# SELECTING A REST HOME FOR YOUR LOVED ONE

A Guide for Prospective Clients and Care-givers



#### DODGE PARK REST HOME





101 Randolph Road, Worcester, MA 01606 508-853-8180 www.dodgepark.com

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## Frequently Asked Questions (FAQ)

Information to Help You Select a Rest Home in Massachusetts

One of life's greatest challenges is deciding when a loved one is no longer capable of living independently. Often, a time of crisis precipitates this decision, such as when the individual is ready to leave the hospital after a serious illness, or when events make it clear that severe limitations exist.

Any placement in a rest home must be done with the consent of the individual or his or her legal agent (Health Care Proxy and/or Power of Attorney). Since a rest home will become the individual's new residence, that person must take part in the decision-making process if he/she has cognitive capacity. Before the situation becomes an emergency, it is important to discuss the decision thoroughly with the individual.

A good starting place for the family and the individual in need is to discuss the options available for best meeting their needs. A hospital social worker, physician or representative of the Massachusetts Executive Office of Elder Affairs may be helpful. Always keep the individual's needs and preferences at the forefront of the process. It is the individual's lifestyle that will change, and he or she has the right to be involved in this consequential decision.

#### What is a Rest Home?

It may be time to consider a rest home when a loved one:

- Needs help with activities of daily living (ADL), such as bathing, oral care, dressing, grooming, toileting, shopping, preparing meals, eating, managing finances, using the phone, climbing stairs, housework, driving and other personal activities.
- Has progressive deterioration in their physical or cognitive abilities.

- Shows signs of short-term memory loss or dementia.
- Shows signs of incontinence.
- Has needs that cannot be met by the family or community services, or the cost to provide those services at home is unrealistic.

Most rest homes serve individuals 60 and older. Though many rest homes still serve younger adults suffering from mental disability, this guide focuses on facilities that serve the frail and elderly.

Rest homes generally provide room, board, housekeeping, supervision and personal care assistance with ADL, such as personal hygiene, dressing, eating and walking. Rest homes that have a nursing staff (DON, LPN, etc.) also provide basic nursing services. In addition, rest homes store and distribute medications to their residents in the same manner as nursing homes do.

In Massachusetts, this type of facility is referred to as a rest home. However, like many other states, there is a trend here to use the term residential care facility for the elderly, or RCFE.

On many levels, rest homes are held to a much higher standard than assisted-living facilities and are regulated in the same manner as nursing homes. This level of care and supervision are designed to accommodate individuals who are unable to live comfortably and safely by themselves but who do not need 24-hour skilled-nursing care. However, these individuals often need more care and supervision than traditional large assisted-living facilities can provide.

# How does a rest home for the elderly differ from an assisted living facility?

From a licensing standpoint, there is a big difference. Rest homes are licensed by the Massachusetts Department of Public Health

(DPH) and classified as Nursing Home Level IV. Most of the rules and regulations that apply to nursing homes Level I and Level II (regular nursing homes) apply to rest homes as well. Assisted living facilities are licensed by the

Massachusetts Executive Office of Elder Affairs 250 Washington Street Boston, MA 02108 1.800.AGE.INFO (1.800.243.4636) www.ma.gov/elder

In Massachusetts, most rest homes for the elderly have between 12 and 64 beds and are locally owned, home-like facilities with shared and/or private rooms. Assisted living facilities usually offer private apartments in larger, corporately owned facilities (e.g., 75 to 100-plus beds) with different fee options depending on the level of care needed.

Assisted living facilities have more restrictions on administration of medications. They are not permitted to administer medications, but rather they can only remind the resident to take his or her medication. Rest homes in general offer a better staffing ratio than assisted-living facilities and provide a home-away-from-home atmosphere.

# What is the difference between a rest home and a nursing home?

Rest homes, which are licensed by the Massachusetts Department of Public Health, provide:

- 24-hour supervision and supportive services for individuals who do not routinely need 24-hour nursing or medical care.
- Housing, meals, activities and administration of medications for individuals who need a supportive living arrangement.
- In some cases, dementia care (see page 7).

Nursing homes, also licensed by the Massachusetts Department of Public Health, provide:

- 24-hour long-term care for frail individuals who need a higher level of care.
- Short-term care for individuals who have been hospitalized and need nursing and rehabilitation services, such as physical, occupational and speech therapy, before returning home.
- Specialty care for individuals with physical and neurological disabilities.

