

Assisted Living In Idaho

July 2011-
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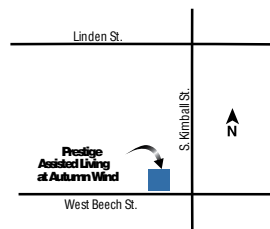
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Welcome

Years ago when an elderly parent or parents could no longer fend for themselves in their own home they had a choice of moving in with family or going to a nursing home. Neither option is an ideal choice. It's just been in the last few years the concept of assisted living has emerged to bridge the gap between independent living and nursing care without unduly disrupting the lives of family members. Assisted living, with its less intense services, also provides clear cost benefits when competitively compared with a skilled nursing facility.

Making such a life-changing transition is not easy on anyone. Like most actions in life, the less that is known the more it is feared. In most cases having to make decisions about assisted living is brought on by unexpected events such as a hospital stay or accident. It's one of those things we just never get around to talking about or planning. This booklet will hopefully shine a light on this transition explaining the many options available to help remove some of the fear and make way for clear, well-informed decisions.

Assisted Living in Idaho

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What is Assisted Living?

Assisted living was designed to give the independence of a private apartment while supplying the varying degrees of help with the activities of daily living (ADL's) such as eating, bathing, dressing, laundry, housekeeping and assistance with medications on an as-needed basis. These residential settings maximize independence, but do not provide the intensive level of skilled nursing care found in nursing homes.

Currently, over 6,000 Idahoans reside in about 275 residential care/assisted living facilities licensed by the State of Idaho. Assisted living is offered to anyone over the age of 18 who is diagnosed as elderly, physically disabled, developmentally delayed, mentally ill or brain trauma injured. Some facilities have earned multiple designations and may mix resident populations which means they may have mentally ill residents or developmentally delayed residents along with elderly. We will cover this in more depth later in "Which Type of Assisted Living is Best Suited for Your Situation?" For our purposes this booklet will deal with the elderly portion of this population.

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Who Oversees Assisted Living in Idaho?

Assisted living facilities are certified and licensed by the State of Idaho, Department of Health and Welfare, Medicaid Bureau of Facility Standards (Appendix A). The Bureau of Facility Standards surveys each Residential Assisted Living Facility (RALF) in the state. The staff of eight inspectors considers operations and facility issues such as staffing patterns and building structure in their evaluations. Results of the most recent survey are to be prominently displayed at the facility in easy view of visitors. If there is a deficiency in some area, the department asks for a plan of correction.

... Facilities that perform well on inspections and have no complaints may not be inspected for three years,

Facilities that perform well on inspections and have no complaints may not be inspected for three years, while problem facilities could be inspected three or more times per year. In addition to fines, inspectors issue a provisional license, which bans admissions and forces facilities to hire approved professional consultants, who submit weekly reports to keep the state informed of progress in resolving issues.

In addition, Idaho requires administrator certification. All assisted living administrators in Idaho must take a residential care training course and then pass an exam. The Bureau of Occupational Licensing requires a background check before issuing a Residential Care Administrator's license.



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How to Tell if it's Time for Assisted Living

Sometimes a recent illness or loss will leave no question that a parent will be unable to continue to live independently and, with others, a slow deterioration in daily living will often go unnoticed until a serious incident occurs. Here are some signs to look for that may indicate the time has come to consider assisted living.

- Is your loved one mixing up medications, taking them incorrectly or not taking them at all?
- Is your loved one keeping his or her doctor's appointments?
- Can your loved one still manage the components of running a household, such as keeping a checkbook or paying bills?
- Is there a dramatic change in how the house is kept?
- Does your loved one's medication need to be increased?
- Does he or she use medical equipment like an oxygen tank or need daily or weekly treatments like dialysis?
- Is your loved one in need of rehabilitative care?
- Has there been an increased susceptibility to falling and bruising?
- Is your loved one's mental reasoning ability at a level where his or her personal safety and the safety of others is at risk?
- Is your loved one having a difficult time walking, dressing or eating?
- Is your loved one isolated from social contact?
- Are his or her sleeping habits, eating habits or activity levels changing?
- Is a family caregiver exhausted due to the amount of care your loved one needs?

Assisted living facilities strive to be like a community where the residents can feel comfortable, find familiar faces and build relationships just like they would in their homes. By planning ahead and having the conversation, you can ensure that your loved one will be provided with the highest quality of care and quality of life.

...with others, a slow deterioration in daily living will often go unnoticed until a serious incident occurs.

