

OREGON CONSUMER GUIDE



Assisted living and residential care facilities



CONSUMER GUIDE

for Assisted Living and Residential Care Facilities

Choosing the appropriate care setting for yourself or a loved one can be difficult, but making an informed choice will positively affect your living experience and your mental, physical and social well-being. The purpose of this guide is to give you information about assisted living and residential care facilities.

Assisted living and residential care facilities are required to give consumers an Oregon Department of Human Services designated Uniform Disclosure Statement. This information is formatted to allow you to compare the costs, services and policies of the facilities that you are considering.

You can access this guide and the Uniform Disclosure Statement
on the Oregon Department of Human Services Web site at

www.oregon.gov/DHS/spd/pubs/

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What are assisted living and residential care facilities?

Assisted living and residential care facilities are community-based care settings licensed and regulated by the Oregon Department of Human Services, Seniors and People with Disabilities.

While there are separate licensing categories for the two types of settings, there are more similarities than differences between the two programs.

Is this the right choice for you?

Assisted living and residential care are attractive care options for people who can no longer live independently, yet want to maximize their independence while in the safety of a residential setting.

Individuals who need assistance with daily living activities are offered personal care services, 24-hour supervision and assistance, health-related services and social activities. These facilities generally do not offer the intensive care provided by nursing facilities.



Assisted living and residential care are designed to:

- Accommodate individual residents' changing needs and preferences.
- Maximize dignity, privacy, independence, choice and safety.
- Encourage family and community involvement.
- Minimize the need for an individual to relocate.

What are the differences between assisted living and residential care?

Generally, the difference is in the physical structure and design.

Assisted living

- Private units or apartments with a minimum of 220 sq. ft. of living area.
- Kitchenette, with sink, refrigerator and cooking appliance.
- A wheelchair-accessible bathroom with shower in each unit.

Residential care

May meet assisted living structural requirements, but typically have:

- Shared or private rooms.
- Individual or common bathrooms.

What does it mean to be licensed by the state?

Not all senior housing is licensed to provide care, and only licensed facilities are regulated by the state.

- The State of Oregon licenses all assisted living and residential care facilities under Oregon Administrative Rule 411-054-0000.
- The license must be posted for public viewing at all times.
- Facilities must meet standards and are inspected routinely.
- Licensing inspection reports are available at the facility upon request.

Choosing the right facility

Call for preliminary information and then visit facilities which best suit your needs. Take your time as you tour each facility; remember that you are choosing your home. After visiting the facilities on your initial list, you should be able to narrow the field to two or three which meet the specific services, location and price range you desire. Talk with the administrator, residents and staff while you're in the facility. Try to visit each facility more than once. Arrange to visit during mealtime or ask to have lunch with residents.

Considerations:

- Ask residents how they like living in the facility.
- Chat with staff about their job responsibilities.
- Talk with the administrator about his/her experience working in an assisted living or residential care environment.
- How long has the administrator been at this facility?
- Does the administrator appear to be knowledgeable and sincere?

Physical appearance and structure of the residence are important aspects of where we choose to live.

- Is the facility clean, odor free, well lit and free from clutter?
- Are the common areas attractive, comfortable and inviting?
- Does the size and design appeal to you?
- Do residents socialize with each other and appear happy and comfortable?

Comparing costs

Costs for assisted living and residential care facilities vary greatly, depending on the size of rooms, amenities and services provided.

Calculating the approximate cost is important, as well as understanding what price increases might occur after you move in.

Some private health and long-term care insurance policies include coverage for assisted living/residential care. If you have an insurance policy, check with your agent to determine exactly what the policy will cover. Medicare does not cover the cost of living in an assisted living or residential care facility.



Facilities should willingly provide consumers with all information regarding base rates, specific fees for additional services, staffing and ownership. Obtaining this information is crucial in choosing the appropriate facility.

Medicaid can be a funding source for individuals who meet certain financial and medical criteria. If you lack financial resources for your care, contact your local Department of Human Services, Seniors and People with Disabilities office or Area Agency on Aging to explore programs and services for which you may qualify.

It can be difficult to understand the different fee arrangements at each facility. There are a variety of ways that facilities charge for services and care. Sometimes the terminology used by facilities to bill for care and services can be confusing and you may encounter terms such as “bundled rate,” “levels of care” or “point system.”

Ask the administrator to thoroughly explain the method of determining monthly charges. Of course, the more services you choose, the higher the cost, but one facility may charge for how much time it takes to provide a service, while another may charge based on the number of services that are provided.

Most facilities raise their rates three to five percent each year due to the cost of care and the labor-intensive service needs of the residents. Inquire as to the facility’s history of rate increases over the last few years.

Considerations:

- What is included in the basic rate?
- How does the facility charge for services?
- Are there charges for things such as not using the facility's pharmacy, arranging for medical appointments or transportation?
- Do billing, payment and credit policies seem fair and reasonable?
- What are the policies for refunds?
- Does the facility offer a cap on the percentage by which the monthly rate can be increased?

