

ALF Providers, UNC Researchers Design Study

University of North Carolina at Chapel Hill (UNC) researchers and assisted living operators in several states across the country are collaborating on an innovative research project on medication management systems. The project is being funded by the U.S. Department of Health and Human Services' Agency for Healthcare Research and Quality.

Researchers at UNC's Collaborative Studies of Long Term Care and the Center for Excellence in Assisted Living (CEAL) say the research project marks the first time assisted living operators have worked in a "participatory" manner with researchers to design a study on assisted living practices. According to researchers, participatory means more than just being part of the survey. In this project, assisted living providers are also providing input on the topics and how to conduct research, participating in the study, and helping to translate the research findings into practical ways to improve caregiving in assisted living residences.

In addition, the two-year collaborative project will produce a manual on how to successfully combine researchers with providers to produce results that improve both caregiving and operational policies at assisted living residences. CEAL—a coalition of 11 diverse national stakeholder organizations—will coordinate the development of the manual.

The CEAL-UNC project is setting the standard and creating a template for future research by encouraging active collaboration and participation of the assisted living, caregiving, research, and policy communities.

"The practice and policy-making communities need to be involved in identifying and informing the areas for assisted living research, so that projects focus on the most pressing areas, and the results can be translated into policies or practice recommendations," said the Alzheimer's Association's Jane Tilly, who is

ALF, continued on page 6

Rates Increase Slightly In 2006

The national average monthly rate for a private room with private bath at an assisted living facility increased \$63, or 2.2 percent, compared with last year's rate, according to the recently released "2006 MetLife Market Survey of Assisted Living Costs." The rate is now \$2,986 per month, or \$35,616 annually.

The survey found that rates varied by geographical region, with North Dakota registering the lowest average monthly rate, at \$1,742, and Bridgewater, N.J., averaging the highest, at \$5,197.

Forty-three percent of the facilities in the survey indicated that they provided dementia care for residents, with 23 percent of those facilities stating they charged an additional fee for this care, ranging from \$750 to \$2,200 per month.

The telephone survey was conducted during June and July 2006 in all 50 states and the District of Columbia by LifePlans, a risk management and consulting firm that works with long term care insurers.

Most Expensive Markets/ Monthly Rate

1. Bridgewater, N.J., \$5,197
2. Stamford, Conn., \$4,802
3. Silver Spring, MD, \$4,750
4. Des Plaines, Ill., \$4,479
5. Boston, \$4,180

Least Expensive Markets/Monthly Rate

1. North Dakota, \$1,742
2. Shreveport, La., \$2,033
3. San Diego, \$2,066
4. Scranton, Pa., \$2,177
5. Jackson area, Miss., \$2,180

Inside Focus

2. Policy: NCAL Asks CMS To Consider Assisted Living For Money Follows The Person

3. News: HUD Awards Assisted Living Conversion Grants

5. Activities: New Jersey Recognizes Facilities For Best Practices

7. Statewatch: D.C. Ombudsman Lawsuit Seeks Rules For ALF's

8. People



NCAL Asks CMS To Reconsider Money-Follows-The-Person Program Criteria

NCAL, along with AHCA, has sent a letter to the Centers for Medicare & Medicaid Services' (CMS) Dennis Smith, director of the Center for Medicaid and State Operations, asking the agency to reconsider two key provisions that may prevent many Medicaid recipients from receiving care in assisted living facilities under the Money Follows the Person (MFP) demonstration grant program.

NCAL and AHCA support the policy of providing Medicaid services in a long term care setting that best meets the needs of an individual; however, NCAL is concerned that assisted living is excluded as an option under MFP's policies.

Through the MFP program, CMS is going to award states \$1.75 billion during the next five years. States are motivated to apply for the grants because CMS provides them with an increase in the state's federal match. Awards are

granted through a competitive application process.

Applications will outline how each state plans to redesign its Medicaid program to broaden beneficiaries' long term care options. The concept being promoted by MFP is that funding would be given directly to beneficiaries, to use in a long term care setting of their choice, rather than sent to a specific provider of services. In addition, MFP encourages Medicaid beneficiaries in skilled nursing facilities to use options that are either a home- or community-based service.

However, NCAL believes states may be discouraged from including assisted living as a long term care option in their MFP applications because of the wording of the law as well as CMS' interpretation, which makes it difficult for assisted living to qualify as an option.

According to the law, to be a "quali-

fied residence," an apartment must have lockable doors, and residents or their families must have control over cooking facilities. Assisted living facilities serving individuals with dementia will have difficulty meeting this standard. In addition, the agency does not believe that resident contracts—often used by assisted living facilities—fit under the definition of lease.

