Sharon S. Richardson

COMMUNITY HOSPICE

CARING FOR OUR COMMUNITY

Understanding the Senior Living Continuum of Care

August 17th, 2021

NASW of Wisconsin-approved CEU

W2850 State Road 28
Sheboygan Falls, WI 53085

www.ssrhospicehome.org
Toll Free: 866.467.2011

4411 Calumet Ave, Ste 4
Manitowoc, WI 54220

Understanding the Senior Living Continuum of Care

About This Handout

Developed by the Sharon S. Richardson Community Hospice, this handout on Understanding the Senior Living Continuum of Care is being presented as part of a virtual presentation designed to promote and adhere to social distancing guidelines recommended by the Wisconsin Department of Health Services and the CDC. The contents of this handout include NASW-approved presentation slides and participant requirements for successful completion of this CEU.

About Sharon S. Richardson Community Hospice

The Sharon S. Richardson Community Hospice is dedicated to providing high-quality, compassionate end-of-life care to all who are in need. Hospice is much more than a place; it's an experience that incorporates a plan of care tailored to your needs and wishes. Our team partners with you to carry out this plan, allowing you and your loved ones to make the most of the time remaining. Our goal is to preserve your dignity and enhance the quality of your life.

Our hospice and palliative care services are provided wherever you call home: a care facility, a private residence, or when appropriate, at our Inpatient Center. Our expert staff and caregivers are there whenever you need us, with skilled nursing care, support and grief services. We are a compassionate partner in your end-of-life journey, providing encouragement and support to you and your loved one.

To learn more about the Sharon S. Richardson Community Hospice and our palliative care services, please call us at: **866-467-2011** or visit our website at: www.ssrhospicehome.org

NASW – Requirements

Approved by the Wisconsin Chapter of the NASW, participants must complete a short quiz and program evaluation after this online presentation.

Quiz- The quiz will be presented at the end of the presentation and then again via email one hour after the CEU concludes.

- Please note that the quiz only needs to be completed once, either at the end of the presentation or via the emailed link.
- Quizzes submitted via email must be received within 24hrs from the completion time of the CEU presentation.

Program Evaluation- the program evaluation will be presented as a pop-up window after a participant exits the training program. The evaluation will also be available within the follow-up email sent one hour after the CEU concludes.

Copyright © 2021 Sharon S. Richardson Community Hospice
All rights reserved. No part of this publication may be reproduced, distributed, or transmitted in any form or by any means, including photocopying or other electronic or mechanical methods.

Sharon S. Richardson
COMMUNITY HOSPICE

The Continuum of Senior Living Care

The NASW has approved the following presentation of Wisconsin for one (1) continuing educational unit (CEU).

Upon completing this presentation, those wishing to earn credit are required to complete a brief quiz and program evaluation.

More Continuing Education

To learn more and/or register for our upcoming NASW-approved CEs, please visit:

http://www.ssrhospicehome.org/ceh

or scan this QR code.

This presentation will start momentarily

Sharon S. Richardson
COMMUNITY HOSPICE

CARING FOR OUR COMMUNITY

The Continuum of Senior Living Care

Presented by:
Brian C. Gregg, DHS Administrator, PMP

The Continuum of Senior Living Care

This presentation was developed to provide a basic understanding of the regulatory differences between the different levels of assisted living care and how the growing senior population is affecting the industry.

During this presentation we will examine...

- the definitions and licensures for RCAC, CBRF and Memory Care.
- the amenities and services provided at each level of the senior living continuum.
- the expectations of security, supervision and care provided at each level of the senior living continuum.

Learning Objectives

At the conclusion of this presentation, you will be able to...

- Understand how the growing demand for senior housing has affected long term care models in Wisconsin.
- Understand the regulatory differences between RCAC, CBRF and Memory Care licensures and the impact on the continuum of care.
- Understand the training requirements and general staffing patterns for caregivers within the different licensures for Wisconsin senior living communities.

Senior Living Terminology

Definitions for the terminology commonly used within the senior living industry.

Assisted Living – defined as any DHS regulated living environment where assistance with activities of daily living are provided as part of the regular services offered.

Senior Living Continuum – sometimes referred to as a continuing care retirement community (CCRC), is a senior living complex that provides various levels of care to meet the needs of individuals as they age.

Community – a general marketing term used within the senior living industry to refer to a complex or facility.

Unit – used within a senior living community, refers to a segment of the resident population as defined by DHS regulations.

Resident - as defined by DHS, a resident is a person unrelated to the licensee or administrator who resides in the CBRF and who receives care, treatment or services in addition to room and board.

Caregiver – a staff member whose primary role is to provide care to members of the resident population.

