



CoHomes

Resident & Family Handbook

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Note: CoHomes is taking extra precautions to be COVID-Compliant, COVID-Safe, and remain COVID-Free. 100% of our Residents and Team are fully vaccinated.

(A) SENIOR LIVING QUESTIONS AND ANSWERS

Is it time for assisted living? An article written by Jami Barnett, Ph.D., Consumer Affairs Research Team, asks the right questions and clearly explains the answers.

“As your parents or loved ones age, you’ll have to help them decide where they should live. There are many types of senior housing, and assisted living is one of the most common ones. Assisted living facilities are housing choices designed for people who need help with daily activities (like cooking and bathing) but who don’t necessarily need a lot of daily medical care.

Moving your loved one into assisted living can be hard for everyone involved, but sometimes it’s even more difficult to know when the time is right to make the move. Obvious red flags like a broken hip or a sudden downturn in health may speed up the decision or process, but more often than not, there’s no clear sign.

If you suspect your friend or relative might no longer be safe living on their own, ask yourself about these situations.

Questions to ask about health

1. Has your loved one fallen recently?

If the person falls again, how long might they be stuck before someone arrives to help them? Frequent falls, especially if your loved one can’t get help, are a sign that it’s time for more help and possibly for an assisted living facility. If they’re not quite ready for assisted living, consider getting a medical alert system.

2. Does your loved one seem to take longer recovering after they are sick or hurt themselves?

This can be a sign of a weakening immune system, and it might tell you they’ll need more care soon. Talk to their doctor if you feel concerned. Having full-time care in an assisted living facility or skilled nursing facility might improve their health.

3. Does the person suffer from a chronic health problem that is only getting worse?

If they do, it might be time to move them into an assisted living facility or nursing home. If they’re still well enough, they’ll be able to be involved in the choice and well enough to make friends with other residents when they arrive.

4. Is your loved one taking all their prescribed medications as instructed?

If they aren’t, find out why. Is it a financial problem, or do they forget to take it? If they’re concerned about prescription costs, a Medicare supplemental insurance program might be beneficial. If they miss taking medication because they forget, assisted living can help. The staff can make sure they take the medicine they need.

Questions to ask about self-care

5. Do they have problems with activities of daily living (ADLs)?

Can your loved one cook for themselves? Can they do their laundry? If not, you should look into full-time care. Living in a facility that handles things like cooking and cleaning can give your loved one time for socializing.

6. Is your loved one eating properly?

Is your loved one mostly eating takeout or frozen meals? Has their weight changed significantly in the last few months? Rapid weight gain or loss can be a sign of serious medical problems or a sign that they're having trouble preparing food. Talk to your loved one and their doctor about possible reasons for the change in their weight.

7. Have you noticed hygiene problems?

Have you noticed your loved one has stopped taking care of themselves like they used to? Have you noticed a new body odor? These can be signs someone is having a hard time bathing, which puts them at risk of infection and increases the likelihood of mental and emotional decline. Problems with self-care or other activities of daily living (ADLs) are a sign someone may not be okay living by themselves.

8. Are they having mobility problems?

Does your loved one have trouble walking? Can they get up and down stairs without help? If not, they may need to renovate their home for aging in place or move to an assisted living facility to ensure their safety.

9. Has your loved one caused a car accident or been involved in a number of minor fender benders?

If they can't get around on their own anymore, consider their access to public transportation or rideshares. If that isn't an option, an assisted living community that provides transportation to doctor's appointments and social events could help them stay mobile without the risk.

10. Does your loved one have to deal with a lot of home maintenance, like mowing the yard or raking leaves?

Although they might enjoy owning a home, the upkeep may be more than they can handle. Talk to them about whether they'd prefer to live in a place where they won't have any maintenance or upkeep worries.

11. Does your loved one still keep up their house?

Are the dishes done and bathrooms cleaned regularly? If they can't keep up with housework, an assisted living facility could reduce their stress level and provide a more sanitary living space.

12. If your loved one has pets, are they well cared for?

An inability to take care of animals might be a sign of immobility or cognitive problems. Some assisted living facilities allow pets; consider them if animals are an important part of your loved one's life.

Questions to ask about mental health and dementia

13. Have they left their home and gotten lost?

Have you noticed your loved one wandering out of their home without a clear sense of where they're going? Wandering is often a sign of dementia; if this problem persists, talk to your loved one and their doctor. Often, people who have dementia benefit from living in an assisted living facility with a memory care unit designed to make their life safer and ease anxiety and confusion.