Having That Conversation on Assisted Living

Nearly half of all Americans will need long term care at some point in their lives. Planning is crucial if you are to designate a facility that will be able to provide your loved one, relative or friend with the highest standard of care and quality of life in a safe and secure environment.

Planning helps to diminish the feeling of loss or guilt that some experience, either when entering or placing a loved one or relative in an assisted living residence. In addition, it aids in making the transition less stressful for the new residents, families and loved ones.

Having a conversation about a person's long term care wishes in advance will be helpful when the time comes to make more concrete decisions about the daily care of loved ones who can no longer care for themselves.

Yet, the decision to reside in an assisted living facility can be a difficult one to make. Being proactive will help everyone arrive at a mutual decision that is the best solution. The first step in the planning process is having the conversation about a person's wishes.

Tips to make this sometimes challenging conversation and decision easier:

- **Talk Sooner Rather Than Later.** Have the conversation about long-term care before the need arises.
- **Prepare Yourself.** Take the initiative by doing your homework and offering options.
- **Prepare Your Loved One.** Ask permission of your loved one to have the discussion.
- **Choose the Right Time and Environment.** Look for opportunities in connection with significant life events such as a death, injury from a fall or a birthday.
- **Stay Positive.** Understand that it is normal to encounter resistance the first time you bring up long-term care.

Being proactive will help everyone arrive at a mutual decision that is the best solution.

- **Be a Good Listener.** By listening, you can learn the wants and needs of your loved one.
- **Include Others in Decision Making.** Other people such as doctors or health care professionals can offer guidance on what kind of services your loved one will need and how to tap into community resources.

If it is obvious the loved one needs assistance as soon as possible but is slow to agree, then look into the possibility of in-home care (see our, “Staying in the Home” on our web site: www.retirementpublishing.com > Idaho Publications). This can extend the current living situation and buy more time for the decision-making process. A physician can often help your loved one realize that help is necessary.

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The Legal Issues

Now is the perfect time to visit a lawyer to take care of the legal and medical planning while the loved one is still of sound mind, especially if they are in the very early stages of Alzheimer’s/dementia. Some subjects you would probably want to cover are ...

A Durable Power of Attorney – This document will let the loved one allow someone of their choosing to take over management of their assets if they are not able. Another might be drawn up for health care to allow a trusted party to review medical records, speak with doctors and make decisions about treatment options when the loved one is not able. When there is no written document in place it is difficult for a third party to determine or direct medical options.

An Advanced Medical Directive – This document will make your loved one’s end-of-life wishes known to medical providers.

Estate Planning Documents – These should all be reviewed to be sure that beneficiaries, trustees and representatives are up-to-date while your loved one’s mental ability is not an issue.

Those with larger estates will have more complicated issues and all the more reason to take advantage of this transitional period to get the wishes of the loved one up-to-date and documented.

It can be an excellent idea to have you attorney look over a copy of the contract once you have settled on a facility.

Some subjects you would probably want to cover are ...



Which Type of Assisted Living is Best for Your Situation?

Idaho assisted living communities range from small homes to multi-unit complexes. Generally, those with one to two beds are called Certified Family Homes. Four to eight beds are considered Residential Care Facilities. Larger Assisted Living Facilities may have from fifteen to hundreds of beds. Some are new, state-of-the-art buildings, while others may be a converted home.

Certified Family Homes usually consist of normal family homes with a bedroom or two and sometimes a bath dedicated to the residents. It's very much a family-style environment where the resident becomes a part of family activities. This is an excellent option for adults who need some assistance with the activities of daily living but do not require a more restrictive institutional setting. This is often the least costly route.

Residential Care Facilities are usually located in residential area homes that have been modified or built with extra bedrooms and baths. They can often handle five to eight adults with limited needs for assistance. There is usually a family that lives in the home but outside help is often used with the care of residents and meals. Many of these facilities are licensed to offer care for the developmentally disabled, mentally ill, physically disabled and people with traumatic brain injury in addition to the elderly. If you feel this could be a problem, you will want to question the administrator closely on what they allow in their resident make-up. There are also some who specialize in dementia care. The Residential Care option is again more affordable than the larger facilities in most cases. The smaller facilities can be more home-like and often accept Medicaid.

The Residential Care option is usually more affordable than the larger facilities in most cases.

Assisted Living Facilities can range in capacity anywhere from fifteen to more than a hundred. Obviously the larger these facilities get, the more activities and amenities they can offer and the more expensive they become. Often the larger ones will keep a nurse on staff and will be equipped to handle the resident needing more care and attention than can be provided in smaller facilities. The larger facilities often staff an Activities Director. This person plans everything from fitness programs, trips to local activities like plays, museums and travel. Larger facilities also have Chefs and provide transportation for shopping and medical appointments.

