

Re choosing assisted living
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Introduction: Options when someone becomes unable to perform some of the ADL's

- Stay at home if spouse capable of providing care needed. Otherwise requires hiring (i.e., interviewing, scheduling, paying, etc.), outside caregivers.
- Move in with a relative capable of providing the care needed. Similar to above, otherwise requires hiring outside care givers.
- Move into Independent Living and hire outside caregivers.
- Move into Assisted Living where meals and professional care giver staff are part of the package.

General Comments about selecting an Assisted Living Facility

- It is unlikely that any facility will be perfect given the high turnover in the low paying aide jobs. The best you can do is weigh all the factors and pick the best for you.
- If at all possible, choose a facility where caring relatives live close enough to visit at least weekly, and act on their behalf. Management may likely be more responsive to such residents.
- Medicare does NOT cover Assisted Living. Only certain Medicare advantage plans and Long term Care Plans (LTC) cover it
- Regardless, Medicare Advantage and LTC will use their own version of ADL scoring to determine coverage/payment. Assisted Living facilities will use ADL's to determine patients' needs.

Make an appointment with several facilities when searching for an Assisted Living facility. What to do when you get there:

Walk, see, hear and smell:

- Visit community rooms, dining area, outdoor area for sitting on a nice day (Pleasant? Outdoor area enclosed?)
- Facility general appearance? Carpets and floors clean? Exterior appearance? Community room Furniture appearance?
- Do residents seem busy and happy?
- Disinfectant or sewer/toilet odors? (Warning sign if there is such an odor!!)
- Visit a resident room if an empty room is available. Check what is there: sink, small refrigerator, microwave or coffee pot? Electric immersion heater coils (for hot tea) allowed?

Talk to residents and visiting adult children.

- Residents (some who may speak freely, others may be reluctant)
- Children visiting their resident parents (who are more likely to give a straight answer)
- Ask about general treatment:
 - Do they like it here?
 - Responsiveness of aides?
 - Cleanliness?
 - Food?
 - Med delivery/accuracy?
 - If they like or formed friendships with other residents?

What to ask mgmt/staff -who will likely only give you glowing reports so pin them down as follows:

- Staffing:
 - Resident /Aide ratio weekdays and weekend days?
 - Aides at night?
 - Nurse on med staff or on call nights or weekends?
- Occupancy: total beds/rooms and current occupancy %
- Hours of reception desk during weekdays and weekends?
- Meds:
 - Who/How/when are meds distributed? At mealtimes? What if a med is required at bedtime?
 - Must use their pharmacy or can use resident's preferred pharmacy?
 - Will they do injections e.g., insulin?
- Monthly fees:
 - Basic monthly fee and what is included besides meals. Are Laundry, housekeeping, physical therapy extra charges?
 - Does the monthly rate increase if/when a resident needs more help, i.e., scores poorer on ADL?
- Organized recreation: field trips, movies, dancing, visiting speakers or musicians? Get a copy of the current month activity/social calendar.
- Van service: shopping, med appts, to events, etc.
 - if so, only take highly mobile (i.e., no wheelchairs)?
 - or enough staff or aides to handle wheelchairs?
- Beauty parlor or haircut available in house?
- Can the kitchen do special diets, e.g., low salt, low carbs, gluten free, etc.?
- Are there exercise or PT classes offered?

Facility Visit strategy.

- Take notes, perhaps build a table—otherwise it is too easy to forget what the 1st or 2nd facility said when you get to 3rd or 4th facility.
- Visit several facilities- always best to see the options.
- You might want to circle back as each new facility may bring up questions you should have asked at facilities already seen.

More on How ADLs are used by the Facility:

- Prospective residents are Interviewed to determine ADL score, which may drive entry level monthly fee (more resident needs means more aide hours required)
- Scoring too poorly on ADL may cause facility to reject a new potential resident.
- Similarly, a current resident with severely declining ADL scores may be advised they now need Skilled Nursing Facility
- The Facility may be flexible on qualifying for occupancy, i.e., if they have a lot of empty beds, they may be more willing to take someone scoring poorly on ADL.