#### Are rest homes regulated?

Yes. Rest homes must meet care and safety standards set by the Commonwealth of Massachusetts and are licensed and inspected by the Department of Public Health (DPH). For details, please refer to 105CMR 150.000-159.000 at www.sec.state.ma.us/spr/sprcat/agencies/105.htm.

# Will a rest home for the elderly accept or house an individual with medical-care needs?

This depends on the type and severity of the individual's medical condition and whether the facility can obtain permission from the licensing agency to care for the individual. State licensing does not permit rest homes to accept residents with some prohibited health conditions, e.g., need for a feeding tube, liquid oxygen, IV treatment, or treatment of open bedsores that are classified as Stage III or above. Rest homes can greatly benefit individuals who need help with incontinence, ADL or dementia.

#### Can rest homes care for individuals with dementia?

This depends on the facility. Some facilities offer special services to individuals suffering from dementia as long as they have the appropriate setting and staff training to provide dementia care. You should review the facility's plan of operation to understand its approach to dementia care, special dementia services and staff training, as well as the qualifications of the medical and advisory team members.

# My loved one suffers from incontinence. How can rest homes help?

Urinary incontinence (UI) is any involuntary leakage of urine. In rest homes, more than 50% of residents experience UI either occasionally or on a regular basis, and many of these individuals also have fecal incontinence. UI is a contributing factor to skin breakdown, falls, urinary tract infections, social isolation, frustration, anxiety, calling out, and wandering.

A continence care program can help greatly. Education and behavioral changes increase the likelihood that residents can maintain continence, regain continence, or lessen the severity of incontinence. This can improve quality of life, such as avoiding falls and fractures, dehydration and urinary-tract infections. Residents also enjoy a greater sense of independence and self-sufficiency.

#### What does a rest home for the elderly cost?

The cost depends on a variety of factors, such as the type of accommodations (e.g., apartment, private room, shared room), the range of services needed and the geographic location of the facility. Rest Homes with specialized services, such as dementia or hospice care, or those that provide a much higher level of care and better staffing ratio, are more costly. Rest homes in general are a less costly approach than nursing homes and can play a significant role in estate planning due to the Commonwealth's more

liberal Look-Back standard. The Look-Back standard for rest homes is currently only one year, compared with five years for nursing homes.

#### Who pays the bill for rest home care?

Individuals with sufficient financial resources may pay privately for a stay in a well known rest home. Residents whose income is limited may be eligible for Supplemental Security Income (SSI) or the Massachusetts Emergency Aid to Elders, Disabled and Children (EAEDC) program. EAEDC provides cash assistance to individuals and families who meet certain criteria for income and assets.

In addition, certain eligible Veterans may have their rest home stay paid partially through the Veterans Administration or through the V.A.'s Aid and Attendance benefit program (www. veteranaid.org). Check with the rest home on eligibility.

An individual signs a contract specifying services that will be provided. Regulations overseen by of the Office of the Massachusetts Attorney General (940 CMR 4.00-4.11) detail protections for residents of rest homes and other long-term care facilities.

All clients should review the facility's admission contract closely before signing. With private payment, the individual may also be required to disclose personal financial information. This ensures a proper placement in the future through the state.

## Qualities that Define an Exceptional Rest Home

You should consider a rest home not merely a temporary residence but a permanent home for a loved one. Therefore, exceptional care includes not only providing care with dignity and respect, but also:

- Dietary services that provide appetizing and nutritious meals.
- Housekeeping services that keep physical surroundings pleasant.
- Planned activities that foster social interaction.

When you begin your search for a rest home, it is important to assess the opportunities for personal growth and choice for the individual as well as the care that is provided.

A good place to start the selection process is compiling a list of facilities that fit the needs and preferences of the individual. The Long Term Care Ombudsman Program (www.mass.gov) provides guidance on homes located in your area and the basic services each home provides. While ombudsmen do not rate facilities, they can help sort out the information and assist you in making your decision.

The state inspection report provides some initial information regarding a home's ability to provide care. You should consider this report when compiling a list of potential rest homes. Make sure to contact the Department of Public Health and personally inquire about your facility of choice.

