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Choosing an assisted living facility can be overwhelming — what families need to know

Location, monthly rate are important, but so are environment, a loved one's future needs, dining options, enrichment activities, Valley healthcare professional says

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Alicia M. Brown, ASB, LPN

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By Alicia M. Brown, ASB, LPN | Glendale

OPINION — There is so much to consider when choosing an assisted living facility, starting with whether it offers the appropriate level of care for a loved one's needs.

Not all long-term care facilities are created equal. Does your loved one need assistance with activities of daily living or are they independent? Maybe they just need help with transportation or medication administration and on-site staff checking in to be sure they are safe? Perhaps they need a higher level of care and a skilled nursing environment. Maybe they've recently had a fall or stroke and would benefit from rehabilitation before moving to assisted living, or an assisted living environment that also has an on-site gym where residents can receive rehabilitation services like physical therapy, occupational therapy or speech therapy.

Touring facilities can be overwhelming. Considering a move to assisted living can be a big adjustment, and it often comes at a time when families are overwhelmed by a recent decline in health, a hospitalization or significant behavioral changes that make it no longer safe for a loved one to live at home.

Consider visiting first without your loved one. Seeing too many

ADDITIONAL QUESTIONS TO ASK

Beyond the standard questions, here are some questions specific to loved ones' circumstances to consider:

- Does your loved one smoke? If so, is smoking allowed on the property and does the facility have a smoking program to assist your loved one safely?

- Is transportation to doctor's appointments, shopping, etc., provided? If so, is there a cost and/or is there a radius limitation?
- Based on the funding source, will your loved one get a shared or private room? Will the bathroom be shared or private?
- How much notice does the community require if you plan on moving your loved one? If it is an unplanned move (the level of care is no longer appropriate for the community or the resident required a hospitalization and is being discharged to a skilled nursing facility), what is the community's policy?
- Does your loved one have pets? What is the pet policy?
- Are residents allowed overnight visitors? Is the facility secured or are residents able to walk out the front door unsupervised? Do they have 24/7 awake staff? Are couples able to move in (married couples, siblings, etc.)?
- Do residents need to eat in the dining room or can they

places can be overwhelming, confusing and if you tour some with questionable care, the potential resident may decide there's "no way I'm going to one of those places!"

Call first with questions, and if the answers meet your criteria, schedule a tour. Narrow your list down and show your loved one your top picks or have their representatives come to your home to evaluate your loved one for candidacy so you don't tour a place that decides that the potential resident's level of care isn't a good fit for their community.

Having as many details ironed out as possible before involving your loved one can help alleviate frustration and anxiety.

Observe the environment

How do you feel when walking in? Are you greeted? Do you feel welcome? How does it smell? How are residents dressed? Do they seem happy, engaged? Do staff seem happy and approachable?

You'll likely meet with an admissions coordinator (sometimes referred to as the marketing director or director of business development). Your guide should be patient and helpful, not rushed. They should be attentive and bring up things you may not have considered, using this as an opportunity to show you their community as well as to educate you so even if you don't choose their community, you leave armed with knowledge that you can take on your next community tour.

Consider your loved one's future needs

Choosing a facility isn't an easy decision, and moving can take a toll on your loved one. To avoid a future move, make sure your loved one can comfortably age in place. If there is a dementia diagnosis, are they able to care for them when they lose the ability to feed themselves, when they start wandering or experiencing sundowners, or have verbal outbursts?

have meals delivered to their room? If so, is there a delivery cost?

- Can you take your loved one out overnight or for longer stays over holidays or trips out of town to see other family members?

- Does the facility provide respite care?

- Can residents keep their own money on hand in the facility for outings, shopping, hygiene items or other necessities? If the resident has confusion, is there a staff member on hand that manages small amounts of money for residents?

- What providers visit the community: primary care physicians, dental, vision, labs, imaging, hospice, home health/wound care, dietitians, specialty providers, psychiatry, etc.?

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If there is a physical decline, are they able to maintain the resident's safety once they are no longer able to shower or get dressed on their own or if they become a fall risk? Will your loved one be able to receive visiting nursing services if needed? If the time comes, will the facility be able to have hospice on-site?

Dining services

Food might be something your resident looks forward to, so dining options are very important. As your loved one ages, their appetite may diminish, so a caring dining staff who recognizes residents' likes and dislikes, encourages hydration and provides alternatives for picky eaters is key.