14. Has your relative or friend become unusually angry or violent when something upsets them?

Aggressive behavior may be associated with confusion and dementia, which might indicate they need to move to an assisted living facility. These facilities and skilled nursing homes sometimes have special memory care units for people living with dementia.

15. Are they isolated or withdrawn?

Has your loved one stopped participating in social activities they used to enjoy? Does your loved one go days without leaving their house? If so, talk to them about why. They may be scared to drive or uncomfortable participating in social events that used to make them happy. An honest conversation about why they spend so much time at home can help you get to the root of any problems that might indicate they should move to an assisted living facility.

16. When you visit your friend or relative, do you notice piles of unopened mail?

This could be a sign of financial difficulties or, if they're confused by the mail, dementia. If they're not opening their mail, they might not be dealing with bills or finances either. Finances are often simplified when someone moves into an assisted living facility. Talk to your loved one and a financial advisor about their options.

17. Does your loved one seem happy?

Even if they're capable of caring for themselves, they might be ready for a change. If they don't seem happy, ask whether a change in their living situation could improve things.

Questions to ask about community

18. Do they have a supportive community?

Is there someone who regularly checks in on your loved one and visits their home? Do they keep regular social engagements or have peers they can relate to? Most senior housing options offer such a community, and assisted living facilities have a staff to supervise patients 24/7.

19. Have their friends or neighbors expressed any concerns to you?

If that's the case, talk to them about what they observe. They may have noticed things that would tell you it's time for your loved one to receive full-time care.

20. Can their caregiver continue doing everything necessary?

Being a caregiver is hard work, both physically and emotionally. If you or another relative are caring for your loved one full time, it may become impossible for the caregiver to provide adequate care. If that's the case, your loved one may benefit from an assisted living facility.

Bottom line: When is it time for assisted living?

Acknowledging that someone you love needs full-time care is hard. Recognizing that you can't give them that care may be difficult as well. If you're concerned about your aging loved one's safety, health or happiness, talk to them about their housing options. Involve their doctor and a financial advisor in your conversations so that you and your loved one understand all the senior living choices available to them..."

This handbook was created to provide you with information about CoHomes Boutique Senior Living, and to let you know that you do not have to go on this journey alone searching for a cozy caring home with superior personal care services, instead of a large facility. When I was in your shoes searching for an assisted living home for my grandmother, someone helped me. I want to extend that same courtesy to you.

My team and I are prepared to answer any assisted living related questions that you may have. For additional information visit our website or don't hesitate to contact me directly.

Be well and make today a fantastic day!

Charlotte Sanford, CEO
Charlotte@CoHomes.org
Call/Text/Fax: 704-272-1777

(B) INTRODUCTION TO COHOMES

CoHomes at Harrowfield is a completely furnished 6-bed boutique-style senior living home that provides private and semi-private bedrooms, delicious meals, housekeeping, and more. CoHomes at Harrowfield is registered with the State of North Carolina as a multi-unit assisted housing with services home (a type of assisted living residence), and is owned and operated by CoHomes NC, Inc. (hereinafter “CoHomes”). CoHomes is located at 11308 Harrowfield Road, Charlotte, NC 28226, on a peaceful tree lined street in McAlpine/South Charlotte about 1.5 miles from Ballantyne.

CoHomes features a newly renovated and completely furnished residential home with 3 bedrooms, 2 full bathrooms, living room, family room, sunroom/activity room, dining, kitchen, laundry room, outdoor patio with a sitting area, and large fenced-in backyard. Private and semi-private bedrooms are available for up to a total of six Residents.

The Ballantyne area is home to over 35 Fortune 500 companies and has many local and national retail stores, restaurants, hotels, grocery stores, shopping centers, salons and barber shops, wellness and fitness centers, movie theaters, cultural and sporting events, golf courses, parks and greenways, medical offices, nearby hospitals, and has easy access to major transportation, highways/interstates, and Charlotte-Douglas International Airport.

CoHomes’ mission is to provide boutique style easy-living and superior services in a residential home. We strongly believe that seniors live better together in a home setting. They are healthier, happier, and are not isolated. It’s not how BIG the house is, it’s how HAPPY the HOME is.

(C) OUR SERVICES

CoHomes recognize the challenges that some elderly people face, and offers a beautiful, safe and loving home for seniors that may benefit from personal care assistance to help them with activities of daily living so they can maintain their highest level of independence as they age gracefully. CoHomes secure home environment, meals, activities, and services are focused on fostering social interactions and maintaining an individual’s physical and cognitive abilities to enhance the quality of each Resident’s life.