The Massachusetts Department of Public Health (DPH) can also provide a list of facilities. In addition, you can request inspection of specific facilities' annual survey reports and any citations for poor care. Some ombudsman programs also have listings and offer pre-placement services, including access to licensing reports. Contact:

Massachusetts Department of Public Health (DPH) 250 Washington Street
Boston, MA 02108
617.624.6000
www.mass.gov/dph

## **Visiting Potential Rest Homes Is Vital**

Try to visit the potential rest home more than once and at different times of the day. An unannounced visit is even better. Visit in the late morning or during midday to observe the noon meal being served. Another visit should be in the afternoon to observe activities and dinnertime. Plan to spend at least one hour at each visit. If possible (due to physical and/or cognitive limitations), take your loved one to visit the rest homes before you make that important decision.

Make an appointment to meet with the facility owner or administrator the first time you visit. After a guided tour, it is wise to talk to residents and even family members and observe conditions by yourself without facility staff present. To help you during the visit, a checklist is included in this guide, beginning on page 13.



## **Dodge Park** Support Group Meeting

Please join us for our free monthly support group with Elaine Kapperman, LICSW on the second Thursday of every month at 6:00pm.

The support group is open to all of Dodge Park customers and family members and to the general public. Light supper will be provided. Activity and supervision for memory impaired individuals will be provided for free by our Day Club personnel during the meeting.

Please RSVP to Debbie Williams, business office manager at (508) 853-8180.

For more information:Call us toll free **1-877-363-4775**Email us at: m.shalev@dodgepark.com
www.dodgepark.com

When visiting a rest home, look at residents' rooms, activity space and the dining area. Observe how comfortable residents appear in their home. Residents have the right to choose special foods, activities, clothing and room decorations. In addition, residents have the right to exercise choice about meal and bed times. These factors enhance an individual's sense of personal control and foster a sense of well being.

## **Interacting with the Staff**

A resident should have opportunities to engage in religious, political, civic, recreational or other social activities to promote dignity and independence. Privacy – for medical treatment, visits with family and friends and personal solitude – contributes to self-esteem.

Staff attitudes are also critical to quality of life and care in a rest home. Polite, happy, patient staff members who anticipate residents' needs add tremendously to the residents' comfort.

Interaction with staff should provide a supportive environment conducive to independence and mutual respect. You can observe the interaction between residents and staff when you tour the home.

Although the family's role changes when an individual is admitted to a rest home, family contact remains as important as ever, sometimes more so. Your continued care, support, love and involvement are absolutely essential.

A good way to help the staff to get to know the resident is to share details in writing about the resident's likes, dislikes and daily routine. Family members should visit frequently and encourage others to visit.

Attending care plan meetings for the resident is a good way to advocate for individualized care and address concerns about the resident's care.

Finally, remember the Long Term Care Ombudsman is available to all long-term care residents to ensure their rights are respected.

#### **Rest Home Selection Checklist**

This checklist can serve as a useful tool when investigating and evaluating rest home facilities. The checklist is divided into two sections: Quality Dimensions and Practical Dimensions.

Although the quality dimensions are crucial, they need to be balanced by practical considerations. Sometimes the best home might be a little further than you had hoped to drive. But if this facility provides the best possible care for your loved one, it will be worth a visit. Depending on the person's needs and preferences, some questions can be more important than others.

Keep in mind the following general tips:

- Start the process early, before there is a crisis.
- Involve the prospective resident as much as possible in the process, if this is possible and practical.
- Use the checklist to get an overall impression of the facility and its practices.
- Pay special attention to how residents are being treated by staff and the quality and responsiveness of the services.
- Don't be sold only on the attractiveness of the facility. The care provided is the most vital element of the placement.
- Narrow the options down to two or three facilities.
- Visit each facility several times. Show up without notice.
- When you visit, walk through the entire facility and visit at different times of the day.

- Drop by unannounced and visit at night and/or on the weekend.
- Make sure you visit during a mealtime.
- Obtain a copy of the admission agreement. Read it carefully.
   Understand the services, costs and conditions for transfer.
   Always look for the availability of all-inclusive care. Knowing the monthly cost of care in advance allows for optimal financial planning.
- Before you make a final decision, check the latest annual survey report and any citations issued by the state licensing agency. Facilities should make these reports available to you upon request. Talk with current residents and, if possible, their family members.