"CMS should revisit its interpretation of how the MFP program treats assisted living, acknowledge that a resident contract is a form of lease, and communicate this to state officials, many of whom want to include assisted living in their MFP grant applications," wrote Bruce Yarwood, president and chief executive officer of AHCA/NCAL. "CMS and other federal policy makers should not limit assisted living's role in future efforts to offer individuals increased choice of care settings under Medicaid."

Study Links Resident Satisfaction To Staff Satisfaction

A recently published study involving 43 assisted living facilities found that assisted living employers reporting high job satisfaction correlated to higher resident satisfaction.

"Greater resident satisfaction in the facility was associated with higher staff job satisfaction and more positive staff views of organizational culture (for example, greater teamwork and participation in decision making)," according to researcher Elzbieta Sikorska-Simmons, author of "Linking Resident Satisfaction to Staff Perceptions of the Work Environment in Assisted Living: A Multilevel Analysis," published in a

recent edition of *The Gerontologist*.

The study examined the relationship between resident satisfaction and staff perceptions of the work environment in assisted living. Staff perceptions measured by the researchers related to job satisfaction, organizational commitment, and views of the organizational culture. Forty-three assisted living facilities located in Maryland with 335 residents and 298 staff members were examined for the study.

"The study findings have practical implications for administrators and policy makers who are interested in increasing resident satisfaction with

assisted living," wrote Sikorska-Simmons. "Because resident satisfaction is related to staff perceptions of the work environment, efforts to increase resident satisfaction should also focus on improving the quality of the work environment for staff. As proponents of 'culture change' point out, work environments that value and respect staff are likely to foster positive work-related attitudes and good quality services, which residents seek. Interventions to improve staff working conditions might focus on promoting teamwork participation in the decision-making process and high morale."



HUD Awards Assisted Living Conversion Grants To Six State Projects

The Department of Housing and Urban Development (HUD) recently awarded \$9 million in assisted living conversion grants to projects in six states.

States with properties receiving the grants are: Arizona, \$1.1 million; California, \$1.1 million; Connecticut, \$2.1 million; New Jersey, \$2 million; New York, \$497,000; and Pennsylvania, \$2 million.

The Assisted Living Conversion Program (ALCP) is available to private, nonprofit owners of Section 202, Section 8 including Rural Housing Services' Section 515, Section 221 (d) (3) BMIR, or Section 236 housing developments that are primarily designated seniors housing.

The grants provide owners with capital to convert some or all of the dwelling units in a project into assisted living units for frail seniors.

Facilities are designed to accommodate low-income elderly and persons with disabilities who can live independently but need assistance with activities of daily living, such as bathing, eating, dressing, grooming, and home-management activities. The facilities must provide support services such as house-keeping, personal care, transportation, and meals. However, since the funds awarded through the ALCP do not cover these services, the project owners must provide the service funds either directly or through a third party. The projects receiving funding will be providing services through a number of sources, including their state home health care programs, state assisted living funds, congregate housing service program funds, service coordinator funds, and private grants and donations.

The grants were awarded on a competitive basis. Some of the considerations for awarding the grants included the quality and effectiveness of the proposal in addressing the proposed conversion, including the meals and supportive services the project intends to provide and the ability of the project owner to secure other community resources combined with the grant to achieve the program's purposes.

The owners are responsible for ensuring that converted units meet all local standards, codes, and regulations governing assisted living facilities.

The projects must also be licensed and regulated by the appropriate governing body.

For example, in Phoenix, Ariz., Christian Care Manor will use funds to convert 22 Section 8 senior apartments into assisted living units for seniors. Renovation of the units includes the widening of doors; the installation of lever hardware; and the relocation of closet rods, outlets, and switches. Bathtubs will be changed to showers, toilets and lavatories will be modified, and fold-up grab bars will be added. Kitchen cabinetry will also be modified.

"These grants provide an affordable option to nursing home placement for elderly persons," said HUD Secretary Alphonso Jackson.

"They will allow the elderly an opportunity to age in place and not have to move from their familiar surroundings as they become older and need supportive services."

For more information about the program, visit www.hud.gov and search for Assisted Living Conversion Program.

AHCA/NCAL Quality Award 2007 Applications Available

The AHCA/NCAL Quality Award is public recognition of your facility's quality achievements. Facilities may apply for recognition and awards at three levels, each requiring an increasingly more detailed and comprehensive demonstration of systematic quality.