Kitchen staff who accommodate special diets, carb-controlled/diabetic diets, renal diets, allergies and intolerances as well as texture modifications for those who may need finger-foods or need food cut into bite-sized pieces also is essential.

Perhaps your loved one has swallowing difficulties after a stroke and needs their food pureed or liquids thickened. Be sure to check with each community to make sure all needs can be safely met.

Enrichment programs, activities and resident demographics

Many assisted living homes enjoy different activities. BINGO, cards, games, movies and crafting are popular, while others include karaoke, fun outings and little day trips. Perhaps your loved one is more active or maybe they're younger. It's important to find an environment that meets everyone where they are.

Are you touring on behalf of someone in their 20s or 30s after a fall, auto accident or a work injury left them unable to live independently? While the things to consider remain largely the same, there's even more to think about. Will the activities be diverse enough to challenge this younger resident? Are there other residents their age that they can befriend?

If your loved one has memory issues or physical limitations and needs reminders about activities or assistance getting to activities, will staff assist? Perhaps they need physical therapy, occupational therapy, speech therapy; does the facility offer those supports in house? Is the gym monitored by staff if residents want to use equipment outside of scheduled therapy times?

Levels of care and budget



As the marketing director for a large brain injury assisted living organization, as well as being a nurse who has had to place a loved one, some of the hardest calls I get are from families who say, “We have great medical insurance,” thinking assisted living will be covered.

Medical insurance covers medical stays, such as hospitalizations, post-acute and rehabilitation centers and skilled nursing facilities. Assisted living is not a medical stay. Unless you have a long-term care plan, or you’re looking for arrangements based on a work injury

and worker’s comp is covering the stay, this will likely be an out-of-pocket expense — a long-term out-of-pocket expense.

In Arizona, Medicaid (AHCCCS — Arizona Health Care Cost Containment System) has an option for those who qualify. ALTCS — Arizona Long Term Care System — can pay a significant portion of the costs associated with long-term care/assisted living.

If the resident has an income like Social Security, there will be a shared cost as well. This will be a portion of the Social Security income and your ALTCS case manager will advise how much your shared-cost portion will be. Individuals must first qualify financially to receive ALTCS benefits. Medicaid will review your assets to determine if you meet the criteria. Find more information at azahcccs.gov.

Once the financial criteria has been met, you must qualify physically/medically. ALTCS uses a score-based system to identify those who are not able to perform their own activities of daily living in an effort to appropriately identify if someone is unable to live safely on their own. ALTCS residents are still responsible for any physician or pharmacy co-pays, but the majority of their expenses with the living facility will be covered. Rooms usually include basic cable, meals and utilities.

An important thing to keep in mind is that many facilities assign varying levels of care when they assess potential residents. For example, you may be quoted a price of \$4,500 per month; however, if your loved one requires medication management, they may charge an additional \$500 or more monthly. If they are on 10 or more medications, that may be another \$500 per month. If they need a call button/lanyard, that may be another \$500. If they need assistance with dressing, toileting, showering, etc., those may be extra charges that can add \$1,000, \$2,000 or a month on top of the monthly rate.

There is often a one-time community fee due at move-in. Some communities also require a deposit. Community fees typically range from \$3,500 to \$5,000, but could be more.

While many families focus primarily on location thinking, “If mom is only 5 minutes away, I’ll see her more often” that may be ideal, but location shouldn’t supersede care, resident needs or amenities that may enhance quality of life.

Also, don't pay extra for a community with luxury amenities your loved one doesn't care about, will not utilize or is unable to enjoy. They may have a lovely pool and putting greens, but if your loved won't use them, there's no need to pay for them.

Your residency agreement shouldn't lock you in for a long period of time. A 30-day notice is often all that is required prior to moving out of a community (and even then, exceptions can be made for hospitalizations, illness or the need for a different level of care).

Talk to others — physicians, neighbors, co-workers — many have already faced these challenges and could offer suggestions and support. As you navigate this complex new path, remember to take a deep breath, ask for help, gather resources, write lists of questions and remember that the assisted living community should be focused on helping you, not increasing your anxiety or simply filling their beds.

Alicia M. Brown, ASB, LPN works in the brain injury and memory care field. Please submit comments at yourvalley.net/letters or email them to AzOpinions@iniusa.org. We are committed to publishing a wide variety of reader opinions, as long as they meet our [Civility Guidelines](#).