

(II) KEEP THE RESIDENT'S WRITTEN ACKNOWLEDGMENT OF THAT CONSENT.

(3) THE RESIDENT SHALL RECEIVE INFORMATION ABOUT THE RELATIONSHIP OF THE FACILITY TO OTHER HEALTH CARE INSTITUTIONS IF THE INFORMATION RELATES TO THE CARE OF THE RESIDENT.

(4) THE RESIDENT SHALL RECEIVE REASONABLE CONTINUITY OF CARE, INCLUDING INFORMATION AS TO THE AVAILABILITY OF PHYSICIANS AND TIMES FOR MEDICAL APPOINTMENTS.

(E) CONFIDENTIAL INFORMATION.

(1) ANY CASE DISCUSSION, CONSULTATION, EXAMINATION, OR TREATMENT OF A RESIDENT OF A FACILITY:

(I) IS CONFIDENTIAL;

(II) IS TO BE DONE DISCREETLY; AND

(III) IS NOT OPEN TO AN INDIVIDUAL WHO IS NOT INVOLVED DIRECTLY IN THE CARE OF THE RESIDENT UNLESS THE RESIDENT PERMITS THE INDIVIDUAL TO BE PRESENT.

(2) EXCEPT AS NECESSARY FOR THE TRANSFER OF A RESIDENT FROM THE FACILITY TO ANOTHER HEALTH CARE INSTITUTION OR AS REQUIRED BY LAW OR A THIRD PARTY PAYMENT CONTRACT, THE PERSONAL AND MEDICAL RECORDS OF A RESIDENT ARE CONFIDENTIAL AND MAY NOT BE RELEASED WITHOUT THE CONSENT OF THE RESIDENT TO ANY INDIVIDUAL WHO:

(I) IS NOT ASSOCIATED WITH THE FACILITY;

OR

(II) IS ASSOCIATED WITH THE FACILITY, BUT DOES NOT HAVE A DEMONSTRATED NEED FOR THE INFORMATION.

(F) SPOUSES.

IF IT IS FEASIBLE TO DO SO AND NOT MEDICALLY CONTRAINDICATED, SPOUSES WHO ARE BOTH RESIDENTS OF THE FACILITY SHALL BE GIVEN THE OPPORTUNITY TO SHARE A ROOM.

(G) GRIEVANCES.

A RESIDENT OF A FACILITY ALONE OR WITH OTHER INDIVIDUALS IS ENTITLED TO PRESENT ANY GRIEVANCE OR RECOMMEND A CHANGE IN A POLICY OR SERVICE TO THE STAFF OR ADMINISTRATOR OF THE FACILITY, THE STATE OFFICE ON AGING, OR ANY OTHER PERSON, WITHOUT FEAR OF REPRISAL, RESTRAINT, INTERFERENCE, COERCION, OR DISCRIMINATION.