The application process itself delivers great benefits, among them:

- Assessing and maximizing your facility's strengths;
- Receiving customized feedback and solutions to improve performance;
- Increasing your performance management, planning, training, and assessment proficiencies.

All assisted living facilities that are members in good standing of AHCA/NCAL are eligible to participate.

To receive an application packet, please call (202) 898-6332 or visit NCAL.org to download materials. Completed applications and applicable fees must be post-marked by March 31, 2007.





New Jersey Recognizes Assisted Living Residences For Best Practices In Activity Programming

A pair of New Jersey assisted living residences using resident feedback to improve their activities programs earned the state's highest recognition for best practices.

The New Jersey Department of Health and Senior Services named The Chelsea at Warren, an 80-unit assisted living community in Warren, N.J., and the Waterford Glen of Wall, N.J., a 70-unit residence, as having the best practices for The Social Experience: Using Resident Feedback to Enhance Activities, Recreation, and Leisure. The department holds a contest every year on best practices in assisted living.

Through the utilization of resident feedback, both residences increased participation in their activities programs. Although distinct entities, both The Chelsea at Warren and Waterford Glen share similar approaches to their programs. Both residences incorporated their entire staff—not just activities department staffers.

For example, Waterford Glen believes that nurse assistants who are responsible for transporting residents to an activity or event remain at the activity and participate along with the residents. Dining staff participate by providing snacks and remaining for the event.

"In order for the activity program to be successful, all disciplines need to understand their vital roles in providing meaningful activity programming to promote the well-being and enhance the quality of life of the residents," said Christina Nathanson, director of activities for Waterford Glen, in a presentation to more than 100 assisted living providers attending the state awards program.

The Chelsea at Warren also believes that every staff member makes a contri-

bution to the activities program, and it educates staff through a yearly inservice. The inservice teaches staff about the significant role that activities have in the lives of residents and the importance of the staff's role in a team approach to making a successful program.

"In order for the activity program to be successful, all disciplines need to understand their vital role in providing meaningful activity programming to promote the well-being and enhance the quality of life of the residents."

—Waterford Glen

Both residences collected resident feedback through a variety of methods. Resident council meetings or activities committee meetings provide forums for residents to discuss the current program, how it could be improved, and what they would like to do in the future.

Written surveys are another method of collecting feedback. Questions about the activities program are included in The Chelsea at Warren's annual resident and family satisfaction surveys. Questions about all aspects of the activities program such as time, availability, variety, implementation, and interest provide The Chelsea with detailed feedback. The Chelsea also issues a leisure survey to determine residents' interests. Residents can also write their comments and put them in the residence's recreation suggestions box.

The information in these surveys,

while valuable, is also complemented by a continuous evaluation process.

Employees at both residences gather information through informal conversations or by observing resident behavior. At Waterford Glen, staffers ask residents to join in the activity or ask why the resident is not attending. Staff members can often learn about residents' preferences through encouraging a resident to go to an event or asking residents what they liked or disliked about the event.

Periodic meetings between the executive director and the activity director are also important. At the Chelsea, the director of recreation and executive director meet to review the recreation department's programs. At the end of each month, the directors review the upcoming month's programs and special events, how the residents are enjoying current programs, and changes being incorporated.

Waterford Glen believes that indicators of a successful activity are improved attendance and participation, as well as residents smiling, humming, or whistling immediately after participating in an activity or attending an event.

Both residences promote their activities programs with well-placed calendars and newsletters sent to family members and residents. Both display a large activity calendar prominently in a common area, as well as in other areas such as the reception desk or outside the activity room. Newsletters containing a calendar or notices about upcoming activities are sent out to families and residents and promoted on the in-house television channel.

Patricia Dimino, Waterford Glen's executive director, encourages facilities

New Jersey, continued on page 6



New Jersey Recognizes Assisted Living Residences

New Jersey, continued from page 5

to be flexible about their activity calendars. Incorporating resident ideas or suggestions helps empower residents and encourages them to participate. Dimino also encourages residences not to be afraid of trying something new “at least once.” Dimino says residents are also invited to participate in the planning and preparation of an event. She says to think of it like what someone would do if they were planning a dinner party or celebration in their own home.

Dimino says Waterford Glen’s calendar has become more dynamic. For example, the residence recently hosted a Rosie the Riveter Day. Staffers wore kerchiefs on their heads, and the facility offered an educational program delving into the history of how women worked in factories during World War II. Rather than offering craft projects, the company has brought in speakers on a particular topic of interest. On November 7, election day, the residents said they wanted to go to the polls to vote.