DHS – the Wisconsin Department of Health Services, responsible for the Administrative Codes for CBRF and RCAC Licensures.

DQA – the Wisconsin Department of Quality Assurance, responsible for the oversight and enforcement of DHS administrative codes.

RCAC – Residential Care Apartment Complex, a blend of independent and assisted living.

CBRF – Community Based Residential Facility, includes memory care units/communities.

The Growing Senior Population

When the last of the baby boomers reach age 65 in 2030, they will represent more than 20% of the total U.S. population, numbering about 60 million people.

The U.S. Department of Health and Human Services projects that about 70% of the 65-plus population will require some form of long-term care, creating an unprecedented demand for services in the coming decades.

Taking a closer look at Wisconsin, the number of seniors 65-84 years old to be 1,251,765 by 2040, an increase of 90.0% from the 2010 census.

Egan-Robertson. (2013, December). *Wisconsin's Future Population*. UW-Madison Applied Population Laboratory. https://cdn.apl.wisc.edu/publications/FinalProjs2040_Publication.pdf

By 2030, All Baby Boomers Will Be Age 65 or Older. (2019, December 10). United States Census Bureau. https://www.census.gov/library/stories/2019/12/by-2030-all-baby-boomers-will-be-age-65-or-older.html

The Growing Senior Population: Demand for Services

Senior housing and associated supportive services are experiencing an unprecedented and growing demand for services.

Assisted living capacity has nearly doubled since 2004, resulting in the current trend of large-scale senior housing developments.

Services such as home care, home health care, out-patient OT/PT and hospice care have closely followed the same growth trends. Many of these services are offered within larger senior living communities to complement their current continuum of care.

Getting to 2025: A Senior Living Roadmap. (2016, January). Argentum. https://issuu.com/seniorlivingexcellence/docs/argentum-getting-to-2025

The Growing Senior Population: Evolving Care Models

The demand for senior care has created a competitive industry, resulting in innovative and evolving care models meant to allow seniors to age in place.

Independent living, assisted living and memory care communities are being blended to promote seamless care as people age and their needs change.

RCACs, CBRFs and Memory Care communities are individually licensed, having specific regulatory requirements for admission and the level of care that may be provided.

- A typical senior living continuum will have at least two DHS licensures.

Understanding the different regulatory requirements for each level of care can help guide your recommendations to patients in need of long-term care.

The Growing Senior Population

The growth of Wisconsin's senior population has resulted in the unprecedented demand for senior living communities and associated care services.

Key Takeaways

- ✓ The number of Wisconsin seniors 65 and older is projected to increase by more than 90.0% by 2040.
- ✓ A typical senior living continuum will maintain at least two DHS licenses.
- ✓ 70% of seniors 65 and older will require some form of long-term care.

If you have any questions at this time, please use the chat box to let us know!

Residential Care Apartment Complex (RCAC)

A residential care apartment complex provides an independent living environment with access to 28 hours of supportive and nursing services per week.

RCACs are required to conduct a comprehensive assessment prior to admission and shall identify and evaluate a person's preferences and need for services.

Prior to the date of occupancy, residents are required to enter into a jointly negotiated risk agreement with the community.

No RCAC may admit any of the following persons:

- A person who has a court determination of incompetence and is subject to guardianship under ch. 54, Stats.
- A person who has an activated power of attorney for health care under ch. 155, Stats.
- A person who has been found by a physician or psychologist to be incapable of recognizing danger, summoning assistance, expressing need or making care decisions

Chapter DHS 89. (2021). Wisconsin State Legislature. https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/89

RCAC: Amenities & Services

Often featured in commercials and print ads, RCACs serve as the "model" for senior living.

The newer developments often include spacious dining rooms with chef-prepared meals, fitness studios with specialty equipment and movie theaters that double as golfing ranges.

Apartments are often available in one- and two-bedroom layouts with modern designs that include fully functioning kitchens with high-end fixtures and appliances.

Why does this matter?
The average cost of luxury senior living is between $2,800 - $4,000 a month (without care services) which is not covered by insurance.

RCAC: Caregiver Staffing & Training

The training and scheduling of caregivers in an RCAC is based on DHS licensure, stating residents cannot receive more than 28 hours of assistive care per week.

Most RCACs staff 2-3 caregivers for every 15-20 residents during waking hours.

1-2 caregivers for every 15-20 at night.

Only those caregivers providing direct services are required to be trained to identify the characteristics associated with aging, the philosophy of assisted living, tenant privacy and the specific care tasks required by the resident.

It is important to remember that RCACs are designed for those that need minimal help and can advocate for their own care.