#### **Quality Dimensions**

Quality of Care and Service
[ ] Do residents appear well cared for?
[ ] Are the residents well groomed, e.g., shaved, clean clothes,
nails trimmed and hair done?
[ ] Is there a written plan of care for each resident? How often is
the care plan reviewed and changed? By whom?
[ ] Does the facility offer programs and/or services that meet you
particular care needs, e.g., dementia?
[ ] What is the system for distribution of medications? Does the
facility's licensing permit dispensing of medications, or only
reminding the resident to take his or her medications? Who
actually dispenses meds? What is their level of training?
[ ] Are a medical director and/or physician(s) on premises?
[ ] Is a mental health director (physician) available?
[ ] Does the facility provide transportation to medical services?
Does it charge for this kind of transportation?
[ ] Are there clear procedures for responding to medical
emergencies?

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Quality of Food
[ ] Does the food look and smell appealing? Are fresh ingredients used?
[ ] Do residents seem to be enjoying the food?
[ ] Does the facility offer two main meals – lunch and dinner – or is dinner a smaller meal? Unfortunately, many facilities provide only sandwiches for dinner.
[ ] Are residents receiving needed dining assistance?
[ ] Are meals served at appropriate temperatures?
[ ] Do menus offer daily choices? How often are menus changed? Ask to see a copy of the week's menu.
[ ] Can the facility meet special dietary needs and ethnic preferences?
[ ] Are nutritious snacks available?
[ ] Is fresh drinking water readily available?
[ ] Is a staff dietician available to review residents' dietary need and provide recommendations?
[ ] Does the facility make provisions to serve residents in rooms when needed? Extra cost?
Quality of Social Interaction
[ ] Are residents interacting with staff and/or each other?
[ ] Are residents occupied in meaningful activities?
[ ] Does the facility have a planned activities program? Are activity calendars posted? What activities are provided on weekends?
[ ] Is there a designated staff member who coordinates activities? Are activities individualized or only conducted in large groups?
Do volunteers and outside groups regularly visit the facility?
[ ] Are there planned trips outside the facility?

[ ] Is transportation provided for shopping and personal errands? Extra fees?
[ ] Are pets permitted? Does the facility have its own pets?
Are residents encouraged to bring in some of their own fur-
nishings?
[ ] Are religious services offered at the facility?
Quality of Participation
[ ] Are residents and family members involved in assessment and care planning?
[ ] Do residents have an opportunity to provide input into menu and activity planning?
[ ] Are there procedures for responding to requests for information and complaints?
[ ] Is the Ombudsman Program's poster and telephone number posted?
Does the facility have a residents' council? Does the facility
have a family council or support group?
Quality of Staff
[ ] How long has the key staff been working at the facility, i.e., administrator, director of nursing, activities director, head chef, floor manager, nurse consultant, medical director?
[ ] Has there been major turnover in key staff recently?
[ ] How many direct-care staff are there for each shift?
[ ] What is the staff to resident ratio? What is the ratio on the night shift? Weekends?
[ ] How many hours of nursing care per day are available
[ ] What is the turnover rate among direct-care staff?
[ ] Does the direct-care staff understand and speak English?
[ ] What special training does the staff receive in working with individuals with dementia?
[ ] Do the administration and staff know the residents by name?
[ ] Does the staff take time to talk with residents?

Do members of the administration and staff interact with resi-
dents in a respectful way?
[ ] How long does it take for staff to respond to a resident's request for help or to the call bell?
Does the staff respect residents' privacy by knocking on doors
or announcing themselves before entering rooms?
[ ] Does the staff wear name badges?
Quality of the Environment
[ ] Are emergency exit signs prominently posted and lit?
[ ] Is the overall decor pleasant and homelike?
[ ] Is the environment clean and odor-free?
[ ] Is the facility quiet or noisy?
[ ] Is the temperature comfortable?
[ ] Does the building seem safe and free from dangerous hazards Cluttered?
[ ] Are the residents' rooms, hallways and common areas well lit?
[ ] Are floors finished with non-skid material? Are carpets firm
and safe to provide easy walking and prevent falls?
[ ] Is the dining room pleasant and inviting?
[ ] Are common areas, bedrooms and bathrooms accessible to wheelchairs and walkers?
[ ] Are bathrooms conveniently located?
[ ] Do all bathrooms, showers and bathtubs have handgrips or rails?
[ ] Are call signals easily accessible to residents? At bedside? In bathrooms?
[ ] Do residents' rooms offer privacy, especially in shared rooms?
[ ] Is there a convenient place to conduct private conversation?
[ ] Does every resident's room include for each occupant a bed-
side table, reading light, chest of drawers and at least one comfortable chair?
[ ] Is there adequate storage space for clothing and personal
belongings in each room?