Continuing Care Retirement Communities (CCRC's) are another option but very rare in Idaho. These communities offer all levels of care from independent living to nursing care and everything in between. They are sometimes known as "Aging-in-Place" communities. The advantage is that as your needs change you can still live within the same community. Some require an entry fee and others do not. Other types of "Aging-in-Place" communities offer independent living and assisted living but not nursing care.

The larger facilities often staff an Activities Director.

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Financial Options

Most facilities accept only private pay. Unlike nursing homes, Medicare (health insurance for the aged and disabled) does not pay for assisted living services. The State of Idaho may extend Medicaid (health and long-term care for low-income families and individuals) benefits for some services provided if an individual qualifies for state assistance based on income guidelines.

However, be aware that many facilities accept a limited number of people on public assistance, or extend the acceptance of Medicaid to residents that have paid privately for years and run out of money. Many places decline to accept Medicaid altogether, so residents must be prepared to spend their own money or get assistance from relatives.

While long-term care insurance was originally designed to cover nursing home costs, most long-term care insurance policies now cover assisted living. Premiums are based on the age of the person at the time of purchase, the benefit amount, the benefit time period, deductibles and special options. But, the time to shop for policies is long before the care is needed.

The cost for assisted living facilities varies depending on room size, services offered and several other factors. The base cost almost always covers room and board and meals. Each facility determines its own fee structure. This may be presented as an all-inclusive fee, or as a base cost plus fee-for-service expenses..

The most recent AARP survey (2010) in the state of Idaho found costs varied from a low of \$1288 per month to more than \$5200 per month with the average running between \$2594 and \$3608 per month. Many facilities also require a deposit that may or may not be refundable.

Unlike nursing homes, Medicare (health insurance for the aged and disabled) does not pay for assisted living services.

How to Find a Facility that Fits Your Needs

The first step in choosing an assisted living facility is to determine factors like ...

Location - Will the loved one want to stay close to where they currently live with familiar surroundings and long-time friends or choose a place closer to family so visits can be more frequent?

Price - What can your loved one afford? Decide on a price-range early on but be prepared for sticker shock.

Amount of activity - Is the loved one still active and social? You may want to consider one of the larger communities. If they don't do well in large groups, the family setting of a certified family home or residential care home may best suite your needs.

Amount of Care Needed - Does the loved one have dietary, medical or daily living requirements? This can be a strong concern in determining the facility that best suites them.

Once you have determined your basic needs then you can start a search for a facility or community that best suites your requirements. Don't hesitate to ask doctors or other health care workers whom they might recommend. Retirement Publishing (publishers of this booklet) also publish an excellent resource called Senior Lifestyles Idaho Guide & Directory, which has a statewide list of residential/assisted living facilities along with home health and hospice agencies. Call 800-584-9916 during normal business hours for a free copy or you can download a copy from our Web site at www.retirementpublishing.com. Other good sources are your regional Area Agency on Aging office (see Appendix B) and the Idaho Health Care Association. Their number is 208-343-97345

A referral agency is another source of help. Agencies can be found in some of the larger communities in Idaho. Their



Once you have determined your basic needs then you can start a search for a facility or community ...



fees are paid by the facilities and are free to seniors or families seeking placement recommendations. They can be a real time-saver, but do be aware that referral agencies will only refer to facilities they have contracts with.

A checklist can be a handy tool at this point. Again, most health care workers or agencies can supply one. You can also call us (800-584-9916 during business hours) or email us (admin@retirementpublishing.com) and we will send one to you or go to our Web site mentioned above where you can download a copy.

Once you've done your homework, request individual survey reports from administrators.

Checklists will cover such things as:

- Medication and health care (is self-medication allowed?)
- Services (are pharmacy services offered on-site?)
- Individual unit features (are residents able to bring their own furnishings for their unit?)
- Food service (are snacks available?)
- Social and recreational activities (are pets allowed in the residence?)
- Atmosphere (do residents socialize with each other and appear happy and comfortable?)
- Physical features (is the floor plan easy to follow?)
- Needs assessments, contracts, costs and finances (Is there a written plan for the care of each resident? When may a contract be terminated? What are the policies for refunds and transfers?)