CoHomes Residents are offered the following home amenities and personal care services. (CoHomes has a contractual agreement with a licensed home care agency to provide personal care services at a discount):

Home Amenities and Services -

- Furnished home including bedrooms, bathrooms, living room, family room, sunroom/activity room, dining, kitchen, laundry room, and outdoor patio
- Three nutritious home cooked and/or chef-prepared meals and snacks
- Paid utilities including gas, electric, and water
- Paid Internet service
- Fun activities (bingo, cards, movies, fun fitness etc.)
- Cable TV
- Home security system

- Emergency response system
- Maintenance and repairs
- Landscaping and lawn care
- Housekeeping
- Laundry services
- Assistance making and receiving telephone calls and video calls
- Scheduled activities (bingo, cards, art, movies, fun fitness etc.)
- Safety supervision (to assist residents living with Mild Cognitive Impairment, Early-Stage Dementia, Parkinson's Disease, or other health concerns)
- Medication reminders
- Bathing and grooming reminders
- Assistance with activities of daily living (bathing, grooming, dressing, transferring, and toileting)
- Incontinence Care
- Blood pressure monitoring
- Diabetic care
- Appointment management
- Transportation management to nearby appointments (doctor, dentist, beauty salon, barber, etc.)
- 24-hour staffing

Assistance with self-administration of medication may be provided by appropriately trained staff when delegated by a licensed nurse according to the home care agency's established plan of care. Our personal care services listed above are provided by EULA Home Care Agency.

Please note that the following services and items are not offered at CoHomes:

- Management of unsafe Resident behaviors, such as but not limited to wandering, abusive verbal or physically aggressive behavior, including coercive or inappropriate sexual behavior
- Management of any communicable disease and will not admit any Resident who has a communicable disease
- Incontinence products
- Management of incontinence care that cannot be managed with incontinence products

CoHomes does not accept or provide housing with services to residents that need 24-hour supervision or have any of the conditions or care needs listed below, except when a physician certifies that appropriate care can be provided on a temporary basis to meet the Resident's needs and prevent unnecessary relocation.

1. Ventilator dependency;
2. Dermal ulcers III and IV, except those stage III ulcers which are determined by an independent physician to be healing;
3. Intravenous therapy or injections directly into the vein, except for intermittent intravenous therapy managed by a home care or hospice agency licensed in North Carolina;
4. Airborne infectious disease in a communicable state that requires isolation of the individual or requires special precautions by the caretaker to prevent transmission of the disease, including diseases such as tuberculosis and excluding infections such as the common cold;

5. Psychotropic medications without appropriate diagnosis and treatment plans;
6. Nasogastric tubes;
7. Gastric tubes except when the individual is capable of independently feeding himself and caring for the tube, or as managed by a home care or hospice agency licensed in North Carolina;
8. Individuals requiring continuous licensed nursing care;
9. Individuals whose physician certifies that placement is no longer appropriate;
10. Unless the individual's independent physician determines otherwise, individuals who require maximum physical assistance as documented by a uniform assessment instrument and who meet Medicaid nursing facility level-of-care criteria as defined in the North Carolina Plan for Medical Assistance. Maximum physical assistance means that an individual has a rating of total dependence in four or more of the seven activities of daily living as documented on a uniform assessment instrument;
11. Individuals whose health needs cannot be met at CoHomes as determined by the residence; and
12. Such other medical and functional care needs as the Social Services Commission determines cannot be properly met at CoHomes.

CoHomes does not discriminate based on religion, race, ethnicity, color, sex, sexual orientation, gender, gender expression, national origin, or age.

CoHomes has premium residential assisted living housing with private and semi-private bedrooms. Maximum tenancy is two residents in each bedroom for a total census of up to six residents. CoHomes reserves the right to request double occupancy in each bedroom.

CoHomes may need to change Resident's bedroom assignments to comply with laws or lawful orders, or other reasonable purposes as determined by CoHomes, including making reasonable bedroom changes due to disputes between residents on the premises. CoHomes will provide Resident with written notice prior to making such changes, except in emergency situations.

Resident shall not use their bedroom or any part of the premises for business purposes, solicit business from other residents, or cause any actions that may disrupt the use and quiet enjoyment of other residents. CoHomes is a VAPE-FREE, SMOKE-FREE, and TOBACCO-FREE residence. No guns, weapons, non-service pets, smoking, or burning candles are allowed on the premises.

The initial residential lease agreement is for a period of one year. The Resident or CoHomes may terminate a Resident's rental agreement at any time, for any reason, by providing a minimum of thirty (30) days prior written notice of their intent to terminate. For example, if the Resident or CoHomes sends a termination notice any time in March, the Agreement will terminate on April 30th.