Chapter DHS 89. (2021). Wisconsin State Legislature. https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/89

RCAC: Security & Supervision

What most RCACs provide:
- Concierges to assist visitors and accept deliveries.
- Key fobs for residents and family members to access the building.
- Onsite caregivers to provide emergency assistance 24hrs a day.

What most RCACs do NOT provide:
- Concierge services are not available 24hrs a day.
- Exits are not secure from within the building to prevent elopement.
- Staffing patterns in most RCACs do not support a high acuity resident population (especially overnight).

Why this matters
RCACs are designed to provide 28 hours of care per week for independent individuals that do not pose any risks associated with cognitive impairment.

Residential Care Apartment Complex: Summary

Designed for independent seniors with minimal care needs, RCACs are typically the entry point for many entering into the continuum of senior living.

Key Takeaways

- ✓ Individuals with an activated power of attorney may not be admitted into a RCAC unless the legal representative is also residing in the same apartment.
- ✓ The average cost of an RCAC apartment is between $2,200 and $4,000 a month without care services.
- ✓ Most RCAC staffing models are based on the DHS regulation that restricts care to no more than 28 hours per week per resident.
- ✓ RCACs provide a safe environment but are not designed for those that are prone to wandering or are an elopement risk.

If you have any questions at this time, please use the chat box to let us know!

Community Based Residential Facility (CBRF)

Community-based residential facilities provide various supportive, protective, or supervisory assisted living services designed to allow individuals to live in a non-restrictive but secure home-like environment.

CBRFs are licensed by size and have an ambulatory classification.

A resident's cognitive and ambulatory status must be compatible with the facility's license classification to be admitted.

Residents may receive up to 3 hours of nursing care per week, provided the total number of individuals requiring the same level of care does not exceed 10% of the licensed capacity.

Chapter DHS 83. (2021). Wisconsin State Legislature. https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/83

CBRF: Amenities & Services

CBRFs that are part of a continuum will have either a medium or large classification with available amenities and services determined by the client groups being served.

The newer developments offer spacious dining rooms that can accommodate individuals requiring different levels of care.

Most medium and larger CBRFs have studios with kitchenettes that may or may not include ranges or microwaves.

Although most studios come unfurnished, DHS 83.43 requires that the CBRF provide a bed, mattress, pillow, sheets and towels

Many have fitness studios that provide PT/OT and large common spaces for life enrichment activities and socialization.

On average, the cost of assisted living (CBRF) is between $4,060 - $6,100 a month with basic care services.

Chapter DHS 83. (2021). Wisconsin State Legislature. https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/83

CBRF: Caregiver Staffing & Training

Most CBRFs have an onsite nursing team responsible for training and the delegation of physician-ordered care to the caregiving staff.

Most CBRFs staff 2-3 caregivers for every 8-12 residents during waking hours.

1-2 caregivers during nighttime hours.

Training and scheduling is based on the acuity of the current client group being served. All staff members are required to receive DHS approved training for standard precautions, fire safety and first aid and choking.

- Medication administration and management is only required for those that handle and/or distribute medications.

*All care requiring nurse delegation must have a physician's order.

Chapter DHS 83. (2021). Wisconsin State Legislature. https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/83

CBRF: Security & Supervision

The regulatory requirements for CBRFs are written to protect the rights of vulnerable individuals in a more secure environment.

What most CBRFs provide:

- Concierges to assist visitors and accept deliveries.
- Alarmed doors to notify staff when someone is leaving the building.
- 24/7 caregivers to conduct regular wellness checks and provide emergency assistance if required.
- Enclosed patios/gardens

What most CBRFs do NOT provide:

- Key fob access to residents or families when members of the resident population may have cognitive impairment.

It is important to note that most residents of a CBRF may come and go as they please. Security and supervisory protocols are in place to ensure the safety of those experiencing undiagnosed cognitive decline.

Community Based Residential Facility: Summary

Modern CBRFs provide a wide range of assisted living services and make up the middle and latter stages of the senior living continuum of care.

Key Takeaways

- ✓ Residents of a CBRF may not receive more than 3 hours of nursing care per week.
- ✓ All care provided in a CBRF that requires nurse delegation must have a physician's order.
- ✓ All caregivers of a CBRF are required to receive DHS approved training for standard precautions, fire safety and first aid & choking.
- ✓ Most CBRFs have security and supervision protocols in place to ensure the safety of those experiencing undiagnosed cognitive decline.

If you have any questions at this time, please use the chat box to let us know!

Memory Care Community (MC)

Memory Care units specialize in caring for persons with various dementias such as Alzheimer's Disease, Parkinson's Disease or Vascular Dementia (dementia caused by strokes). They are often part of a larger Assisted Living community.