What services are provided?

All assisted living and residential care facilities must provide a basic level of service that promotes the quality of life and independence for the individual. These services include:



- 24-hour supervision.
- Three meals a day in a group dining room.
- Modified special diets.
- Personal care services (help with mobility, bathing, dressing, eating, toileting, incontinency management, behavioral symptom support).
- Medication management and health care monitoring.
- Recreational and spiritual activities.
- Laundry and linen services.
- Housekeeping and maintenance.
- Arrangements for transportation.

Some facilities may provide additional services and have the capability of providing more intensive services. It is important for residents and their families to understand what services the facility offers, as well as the costs and limitations of those services. Accommodation and options vary from one facility to the next. Consider what is important to maintain your current lifestyle and what you might need in the future.

Considerations:

- Does the facility accommodate two-person transfers from wheelchairs to bed, etc.?
- Are services available, if needed, to assist residents with eating?
- Does the facility provide transportation to doctors' offices, shopping and other activities?
- Does the facility have its own vehicle?
- Are barber/beautician services offered on site?

Medication administration

Although facilities are not required to have licensed medical staff administer medications, they are required to have a safe medication administration system. Ask who oversees the medication system and who is designated to administer medications to residents.

Find out how and where medications are administered and if the facility is willing to individualize administration times. For example, if staff routinely deliver medications at 7:00 a.m., and you prefer to sleep in, ask how the facility will accommodate a later schedule.

Assisted living facilities and most residential care facilities are required to have a registered nurse on staff or on a contract. The nurse typically does not provide hands-on personal nursing care. Ask the administrator what arrangements the facility has with a nurse. You may want to ask if the nurse is available for individual consultation.

Staffing

The duties and qualifications of direct care givers will vary among facilities. For example, some facilities use their care giving staff to assist in the dining room at meals. Instead of designating one person to direct activities, a facility may ask care givers to help with scheduled events.

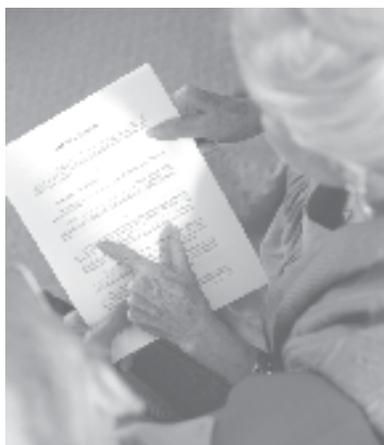
Oregon Administrative Rules do not require that staff receive certification prior to working in a community-based care setting, however, each person must complete orientation prior to providing services to residents. Additional ongoing training is required of staff in all facilities.

There will typically be fewer personal care attendants in these community-based care settings than required in nursing facilities. While the ratio of staff to residents may be lower, facilities must always have an adequate number of staff to meet the 24-hour scheduled and unscheduled needs of the residents.



Considerations:

- Are employees of the facility easy to identify by name badge or attire?
- Do personal care workers seem satisfied and involved?
- Do they show interest in, affection and respect for residents?
- Are workers respectful and friendly to other staff members?
- Are residents' requests handled in a timely manner?
- How much time is spent in staff training and what topics are covered?
- What qualifications do the trainers possess?



Service plans

A service plan is used to coordinate the delivery of services to each resident and includes an assessment and evaluation of the resident's personal care needs. An initial service plan should be developed prior to a resident's admission and then reviewed and updated regularly to ensure that the resident's needs are being met. The resident's participation in this process is vital to the development and success of the service plan. The resident can choose to have family and friends involved in this process with facility staff.

If the resident will be receiving nursing services, the facility nurse is required to be involved in the development of the service plan.

Considerations:

- Can your current needs be accommodated and as those needs intensify or increase is the facility able to continue to provide necessary care?
- How often are the service plans updated?
- Does the facility accommodate terminally ill residents and their families?

Resident rights

Facilities may have a "code of conduct" or "responsibilities of residents" which you will be asked to read and agree to. This information can be beneficial in helping you decide if a particular facility is the right place for you. However, facility guidelines may not infringe on resident's rights, which are guaranteed by law. Resident rights are specified in Oregon Administrative Rules (OAR) 411- 054-0027. The facility will provide you with a copy of your rights. If you have any questions or concerns about your rights in a community-based care setting, refer to the OAR or contact your local ombudsman. The state's local Long-Term Care Ombudsman phone number is posted in each facility and a representative is available to advocate for residents.

Facilities should also have a grievance process to address resident complaints. Most facilities have a resident council and/or a family council that meet regularly to discuss community concerns.