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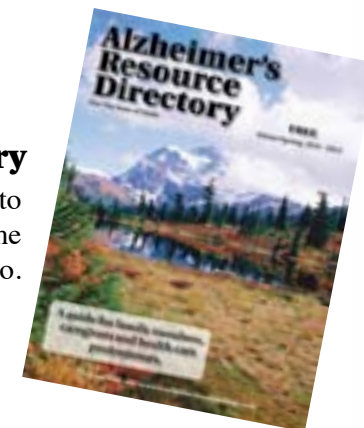


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The Contract

Most checklists are pretty lengthy so you might want to pick out a few items that are most important to you to look for. Otherwise you may find yourself spending an inordinate amount of time at each facility just filling out a checklist. If you have narrowed it down to one or two facilities, then a completed checklist can be helpful in choosing the one that best suits your needs.

When comparing assisted living facilities, experts recommend narrowing your search to three or four and visiting them. Each facility should provide an information packet describing their array of services and prices.

Once you've done your homework, request a current survey report from administrator. These reports from the Bureau of Facility Standards identify any deficiencies and/or complaints at the facility of choice, and, if any, their plans for correcting them.

You can check online (www.assistedliving.dhw.idaho.gov) for a history of survey results carried out by the department when inspecting residential care or assisted living facilities. This includes everything from activities and staffing, to medications and infection control, to food services and fire and life safety. A posted Survey and Technical Assistance Guide also helps facilities know what to expect when they are inspected.

Once a care facility is selected, care management agencies can monitor placement and care. These agencies are especially helpful if you live in another town from the loved one and aren't able to monitor as closely as you would like. These agencies have a menu of services and are paid for by the family. Unfortunately these agencies are pretty scarce in Idaho but can be found near the larger cities. Check with the closest Area Agency on Aging (Appendix B) for help in locating the most convenient agency.

When picking up a marketing/information packet from facilities on your short list, also ask that they include a

copy of the contract or agreement that you will be expected to sign. It is very important that you look this document over very carefully to be sure you fully understand what is expected of both parties. Don't hesitate for a minute to ask for explanations and clarifications on parts that you don't understand or seem ambiguous. As we mentioned earlier, having your attorney look over the document can also be of benefit.

Making the Transition

Once the decision is made to move into an assisted living residence, an elder may wonder if they will make new friends, receive the personal assistance needed, and continue to see family and friends. Change can be challenging, and the time it takes to transition is different for everyone.

Soon after selecting a facility, begin planning for the move by helping a parent decide which personal items such as furniture, keepsakes, and photographs to bring. It may be helpful to see the actual apartment or unit and take measurements. Ask the administrator or director what furniture, if any, the residence will provide. Start packing well in advance of the actual move.

A few companies have sprung up recently that specialize in helping with making the move to assisted living facilities and communities. Their expertise can be helpful in easing this stressful activity.

When moving day arrives, family and friends can help arrange and organize the new apartment. Many assisted living residences have staff members who can help move furniture and other heavy pieces into the new apartment. Although others may be there to help, remember that it's up to the resident to decide how their apartment is arranged. Decorating to suit their preferences will make the adjustment easier. It's not out of the question to hire a professional decorator to help make the new home as comfortable as possible.



Veteran residents say the best strategy is to stay busy, introduce yourself to your neighbors, and participate in the activities.



Moving is hard. It can make anyone feel overwhelmed and stressed. However, these feelings are generally temporary and disappear after a routine is established, according to residents who have “been there, done that.” Some new residents find comfort in talking with clergy; others talk to a neighbor or close friend.

Veteran residents say the best strategy is to stay busy, introduce yourself to your neighbors, and participate in the activities. It is normal to have a tendency to stay in your apartment at first, but getting out and meeting people, as well as participating in activities, were repeatedly identified as the quickest ways to become comfortable with the new surroundings.

More advice for new residents moving to larger facilities:

- Read all the materials about the assisted living residence before you move in.
- Arrange to meet with the administrator or director and staff before moving day.
- Obtain a list of suggested items to bring to the residence.
- Pack wisely. Don’t bring everything (the hardest).
- Obtain a list of residence policies and familiarize yourself with them.
- Label your clothing if the residence is helping you with laundry.
- Read the activity schedule and choose two or three programs to attend early on to meet your neighbors and other residents.

Current residents advise friends and family members to be involved before, during, and after the move. Your loved one does not want to be seen or treated differently now that they live in an assisted living residence. Remember, your family member or friend hasn’t changed; it’s only their home address that’s different.

Handling Problems

If a problem or question of care arises in a facility, take your concerns directly to the Administrator or Director of the facility. Most incidents can be handled at this stage in a satisfactory manner. If the problem continues The Area Agencies on Aging (Appendix B) have two programs you can turn to for help.

The Ombudsman program advocates for the elderly by investigating complaints and responding to requests for assistance from elders living in long-term care facilities.