“They did not want to fill out absentee ballots. They wanted to pull the lever,” Dimino says.

“Activities are not just about passing time. It’s all about quality of life and a full and meaningful activity schedule can provide everything a resident used

to experience when living at home,” Dimino says. “It’s our responsibility to bring the outside world into our community.”

In Warren, Chelsea’s executive director agrees. “The Chelsea believes that activities should be a resident’s connection to his or her past, while exploring the future,” says Jill Hamlett,

“Our activities address the whole person: their physical, emotional, spiritual, intellectual, and psychological needs and serve a purpose for satisfaction, enjoyment, self-expression, and physical and mental stimulation.”

executive director of The Chelsea at Warren. “Our activities address the whole person: their physical, emotional, spiritual, intellectual, and psychological needs and serve a purpose for satisfaction, enjoyment, self-expression, and physical and mental stimulation. We know from experience that this approach leads to a better quality of life.”

For example, Chelsea “Senior Summer School” is a month-long program focusing on topics of interest chosen by residents. Chelsea invites experts from local colleges or universities to

speaking about their expertise. Residents have heard speakers discuss topics such as “All About New Jersey,” world culture, media studies, and aviation. The summer school is open to the residence’s surrounding community, as well as seniors, family, and friends.

More than 25 Chelsea residents established their own Red Hat Society, a national organization of women over 50 who enjoy growing older through fun activities. The Chelsea chapter calls itself The Red Hot Tomatoes. They’ve attended luncheons and outings and completed some mailings for the local chapter of Habitat for Humanity.

For those residents interested in becoming a foster grandparent, The Chelsea found a unique nonprofit Internet organization called the Elder Wisdom Circle. Based in San Francisco, the Elder Wisdom Circle is a group of volunteer seniors who offer “Dear Abby” type of advice to those people seeking help in their relationships, family, or careers.

“We’re all social beings,” says Dimino. “It’s important that we bring to our residents everything they would be able to access outside of our community.”

To view the residences’ presentations, visit www.state.nj.us/health/ltc/bestpractice.shtml.

ALF, continued from page 6

chair of the CEAL research committee. Tilly is overseeing the development of the manual, which will contain detailed processes for how to create and sustain effective models of collaborative, participatory research in assisted living.

Along with the project’s other lead researchers, Tilly believes that the

results will be immediately translatable into a form of practice that can be adopted and sustained across a wide group of communities.

“As researchers, we’ve been impressed at how welcoming the assisted living community has been to work together to learn about care and how to improve it,” said UNC professor Sheryl Zimmerman, the project’s

principal investigator, whose research team has conducted more than 20 studies on issues surrounding quality care in assisted living since 1997.

“Given the similar goals of everyone involved, we’re hopeful that this project will set the standard and provide helpful guidance for all such work to come.”



DC Sued Over Lack Of Assisted Living Licensure Rules

Washington, D.C.'s long term care ombudsman has filed suit against the city in order to force its Department of Health to establish licensure requirements for assisted living facilities.

The city passed Assisted Living Residence Regulatory Act of 2000, enacted in March 2000, which requires the city's Department of Health to establish a set of uniform, minimum standards of licensure for assisted living.

The act also provides for an inspection process and in addition "articulates specific requirements as to the quality of care.

"The city, however, according to Gerald Kasunic, DC's director of the ombudsman program, has been "recalcitrant" through a series of delays in implementing the final rules.

His lawsuit—a writ of mandamus—seeks to force the city to implement a licensure system with oversight capabilities. If Kasunic prevails in court, the city would be compelled to establish a licensing and survey system.

"The lack of licensing is both a threat to the health, safety, welfare, and a detriment to assisted living facilities in the District of Columbia who wish to demonstrate that they meet licensing requirements," states the lawsuit.

Currently, there are about 49 assisted living facilities caring for about 1,000 residents with the district.

According to the lawsuit, a 2006 survey of assisted living licensure regulations finds that the District of Columbia is one of only 12 jurisdictions in the United States that lack a licen-

sure system for assisted living. Without a licensure system, many times insurance companies and government entitlements will not pay for the health care provided in assisted living facilities.

"The lack of regulatory system also imposes a stigma upon assisted living providers in the District of being 'unlicensed,' which hinders their ability to obtain residents and secure reimbursement from public and private insurers," according to a statement in the lawsuit.

Yet, according to the suit, DC passed emergency regulations for Medicaid reimbursement of assisted living providers.