[ ] Does the facility have extra storage space for residents' belongings?
[ ] Are there outside sitting or walking areas for residents? Are any of them covered to protect residents from sun and rain?
[ ] Is there a fenced yard? Locked?
[ ] Is a disaster plan posted? How often does the facility hold drills?
<b>Practical Dimensions</b>
Accessibility
[ ] Is the facility located close to family and friends who will be visiting most frequently?
[ ] Will you be willing to drive a little longer for a well established facility?
[ ] Is the facility near public transportation?
[ ] Is the facility in a location that is safe to visit at night?
[ ] Is the facility convenient to the resident's doctor? Home health agency?
[ ] Is the facility close to a hospital, fire station and other emergency resources?
[ ] Are families and friends welcome at any time, or are there strict visiting hours?
Suitability
[ ] Does the facility have a good reputation in the community?
[ ] Will the facility provide a list of references?
[ ] Are residents and/or family members willing to talk with you about the facility?
[ ] How does the staff treat you when you visit?
[ ] Did they answer all your questions to your satisfaction?
[ ] Did they show you around the entire facility? Were any areas or sections not shown to you? Why?
[ ] Do you feel that the staff consists of people you can work with and communicate with honestly?

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Call Ben or Mike at 508-853-8180 for a free tour or your Free 1-Day Trial.

Day Club Available 7am - 7pm, Seven Days a Week. You Choose Only the Hours You Want!

[ ] How would you or your loved one fit in? Is this facility com-
patible with your lifestyle?
[ ] Can you imagine yourself or your loved one living here?
[ ] What was your overall impression of the facility when you visited?
Affordability
[ ] Are there any upfront fees, e.g., assessment, community fees?
[ ] What services are not included in the basic rate?
[ ] What is the cost for extra services? Levels of care? How is the
need for extra services or higher levels of care determined?
[ ] What are the costs for specialized services, e.g., dementia care?
[ ] Are the costs and payment schedule clearly described in the admission agreement?
[ ] Are the total monthly charges affordable over time?
[ ] Would your loved one be able to stay once all funds are depleted?
Did the facility explain the EAEDC program to you?
Pay special attention to the following factors when considering
placement for an individual with dementia.
Environment
[ ] Is the facility calm and quiet?
Does the facility provide soft music and/or natural scents to
create a soothing atmosphere?
[ ] Is the facility well lit? Is there adequate natural light?
[ ] Are there complex patterns on carpets or walls, which can
cause confusion or other difficulties?
[ ] Can staff easily observe the facility's common areas? Outside
areas?
[ ] Can staff easily observe the residents' rooms?
[ ] How does the environment promote resident functioning, e.g.,
a picture of a toilet on the bathroom door?
Does the facility have a wander alert system?

[ ] Are the doors equipped with a system to delay exit? The ex-	
ception, of course, involves an emergency, such as fire.	
[ ] Is there a locked or secured outside area for walking?	
Philosophy of Care	
[ ] Is the facility's philosophy for caring for persons with dementia consistent with your beliefs?	•
Does the facility provide services to persons at all stages of the disease process?	e
[ ] What conditions or behaviors determine whether a facility wi admit and retain someone with dementia?	11
[ ] Is dementia care provided in a separate unit or as an integrate part of facility services?	ed
[ ] Is the facility's philosophy and practice of handling "difficult behaviors" compatible with your views? Offer a few example and ask staff how they would handle the situation.	:S
[ ] What is the facility's philosophy in using physical restraints to deal with certain behaviors? Rest home facilities for the elderly, such as Dodge Park, are severely restricted by law in the use of restraints and psychoactive medications.	
[ ] Does the facility recommend the use of psychoactive drugs to treat behaviors?	
Services	
[ ] Are there activities specially designed for individuals with de mentia?	:-
[ ] Do activity programs operate throughout the day? Evenings? Weekends?	
[ ] Are activities individualized for each resident?	
Does the facility provide nutritious snack foods?	
[ ] Are water and decaffeinated beverages readily available throughout the day?	
Does the facility conduct periodic night checks?	
[ ] How many staff members are awake during the night?	