Resident bill of rights (OAR 411-054-0027)

- (1) The facility must implement a residents' Bill of Rights. Each resident or the resident's designated representative must be given a copy of their rights and responsibilities prior to moving into the facility. The Bill of Rights must state that residents have the right:
 - (a) To be treated with dignity and respect;
 - (b) To be given informed choice and opportunity to select or refuse service and to accept responsibility for the consequences;
 - (c) To participate in the development of their initial service plan and any revisions or updates at the time those changes are made;
 - (d) To receive information about the method for evaluating their service needs and assessing costs for the services provided;
 - (e) To exercise individual rights that do not infringe upon the rights or safety of others;
 - (f) To be free from neglect, financial exploitation, verbal, mental, physical or sexual abuse;
 - (g) To receive services in a manner that protects privacy and dignity;
 - (h) To have prompt access to review all of their records and to purchase photocopies. Photocopied records must be promptly provided, but in no case require more than two business days (excluding Saturday, Sunday and Holidays);
 - (i) To have medical and other records kept confidential except as otherwise provided by law;
 - (j) To associate and communicate privately with any person of choice, to send and receive personal mail unopened and to have reasonable access to the private use of a telephone;
 - (k) To be free from physical restraints and inappropriate use of psychoactive medications;
 - (l) To manage personal financial affairs unless legally restricted;
 - (m) To have access to and participate in social activities;
 - (n) To be encouraged and assisted to exercise rights as a citizen;

- (o) To be free of any written contract or agreement language with the facility that purports to waive their rights or the facility's liability for negligence;
- (p) To voice grievances and suggest changes in policies and services to either staff or outside representatives without fear of retaliation;
- (q) To be free of retaliation after they have exercised their rights provided by law or rule;
- (r) To have a safe and homelike environment;
- (s) To be free of discrimination in regard to race, color, national origin, gender, sexual orientation or religion; and
- (t) To have proper notification if requested to move out of the facility, and to be required to move out only for reasons stated in OAR 411-054-0080 (Involuntary Move-out Criteria) and have the opportunity for an administrative hearing, if applicable.



Meal service

Facilities are required to provide three nutritionally balanced meals and snacks seven days a week. Meals should vary. They should include seasonal fresh fruits and vegetables and be tasty and appealing. Residents' preferences should be taken into consideration as well.

Facilities are not required to have a dietitian prepare meals, although many use a dietitian to plan menus. Physician-ordered specialized diets can be accommodated as long as they are not medically complex.



Considerations:

- Ask current residents how they like the food.
- What are the meal times?
- Is the menu available in advance?
- Is a dietitian involved in planning menus?
- Are residents involved in meal planning?
- Are extra helpings or substitutions available?

Activities

Facilities are required to provide activities that are based on the preferences of its residents.

Considerations:

- Do the activities that are offered appeal to you and, if not, how will the facility accommodate your preferences?
- Are residents engaged in activities as you walk through the facility?
- Does the facility provide activity equipment and supplies?
- Is there evidence of an organized activity program, such as a posted daily schedule, events in progress, reading materials, etc.?
- Does the facility take residents on outings?
- Are there on-site religious/cultural activities?

Admissions

Prior to entering a facility you may be asked to complete the following:

1. Application form

Each potential resident may be asked to fill out a form giving the facility basic information. You may be asked to provide detailed financial information about your assets, savings and income. If you are uncomfortable giving this information, you may be able to find a facility that does not require detailed financial disclosure.

2. Resident/family interview

Facility staff will talk with you to get to know you and your individual care needs. You may wish to involve family and friends.

3. Social/lifestyle history

This information will give the facility an idea about your social interests and your lifestyle.

4. In-home assessment

Depending on your individual situation, the facility may ask to come to your home to evaluate your care needs prior to entering into the facility. During this assessment, the facility will be determining your level of care and whether or not they can meet your needs.

5. Admission/rental agreement

This is a contract signed by the resident and the facility and is one of the most important documents that you will receive. It may also be referred to as a residency agreement. This document should contain the following:

- All fees and deposits.
- Services to be provided.
- Conditions under which the rates can change.
- Refund policy.
- Discharge criteria.



Facilities are required to conduct regular fire drills. Emergency evacuation plans should be posted throughout the facility and detailed evacuation instructions must be provided to you upon admission to the facility.

Discharge

Assisted living and residential care facilities may only ask a resident to move out according to criteria in Oregon Administrative Rules. If a facility asks you to move, the administrator must give you a written notice. The notice will include information about your right to object to the move and the right to request an informal conference with the Oregon Department of Human Services.

Be sure to look at the Uniform Disclosure Statement for facility discharge information. Ask the facility for specific examples of situations in which a resident might have to move out of the facility. Examples of questions to ask might include:

- Will the facility provide two-person transfer assistance (for example, from the bed to the chair)?
- Can the facility care for me if I require sliding-scale insulin injections?
- If I am temporarily confined to bed, can I remain in the facility?
- If I become forgetful or confused and begin wandering outside, can I continue to live at the facility?

For additional information:

If you would like more information about assisted living or residential care settings, there are several options: You can contact your local Seniors and People with Disabilities office or Area Agency on Aging office, the State Office of Licensing and Quality of Care in Salem, at 503-945-5832 or toll-free in Oregon at 1-800-232-3020, or the State Long-Term Care Ombudsman office in Salem at 503-378-6533 or toll-free in Oregon, 1-800-522-2602.



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