Technology in Long-Term Care Facilities
Communication/Tech Usage

§483.10(g)(6) The resident has the right to have reasonable access to the use of a telephone, including TTY and TDD services, and a place in the facility where calls can be made without being overheard. This includes the right to retain and use a cellular phone at the resident's own expense.

Resident access to telephones in staff offices or at nurses’ stations alone does not meet the provisions of this requirement. Examples of facility accommodations to provide reasonable access to the use of a telephone without being overheard:

- Cordless telephones (landlines)
- Resident cell phone
- Telephone jacks in each room
- Residents on Medicaid can get a free telephone with limited calling and texting
§483.10(g)(7) The facility must protect and facilitate that resident's right to communicate with individuals and entities within and external to the facility, including reasonable access to:
(i) A telephone, including TTY and TDD services;
(ii) The internet, to the extent available to the facility; and
(iii) Stationery, postage, writing implements and the ability to send mail.

§483.10(g)(8) The resident has the right to send and receive mail, and to receive letters, packages and other materials delivered to the facility for the resident through a means other than a postal service, including the right to:
(i) Privacy of such communications consistent with this section; and
(ii) Access to stationery, postage, and writing implements at the resident's own expense.
§483.10(g)(9) The resident has the right to have reasonable access to and privacy in their use of electronic communications such as email and video communications and for internet research.

(i) If the access is available to the facility

(ii) At the resident's expense, if any additional expense is incurred by the facility to provide such access to the resident.

(iii) Such use must comply with State and Federal law.

The facility is responsible for providing reasonable access to the internet to the extent it is available onsite. Computers in public areas for general use must be located in a manner to protect resident privacy in email, communications, and internet use.
Surveillance Cameras

- Increased calls in the OSLTCO regarding surveillance cameras
- No laws in Iowa addressing the usage of cameras
- Residents and family members may be considering cameras to determine if the resident is receiving appropriate care or to be a deterrent to abuse
- Cameras can be:
  - Video Only
  - Audio Only
  - Both Video and Audio
Surveillance Cameras

- **Positives**
  - Can offer information about:
    - Type of care the resident is receiving
    - How a resident is being treated by staff, other residents and visitors

- **Negatives**
  - Can be invasive
  - Violate the resident’s or his/her roommates right privacy
  - No substitute for personal involvement and monitoring
Surveillance Cameras

- Camera would be recording the resident (and possibly the roommate) all of the time. Residents could be recorded:
  - Getting dressed, receiving personal cares
  - During visits with family members and friends
  - Having private conversations with nursing staff, physician, etc.
Surveillance Cameras

Questions that a resident/family may want to consider before installing a camera
- Does the facility have a policy on the usage of cameras?
- Are there forms that the facility requires to be completed?
- Does the resident need consent from the roommate?
- If the roommate does not have capacity to consent, can the consent be signed by the representative?
- If a camera is installed, who needs to be notified?
- Do signs need to be posted to inform others of the camera?
- Are there times when the camera should be off and who is responsible for this?
- Who can review the recordings?
- Who is responsible for the costs, maintenance, operation and removal?
- What will be done with the information that is recorded?
Surveillance Cameras

Things to Consider

- Cameras are not a substitute for personal involvement.
- Surveillance cameras and electronic monitoring can act as an incentive for facility staff to treat residents with dignity and respect as well as provide quality care.
- However, a surveillance camera is not a substitute for good care, family involvement, or personal monitoring of care. Residents and family members should continue to be as involved as they can be in all aspects of the resident’s life.
- It is possible that a resident could be treated unfairly outside of his/her room and this may not be recorded on the surveillance camera.
Mental Abuse and Technology

Mental and Verbal Abuse
Mental abuse is the use of verbal or nonverbal conduct which causes or has the potential to cause the resident to experience humiliation, intimidation, fear, shame, agitation, or degradation. Verbal abuse may be considered to be a type of mental abuse. Verbal abuse includes the use of oral, written, or gestured communication, or sounds, to residents within hearing distance, regardless of age, ability to comprehend, or disability.
Examples of mental and verbal abuse include, but are not limited to:
• Harassing a resident;
• Mocking, insulting, ridiculing;
• Yelling or hovering over a resident, with the intent to intimidate;
• Threatening residents, including but limited to, depriving a resident of care or withholding a resident from contact with family and friends; and
• Isolating a resident from social interaction or activities.
Mental Abuse and Technology

Mental abuse includes abuse that is facilitated or enabled through the use of technology, such as smartphones and other personal electronic devices.

- This would include keeping and/or distributing demeaning or humiliating photographs and recordings through social media or multimedia messaging.

- If a photograph or recording of a resident, or the manner that it is used, demeans or humiliates a resident(s), regardless of whether the resident provided consent and regardless of the resident’s cognitive status, the surveyor must consider non-compliance related to abuse at this tag.
Mental Abuse and Technology

- Examples include:
  - Photographs and recordings of residents that contain nudity, sexual and intimate relations, bathing, showering, using the bathroom, providing perineal care such as after an incontinence episode, agitating a resident to solicit a response, derogatory statements directed to the resident, showing a body part such as breasts or buttocks without the resident’s face, labeling resident’s pictures and/or providing comments in a demeaning manner, directing a resident to use inappropriate language, and showing the resident in a compromised position.
  - Depending on what was photographed or recorded, physical and/or sexual abuse may also be identified.