In addition, all CoHomes.org emails are secured and HIPAA compliant.

CoHomes mailing address is: 15105-D John J. Delaney Drive, #173, Charlotte 28277. All CoHomes mail should be sent to this address. Rent should be sent to this address.

CoHomes physical address is: 11308 Harrowfield Road, Charlotte, NC 28226. Resident mail such as supplies, cards, and gifts should be sent to this address. Important mail for the Resident should be sent to their responsible person.

(D) RESIDENT RESPONSIBILITIES

It is the responsibility of each Resident to meet their contractual financial obligations and abide by the leasing agreement terms.

Each Resident may use the current mattress and box spring provided by CoHomes, based on availability, or purchase a new or newly sanitized mattress and box spring.

In addition, each Resident/authorized representative is responsible for the following:

- Purchasing the Resident's clothing
- Purchasing the Resident's linen (towels, wash cloths, sheets, pillowcases, blankets, etc.)
- Purchasing the Resident's personal hygiene and incontinence care products
- Purchasing the Resident's medications, personal/physical medical equipment and paying medical bills and expenses
- Following all policies
- Treating other Residents and staff with dignity and respect
- Arranging assistance for unscheduled personal care needs that are not of an emergency nature (including making appointments such as doctor, dentist, beauty salon, barber, etc.)

All outside caregivers, companions, private duty aides, physicians, nurses, service providers and other personnel employed or retained by the Resident to render services to the Resident at the home must obtain security clearance required under North Carolina law and must be employed by a licensed agency with insurance coverage satisfactory to CoHomes in its sole discretion. CoHomes reserves the right to bar entry to the home to any such individual if CoHomes is unable to obtain such security clearance or if CoHomes has any reason to believe that such persons pose a risk of danger to the Residents or associates of CoHomes. Any person demonstrating disregard of CoHomes' policies may be prohibited from entering CoHomes.

CoHomes does not carry insurance on the Resident's property and personal effects. Resident must obtain and carry a policy of "Renters Insurance" adequately insuring all his or her personal property and possessions during their tenancy. Resident shall supply a copy of the rental insurance policy or certificate to CoHomes as requested by CoHomes. Residents will look solely to their insurer (and not to CoHomes) for reimbursement of damage or losses due to theft, fire, flood, storm damage, water damage, power surges, smoke damage, damage caused by other Residents, or any other damage or loss that is not caused by the intentional act or negligence of CoHomes, its associates, or its agents.

The Resident/authorized representative is responsible to make reasonable advance arrangements for managing and attending to his/her personal affairs in the event of incompetence. CoHomes highly recommends that Resident and his/her authorized representative discuss the options and obtain a Durable Power of Attorney for health care and financial decisions or other appropriate legal documents. In addition, CoHomes recommends that Resident address any specific requests as to the handling of Resident's death, including appropriate notification, disposition of body, and any other arrangements with his/her authorized representative or family members.

(E) RESIDENT SCREENING PROCEDURES

CoHomes will provide each Resident or responsible person with a copy of CoHomes' Resident Assessment Questionnaire. The Residential Assessment Questionnaire will be reviewed for compatibility with CoHomes, prior to admission.

The purpose of screening which will, at a minimum, be:

1. To assess each Resident to determine compatibility with CoHomes
2. to offer each perspective Resident or responsible person the opportunity to request a referral for needed supportive services
3. to identify each perspective and current Resident's need for an in-depth assessment by a licensed home care agency to determine CoHomes suitability relative to the perspective Resident's need for assistance
4. to determine each perspective Resident's need for higher level of care.

Based on the results of the residential assessment questionnaire, the Executive Director or an associate of CoHomes may conduct the initial assessment screening or interview with each perspective Resident and may refer the Resident for an in-depth assessment with a Registered Nurse (RN).

The Executive Director or an associate of CoHomes or a licensed home care agency will perform an assessment of the Resident following a significant change in the Resident's condition and make recommendations accordingly. Plus, CoHomes will conduct an annual assessment.

If the screening results are not compatible with CoHomes the perspective Resident will be notified by email, U.S. mail, FedEx, UPS, or telephone and offered a referral.

All assessment screening information is confidential and will only be shared with CoHomes, your contracted licensed home care agencies, your physician(s), medical or emergency workers, your responsible person, and emergency contacts (if an emergency arises). Information regarding meals, dietary restrictions, and favorite and least favorite foods and things will be shared with cooking and activity staff/contractors.

(F) HOME CARE AGENCY DISCLOSURE

CoHomes NC, Inc., has entered into a contractual agreement with EULA Home Care Agency, LLC, to provide personal care services at a tremendous discount to our Residents. Nevertheless, Residents may choose any licensed home care provider for personal care services.