Subject to the regulatory requirements of DHS Chapter 83, memory care units have the same licensure as a CBRF. Individuals admitted to a memory care unit must be compatible with the facilities license classification.

- Because some seniors with dementia go undiagnosed, many memory care units include the client group Advanced Aged to their DHS classification. This allows for admission when an undiagnosed individual poses a safety concern for themselves.

Chapter DHS 83. (2021). Wisconsin State Legislature. https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/83

Memory Care: Amenities & Services

Memory Care units that are part of a continuum will typically have a medium size classification and stand-alone communities are licensed with the large DHS classification. Amenities and services are specific to those with irreversible dementia and/or dementia.

The newer developments have circular floor plans to allow for wandering and reduce exit- seeking behavior. Interior lighting and window placement are designed to minimize the effects of sundowning. Many communities with memory care units have a blend of large and smaller common spaces to accommodate the needs of individuals with varying cognitive impairments.

Most memory care units that offer studios do not include ranges or microwaves for safety purposes.

On average, the cost of memory care costs between $5,500 - $8,200 a month with basic memory care services.

Memory Care: Caregiver Staffing & Training

Most memory care units have an onsite nursing team responsible for training and the delegation of physician-ordered care.

Most memory care communities will staff 1-2 caregivers for every 6-8 residents.

Staffing levels are usually unchanged during nighttime hours.

Training requirements for caregivers in a memory care unit also include the characteristics of the client group served, activities, safety risks, environmental considerations, disease processes, communication skills, and nutritional needs.

Although most memory care units will have larger nursing departments and caregivers that are CNAs, all care requiring nurse delegation still must have a physician's order.

Chapter DHS 83. (2021). Wisconsin State Legislature. https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/83

Memory Care: Security & Supervision

The DHS regulatory requirements for Memory Care units are written to protect the rights of vulnerable individuals in a more secure environment.

What most memory care units provide:

- Concierges or care attendant at the front door to assist visitors and provide additional security.
- Alarmed doors and Wander Guard systems to notify staff when someone is leaving the building.
- 24/7 caregivers to conduct regular wellness checks and provide emergency assistance if required.
- Enclosed patios/gardens

What most memory care units do NOT provide:

- Key fobs are not provided to families due to the risk of elopement and liability to the facility.

Residents may leave the facility with an approved escort.

Memory Care: Summary

A good memory care program will provide purposeful engagement that promotes dignity and independence in a secure environment with a well-trained care staff.

Key Takeaways

- ✓ Individuals admitted to a memory care unit must be compatible with the facilities license classification.
- ✓ Subject to the regulatory requirements of DHS Chapter 83, memory care units/communities are CBRFs.
- ✓ Memory Care caregivers are required by DHS to be trained in the characteristics of those with irreversible dementia and Alzheimer's Disease.
- ✓ Alarmed doors and Wander Guard systems are utilized to reduce the risk of elopement and keep the resident population safe.

If you have any questions at this time, please use the chat box to let us know!

The Cost of Senior Care: Pricing Structures

Pricing structures differ among the various senior living communities.

- All-inclusive pricing
- Room & board plus the cost of care
  - Ala cart care pricing
  - Tiered care pricing
- Ala cart pricing for all services provided

Average cost of Wisconsin senior living (based on DHS licensure data).

RCAC - $2,800 - $4,000 per month without care services.

CBRF - $4,060 - $6,100 a month with basic care services.

Memory Care - $5,500 - $8,200 a month with basic memory care services.

Regardless of the pricing structure, the sales pitches and the amenities offered, the basic cost of senior living will fall into one of these ranges.

DQA Provider Search. (2021, April 4). Wisconsin Department of Health Services. https://www.forwardhealth.wi.gov/wiportal/Subsystem/public/DQAProviderSearch.aspx

References

By 2030, All Baby Boomers Will Be Age 65 or Older. (2019, December 10). United States Census Bureau. https://www.census.gov/library/stories/2019/12/by-2030-all-baby-boomers-will-be-age-65-or-older.html

Chapter DHS 83. (2021). Wisconsin State Legislature. https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/83

Chapter DHS 89. (2021). Wisconsin State Legislature. https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/89

Egan-Robertson. (2013, December). *Wisconsin's Future Population*. UW-Madison Applied Population Laboratory. https://cdn.apl.wisc.edu/publications/FinalProjs2040_Publication.pdf

Getting to 2025: A Senior Living Roadmap. (2016, January). Argentum. https://issuu.com/seniorlivingexcellence/docs/argentum-getting-to-2025

DQA Provider Search. (2021, April 4). Wisconsin Department of Health Services. https://www.forwardhealth.wi.gov/wiportal/Subsystem/public/DQAProviderSearch.aspx