Adult Protection services investigate allegations of abuse, neglect, self-neglect and exploitation involving vulnerable adults and takes remedial actions to protect them. Workers provide specialized services to assist seniors and vulnerable adults and often work closely with law enforcement.

If problems continue you can contact the Department of Health and Welfare, Bureau of Facility Standards (Appendix A).

The Ombudsman program advocates for the elderly by investigating complaints and responding to requests for assistance ...

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And Finally

We hope this booklet has been helpful in your search for assisted living. Please keep in mind that the sponsors have made this booklet possible. They felt it was important to provide this information to help you in making a more informed search for the facility, community or service that best fulfills your needs. We urge that you give these sponsors extra consideration during your search. They deserve your added attention.

For further help in finding the services you need, one of our publications might be of help.

Our *Senior Lifestyles Idaho Guide and Directory* includes a comprehensive list of Independent living and state licensed Assisted Living, Skilled Nursing, Hospitals, Home Health Care and Hospice agencies across the state along with some Home Care Agencies.

Our statewide *Alzheimer's Resource Directory* is a comprehensive list of available Alzheimer's/dementia housing and care and services.

Our *Senior Housing & Services Guide* lists hundreds of services available to seniors throughout the Treasure Valley (Boise, Eagle, Meridian, Nampa, Caldwell etc.) of Idaho.

These publications are all free and can be ordered by emailing admin@retirementpublishing.com or simply download a copy from our Web site: www.retirementpublishing.com.

We are already making notes on how we can improve our next issue and would eagerly welcome any suggestions or comments. Just call 800-584-9916 or email us at admin@retirementpublishing.com

Our Sponsors

These sponsors felt it was important to make this information available to help you in making a more informed search for a community or service that best suits your needs.

If you would you like more information or have questions. Don't hesitate to contact the sponsor nearest you. They are all very knowledgeable and qualified to answer questions you may have with no obligation.

We urge that you give these businesses extra consideration in choosing a community or program that fits your needs.

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Appendixes

Appendix A

Department of Health and Welfare Bureau of Facility Standards

Mailing Address:
P.O. Box 83720
Boise, ID 83720-0036

Physical Address:
3232 W. Elder St.
Boise, ID 83705

Phone: 208-334-6626
FAX: 208-364-1888
Incident Hot Line: 208-364-1883

E-mail: fsb@dhw.idaho.gov
Web site: www.assistedliving.dhw.idaho.gov

Appendix B

Area Agencies on Aging
www.Idahoaging.com

Area I - North Idaho (Counties: Benewah, Bonner, Boundary, Kootenai, Shoshone)

Aging and Adult Services
North Idaho College
2120 Lakewood Drive, Suite B
Coeur d'Alene, ID 83814
(208) 667-3179, or 1-800-786-5536
Fax: (208) 667-5938

Area II - North Central Idaho (Counties: Clearwater, Idaho, Latah, Lewis, Nez Perce)

Community Action Partnership
124 New 6th Street
Lewiston, ID 83501
(208) 743-5580, or 1-800-877-3206
Fax: (208) 746-5456

Appendix B (cont.)

Area III - Southwestern Idaho (Counties: Ada, Adams, Boise, Canyon, Elmore, Gem, Owyhee, Payette, Valley, Washington)

Sage Community Resources
SW Idaho Area Agency on Aging
125 E. 50th St.
Garden City, ID 83714
(208) 322-7033
Fax: (208) 322-3569

Area IV - South Central Idaho (Counties: Blaine, Camas, Cassia, Gooding, Jerome, Lincoln, Minidoka, Twin Falls)

College of Southern Idaho
Office on Aging
315 Falls Ave
PO Box 1238
Twin Falls, ID 83303-1238
(208) 736-2122, or 1-800-574-8656
Fax: (208) 736-2126
Adult Protection Emergency Number: (208) 732-6605
Mini-Cassia Office
2311 Parks Avenue #5
Burley, ID 83318
(208) 677-4872

Area V - Southeast Idaho (Counties: Bannock, Bear Lake, Bingham, Caribou, Franklin, Onieda, Power)

P.O. Box 6079
Pocatello, ID 83205
208-233-4032 pr 1-800-536-8129
FAX 208-233-4841

Area VI - Eastern Idaho (Counties: Bonneville, Butte, Clark, Custer, Fremont, Jefferson, Lemhi, Madison, Teton)

Eastern Idaho Community Action Partnership
P.O. Box 51098
357 Constitution Way
Idaho Falls, ID 83405
(208) 522-5391, or 1-800-632-4813
Fax: (208) 522-5453

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