120 beds must employ a qualified social worker on a full-time basis.
- (3) Qualifications of social worker. A qualified social worker is an individual with--
  - (i) A bachelor's degree in social work or a bachelor's degree in a human services field including but not limited to sociology, special education, rehabilitation counseling, and psychology; and
  - (ii) One year of supervised social work experience in a health care setting working directly with individuals.

**(h) Environment.**

The facility must provide--

- (1) A safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible;
- (2) Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior;
- (3) Clean bed and bath linens that are in good condition;
- (4) Private closet space in each resident room, as specified in § 483.70(d)(2)(iv) of this part;
- (5) Adequate and comfortable lighting levels in all areas;
- (6) Comfortable and safe temperature levels. Facilities initially certified after October

- 1, 1990 must maintain a temperature range of 71-81[degrees]F; and  
 (7) For the maintenance of comfortable sound levels.

<b>Statutory Authority</b>
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**AUTHORITY NOTE APPLICABLE TO ENTIRE PART:**

Secs. 1102, 1128I and 1871 of the Social Security Act ([42 U.S.C. 1302](#), 1320a-7j, and 1395hh).

<b>History</b>
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[56 FR 48871, Sept. 26, 1991, as amended at 57 FR 43924, Sept. 23, 1992]

**Annotations**

<b>Case Notes</b>
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**LexisNexis® Notes**

Case Notes Applicable to Entire Part

Administrative Law : Separation of Powers : Jurisdiction

Civil Procedure : Jurisdiction : Subject Matter Jurisdiction : Federal Questions : General Overview

Governments : Legislation : Statutory Remedies & Rights

Healthcare Law : Actions Against Facilities : Facility Liability : Nursing Facilities

Public Health & Welfare Law : Healthcare : Services for Disabled & Elderly Persons : Care Facilities :

Public Health & Welfare Law : Healthcare : Services for Disabled & Elderly Persons : Care Facilities :

Public Health & Welfare Law : Social Security : Medicaid : General Overview

Public Health & Welfare Law : Social Security : Medicare : General Overview

Public Health & Welfare Law : Social Security : Medicare : Providers : Types : Hospitals

Public Health & Welfare Law : Social Security : Medicare : Providers : Types : Nursing Facilities

Public Health & Welfare Law : Social Services : General Overview

**Case Notes Applicable to Entire Part**[Part Note](#)**Administrative Law : Separation of Powers : Jurisdiction**

[Talbot v. Lucy Corr, 1996 U.S. Dist. LEXIS 8886](#) (ED Va Mar. 19, 1996).

**Overview:** *A patient could not pursue a claim under [42 U.S.C.S. § 1983](#) against a nursing home for alleged failure to comply with [42 U.S.C.S. 1395i\(3\)\(c\)](#) because she first was required to exhaust the administrative remedies established by Virginia, pursuant to [42 C.F.R. § 488 et seq.](#)*

- The Secretary of the Department of Health and Human Services has promulgated rules and regulations implementing the Nursing Home Reform Law. These regulations address, among other things: residents rights ([42 C.F.R § 483.10](#)); admission, transfer, and discharge rights ([42 C.F.R § 483.12](#)); resident behavior and facility practices ([42 C.F.R. § 483.13](#)); quality of life ([42 C.F.R. § 483.15](#)); and quality of care ([42 C.F.R. § 483.25](#)). To aid in implementing these requirements and procedures, the administrative scheme includes a state appeals process for transfers and discharges of patients. [42 C.F.R. § 431.205](#). The regulations provide that the state agency responsible for maintaining an appeals system must provide information regarding hearing procedures, notice to the beneficiary of the action

that the skilled nursing facility intends to take, the reasons for the intended action, and the specific regulations that require that action. Moreover, a hearing is required for any resident who believes that a skilled nursing facility has transferred or discharged her in error. [42 C.F.R. § 431.220](#). *Go To Headnote*

### **Civil Procedure : Jurisdiction : Subject Matter Jurisdiction : Federal Questions : General Overview**

[Schneller v. Crozer Chester Med. Ctr., 2010 U.S. App. LEXIS 14966](#) (3rd Cir July 20, 2010), writ of certiorari denied by *131 S. Ct. 1684, 179 L. Ed. 2d 617, 2011 U.S. LEXIS 2222, 79 U.S.L.W. 3538 (U.S. 2011)*.

*Overview:* A district court's dismissal of an individual's case was affirmed since the district court lacked diversity jurisdiction and federal question jurisdiction; *inter alia*, the individual's § 1983 claim failed, he did not have a private right of action under the Assisted Suicide Funding Restriction Act of 1997 or the federal controlled substances laws.

- [42 C.F.R. §§ 483.10, 483.13, 483.15](#), and [483.25](#) do not provide a basis for jurisdiction pursuant to *28 U.S.C.S. § 1331* because they merely set forth the requirements that a facility must meet in order to qualify to participate in Medicare and Medicaid; they do not confer a private cause of action. *Go To Headnote*

### **Governments : Legislation : Statutory Remedies & Rights**

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[Harmony Court v. Leavitt, 2006 U.S. App. LEXIS 20283](#) (6th Cir Aug. 1, 2006) (Unpublished).

*Overview:* Substantial evidence supported civil monetary penalties against a skilled nursing facility, which violated several federal regulations in caring for its residents.

- [42 C.F.R. § 483.15\(g\)\(1\)](#) requires a facility to provide medically-related social services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident. *Go To Headnote*

### **Public Health & Welfare Law : Healthcare : Services for Disabled & Elderly Persons : Care Facilities :**

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for alleged failure to comply with [42 U.S.C.S. 1395i\(3\)\(c\)](#) because she first was required to exhaust the administrative remedies established by Virginia, pursuant to 42 C.F.R. § 488 et seq.

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[Rafael Convalescent Hosp. v. Shalala, 1998 U.S. Dist. LEXIS 5657](#) (ND Cal Apr. 15, 1998).

*Overview: Nursing home had no property in gaining financial rewards from Medicare and Medicaid programs; to obtain those benefits, the nursing home had to agree to conduct a training program only if its nursing care met certain federal standards.*

- Under regulations adopted by the United States Department of Health and Human Services in July 1995, nursing facilities are required to provide for an ongoing program of activities designed to meet the interests and the physical, mental and psychological well-being of each resident. [42 C.F.R. § 483.15\(f\)\(1\)](#). *Go To Headnote*

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<b>Research References &amp; Practice Aids</b>
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#### **NOTES APPLICABLE TO ENTIRE CHAPTER:**

[PUBLISHER'S NOTE: Nomenclature changes affecting Chapter IV appear at [45 FR 53806](#), Aug. 13, 1980; [50 FR 12741](#), Mar. 29, 1985; [50 FR 33034](#), Aug. 16, 1985; [51 FR 41338](#), Nov.

14, 1986; 53 FR 6634, Mar. 2, 1988; 53 FR 47201, Nov. 22, 1988; 56 FR 8852, Mar. 1, 1991; [66 FR 39450, 39452](#), July 31, 2001; [67 FR 36539, 36540](#), May 24, 2002; [77 FR 29002, 29028](#), May 16, 2012.]

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