According to D.C. officials, the Department of Health has drafted proposed regulations.

Open Season Starts for Medicare Prescription Drug Plan

The first annual open enrollment period for the Medicare Part D prescription drug benefit began on Wednesday, Nov. 15, 2006. Medicare beneficiaries who have not enrolled in Part D have the opportunity, along with their families, to consider whether the Medicare drug benefit is right for them and, if so, which drug plan to choose. Residents who already have Medicare Part D coverage should review their plans as the open enrollment period allows them to switch plans until Dec. 31, 2006. According to the Centers for Medicare & Medicaid Services (CMS), a small percentage of dual eligibles—beneficiaries covered by both Medicare and Medicaid—will have to be reassigned to new plans (or begin paying part of their premiums), effective Jan. 1, 2007, because the premiums of their current plans have exceeded benchmarks.

Updated Consumers Guide: Choosing An Assisted Living Residence

NCAL has updated the look and revised the text in the AHCA/NCAL consumer guide series brochure titled: Choosing An Assisted Living Residence.

Since its last publication a few years ago, assisted living services have evolved and changed. The revised brochure incorporates those changes by encouraging consumers to ask questions about hospice, Medicare's Part D benefit, and life safety questions regarding sprinklers, smoke detectors, emergency preparedness, and evacuation plans.

Facilities that would like to order the guide in bulk can order packs of 25 by contacting the NCAL fulfillment center at (800) 321-0343 and asking for catalog #1434, or visiting online at www.ncalpublications.org.



The Iowa Health Care Association/Iowa Center for Assisted Living has named **Debbie Klatt** the Assisted Living Director of the Year. Klatt has been administrator at Ostego Place and Lake Point Villa Senior Living at Methodist Manor Retirement Community in Storm Lake for 14 years.

Klatt began 20 years ago in the housekeeping, then became activities director before being promoted to administrator.

The New Jersey Assisted Living Council (NJALC), the assisted living arm of the Health Care Association of New Jersey (HCANJ), elected officers at its annual meeting. **Roger Bernier** of Chelsea Senior Living is chair. Vice chair is **Steven Heaney** of Brandywine Senior Care. **Lori High** of Presbyterian Homes and Services is the NJALC representative to the HCANJ Legislative Services Committee. **Jan Testa** of Burnt

Tavern Rehabilitation & Health Care is the NJALC representative to HCANJ's Executive Committee. **David Woodward** of Sunrise Assisted Living of Wall is the NJALC representative-at-large. **Robert Van Dyk** was honored for serving on NJALC's board from 2002-2006.

The Washington Health Care Association/Washington Center for Assisted Living (WHCA/WCAL) announced that **Gary Weeks** is the organization's new executive director. Prior to joining WHCA/WCAL, Weeks was director of the Washington state Department of Labor and Industries.

Kimberly Nelson has been named director of philanthropy for The Greenspring, an Erickson community located in Springfield, Va. Nelson was previously the community's gift planning manager.

NCAL is the assisted living voice of the American Health Care Association. *NCAL Focus* (ISSN: 1095-5585) is published monthly by the American Health Care Association (AHCA), 1201 L Street, NW, Washington, DC 20005. Copyright © 2006 by AHCA. Reproduction in whole or in part is prohibited without written authorization from the copyright holder. NCAL or AHCA members' subscription fees are included in membership dues. AHCA is the nation's largest federation of assisted living, nursing facility, and subacute providers. AHCA has 48 affiliated organizations, together representing nearly 12,000 individual facility members.

Editor: Lisa Gelhaus

Advertising Sales/ Production

Manager: E. Jean Battle-Lee

NCAL Board of Directors: Van Moore (Chair), Nancy Andrews, Jim Birchem, Jim Carlson, Ruth Channels, Deb Choma, Vickie Cox, Michele Donahue, Patricia Giorgio, Howard Groff, Jeffrey Hyatt, Christian Mason, Nicolette Merino, Rick Miller, Kathleen Pagels, Angelo Rotella, Marj Shell, Michael Shepard, Faun Spencer, Dean Solden, Jan Thayer, Robert Van Dyk, Mike Williams, Rusty Zosel.

Your suggestions and feedback about NCAL FOCUS are welcome. Contact Lisa Gelhaus by e-mail (lgelhaus@ncal.org), by phone (202-898-2825), or by writing to the address above.

A Covenant For Affordable
And Ethical Long Term Care



NCAL Focus
1201 L Street, NW
Washington, DC 20005