The Resident is responsible for making separate payments to CoHomes and the home care agency. All home care service charges will be billed directly from and payment must be made directly to the agency that provides the personal care services. CoHomes does not receive any compensation from EULA and will not accept any compensation from any other home care agency.

CoHomes will not combine charges for housing or housing related services with personal care services.

(G) EMERGENCY RESPONSE SYSTEM

CoHomes is equipped with an emergency call system, smoke alarms, carbon monoxide detectors, and fire extinguishers. The emergency call system will be monitored by an associate of CoHomes. When used, the associate will be alerted and they will handle the situation, assist the Resident, and attempt to notify the Resident's physician and/or responsible party, as needed. Whenever an associate, caregiver, or Resident at CoHomes determines that an emergency exist, they will immediately call 911.

(H) CONCERNS, SUGGESTIONS, OR COMPLAINTS

CoHomes encourages all Residents and family members to express any concerns, suggestions or complaints about CoHomes and to suggest remedies or improvements in its policies and services. CoHomes will be responsive to reasonable concerns and suggestions. Residents and family members are encouraged to let an associate know when services and policies are satisfactory and should continue unchanged. CoHomes will listen courteously and respectfully to complaints.

If a Resident is not satisfied with this explanation, the Resident should follow the steps listed below until resolution:

- Complete a Concern/Resolution Form located on our website at CoHomes.org and inside the Resident's admissions folder; or
- Upon receipt of the Concern Form, a CoHomes Associate will work with the Resident to attain a mutually agreeable resolution of the issue.
- If the situation is not resolved to the Resident's satisfaction, the Resident or the Advocate is encouraged to report the complaint to the Executive Director or CEO who will respond to the Resident initially within 2 business days of receipt, and work to resolve the issue in a timely manner, usually within 3 additional business days and follow up with results.
 - Charlotte Sanford, CEO: 704-272-1777 or Charlotte@CoHomes.org.

At any time, the Resident may feel free to contact the Department of Health and Human Services number (919) 855-3765) or the Division of Health Service Regulations hotline (1-800-624-3004).

At no time will any CoHomes associate take an improper action against a Resident for making a complaint, whether the complaint is valid or invalid. CoHomes may initiate disciplinary action, including dismissal, against any associate who is found to be threatening, ignoring, humiliating, retaliating, or discriminating against Residents who voice complaints.

(I) COST OF SERVICES – Effective as of January 1, 2024

CoHomes Monthly Fee includes rent, meals, housekeeping, and the services listed below. The New Resident Community Fee covers administrative costs, the resident's initial service coordination plan, establishing a replacement reserve for improvements, COVID-19 related supplies, and other expenses.

- New Resident Community Fee (non-refundable, due prior to move-in) - \$2,500
- Monthly Housing Cost:
 - Semi-Private Bedroom with Twin Size Bed: starting at \$4,900
 - Semi-Private Larger Bedroom with Full-Size Bed: starting at \$5,100
 - Private Bedroom with Twin Size Bed: starting at \$5,800
 - Private Larger Bedroom with Full-Size Bed: starting at \$6,000
- Housing Services, Activities, etc.:
 - Three Home Cooked Meals and Snacks Served Daily – cost included in monthly fee
 - Housekeeping (deep cleaning and general tidying) – cost included in monthly fee
 - Utilities (gas, electric, and water) – cost included in monthly fee
 - Internet/Wi-Fi and Security System – cost included in monthly fee
 - Emergency Call System – cost included in monthly fee
 - Furniture Rental – cost included in monthly fee
 - Bedding and Linen – 1 set of each included in monthly fee
 - Laundry Services – cost included in monthly fee
 - Activities – cost included in monthly fee
- Personal Care Services:
 - CoHomes has a contractual agreement with a licensed home care agency that offers 24-hour staffing and personal care services to our residents at a tremendous discount. Personal care services include bathing, grooming, dressing, toileting, transferring, mobilizing, incontinence care, diabetic care, blood pressure monitoring, appointment and transportation management with or without an escort, increased supervision due to cognitive decline, early-stage dementia or other health concerns, and more.
- Total Cost of Housing and Personal Care Services:
 - Some of CoHomes' services overlap with the licensed home care agency who they have a contractual agreement with, allowing CoHomes to reduce their rates and pass the savings on to their residents. The average combined discounted cost for housing and personal care services is about \$5,600 for a shared/semi-private bedroom. The actual total cost will be determined after the assessment is completed. The combined cost for both companies will be divided appropriately and billed separately.

