

PERSONAL RIGHTS — COMMUNITY CARE FACILITIES and RESIDENTIAL CARE FACILITIES FOR THE ELDERLY

EXPLANATION: The California Code of Regulations, Title 22 requires that any person admitted to a facility must be advised of his/her personal rights. Facilities are also required to post these rights in areas accessible to the public. Consequently, this form is designed to meet both the needs of persons admitted to facilities and the facility owners who are required to post these rights.

The back of this form describes the personal rights to be afforded each person admitted to a facility. The back of this form also provides the complaint procedures for the client/resident and representative/parent/guardian.

This form is to be reviewed, completed and signed by each client/resident and/or each representative/parent/guardian upon admission to the facility. The client/resident and/or representative/parent/guardian also has the right to receive a completed copy of the originally signed form. The original signed copy shall be retained in the client's/resident's/child's file which is maintained by the facility.

TO: CLIENT/RESIDENT/CHILD OR AUTHORIZED REPRESENTATIVE:

Upon satisfactory and full disclosure of the personal rights as explained, complete the following acknowledgment:

ACKNOWLEDGMENT: I/We have been personally advised of, and have received a copy of the personal rights contained in the California Code of Regulations, Title 22, at the time of admission to

<small>(PRINT THE NAME OF THE FACILITY)</small> <u>Golden Haven</u>	<small>(PRINT THE ADDRESS OF THE FACILITY)</small> <u>2324 Lever Blvd Stockton 95206</u>
<small>(PRINT THE NAME OF THE CLIENT/RESIDENT/CHILD)</small> <hr/>	
<small>(SIGNATURE OF THE CLIENT/RESIDENT/CHILD)</small> <hr/>	<small>(DATE)</small> <hr/>
<small>(SIGNATURE OF THE REPRESENTATIVE/PARENT/GUARDIAN)</small> <hr/>	
<small>(TITLE OF THE REPRESENTATIVE/PARENT/GUARDIAN)</small> <hr/>	<small>(DATE)</small> <hr/>

THE CLIENT/RESIDENT/CHILD AND/OR THE REPRESENTATIVE/PARENT/GUARDIAN HAS THE RIGHT TO BE INFORMED OF THE APPROPRIATE LICENSING AGENCY TO CONTACT REGARDING COMPLAINTS, WHICH IS:

<small>NAME</small> <hr/>		
<small>ADDRESS</small> <hr/>		
<small>CITY</small> <hr/>	<small>ZIP CODE</small> <hr/>	<small>AREA CODE/TELEPHONE NUMBER</small> <hr/>