St	att
[ ]	Is the assessment and care planning process coordinated by a person with special knowledge and training in dementia?
[ ]	] What role does direct-care staff have in the care planning process?
[ ]	What role does the resident and family or legal representative play in the care planning process?
[ ]	Is the activity program planned and coordinated by a person with special training? Is this person full-time? Have assistants?
[ ]	Does the activity coordinator design customized activities for each resident? Who leads one-on-one activities?
[ ]	Is a staff member assigned to work with the same residents all the time, or do the staff rotate among residents?
[	What is the ratio of direct-care staff to residents in each shift?
[ ]	What type of specialized dementia training does the direct-care staff receive initially and on an on-going basis? Content? Number of hours? Frequency?
[ ]	Specifically, what type of training does the direct-care staff receive in handling difficult behaviors? Content? Number of hours? Frequency?
[ ]	Who supervises the direct-care staff? What are their qualifications?
[ ]	What special training do the administrators and supervisors receive in dementia care? Content? Number of hours? Frequency?
O	ther
[ ]	Is the facility in contact with experts in dementia care, such as Alzheimer's diagnostic centers, Alzheimer's Associations, or Regional Caregiver Resource Centers?
[ ]	Does the facility have a family support group or refer to community-based groups?
[ ]	What does the facility charge for special dementia services? Is there a basic rate that covers all services? Are there additional charges for changing care needs?



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www.dodgepark.com

## **Helpful Resources**

#### Dodge Park Rest Home and The Day Club

101 Randolph Road Worcester, MA 01606 508.853.8180

Fax: 508.853.4545

Micha Shalev, MHA, Executive Director and Co-Owner, m.shalev@dodgepark.com
Ben Herlinger, Co-Owner, b.herlinger@dodgepark.com
www.dodgepark.com

#### Massachusetts Department of Public Health (DPH)

250 Washington Street Boston, MA 02108 617.624.6000 www.mass.gov.dph

#### **Massachusetts Executive Office of Elder Affairs**

250 Washington Street Boston, MA 02108 1.800.AGE.INFO (1.800.243.4636) www.ma.gov/elder

## Massachusetts Rest Home State Regulations

www.sec.state.ma.us/spr/sprcat/agencies/105.htm

# Massachusetts Long Term Care Ombudsman Program www.mass.gov/Eelders/docs/ltc\_ombudsman\_choose.pdf

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## DODGE PARK REST HOME

## **Serving Worcester County since 1967**

Come and visit **Dodge Park Rest Home** and Day Club and find out how your loved one can be cared for in a unique setting with quality custom services tailored to maximize their physical, cognitive and social well being.

**Dodge Park Rest Home** and Day Club offer the best direct care staff ratio in the industry.



Dodge Park Rest Home's unique concept of care includes:

- Memory impaired program
- **♦** Complete medication management program
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- **♦** Special diet and food accommodations
- **♦** Transportation arrangement
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- supervision
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# At Dodge Park Rest Home We Practice Compassionate Care!



# **DODGE PARK**

## REST HOME AND DAY CLUB

Call Ben, Mike or Carrie at 508-853-8180. 101 Randolph Road, Worcester, MA www.dodgepark.com

Dodge Park Rest Home provides services tailored to meet your specific needs from minimal to long-term care including:

- 24 hour a day RN services
- Respite care
- Caregiver support groups
- Call for a free, no obligation tour.
- · Memory impaired program
- Freshly prepared meals
- Unique programs & activities
- All inclusive ADL care at no additional charge.

If your loved one's funds are ever depleted they will still be able to stay at Dodge Park\*

\*Subject to EAEDC approval.

# SELECTING A REST HOME FOR YOUR LOVED ONE

# A Guide for Prospective Clients and Care-givers

Dodge Park Rest Home strives to provide its clients the highest quality, most professional and ethical residential care facility for the elderly. We are dedicated to listening and responding to the needs of our residents, their families, and our staff.

Dodge Park remains committed to the entrepreneurial spirit.

As such, we reward achievement and do not tolerate waste or bureaucracy.







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