

RCFE CONSUMER INFORMATION CONTENT PROPOSAL
July 3, 2009 draft

There are two sections to this document. The first section is in outline form and the second document, beginning on page 4 provides the detail proposal.

Section 1 -RCFE CONSUMER INFORMATION – Outline

The following outline of RCFE CONSUMER INFORMATION is intended to solicit the review and comments of workgroup members in two areas: the major questions consumers typically may ask during the RCFE screening and evaluation process; and the proposed organization, structure as well as category and subcategory names of the information.

I. RCFE LOCATION AND CONTACT INFORMATION –

- Is the RCFE in a convenient location?
- How do I contact the RCFE for more information?
- Who can I speak to in licensing about this RCFE?

- Location – *information to be used for base or first level web screening*
- Contact Information – *information to be used to enable the consumer to contact the facility*

II. RCFE DESCRIPTION – *information to be used for advanced or extended question based web screening*

- Will the living accommodations and arrangements meet my needs and preferences?
- Are there presently any vacancies?
- Are there adequate safety protections?
- Will the comfort features meet my needs and preferences?
- Will the amenities offered suit my personal needs and preferences?
- What are the other distinguishing features of the RCFE?
- Are visiting policies convenient for residents, family, and friends?
- Who owns the RCFE? What is the business structure?

- Basic Program Statement and Photo – *information to be displayed on the consumer website*
- Capacity & Living Arrangement Options
- Vacancy Information
- Safety features
- Comfort Features
- Other general distinguishing features
- Visiting Policy
- Ownership

III. **BASIC CARE** - *information to be used for advanced or extended questioned based web screening*

- Can the RCFE meet my essential care needs or those of my loved one?
- What type of clients does the RCFE accept and retain?
- Does the RCFE accept and provide care for non ambulatory clients?
- Does the RCFE accept and provide care for clients with special care needs?
- Does the RCFE accept and provide care for clients with behavioral or other health conditions?
- Will the RCFE assist with medications?

- Mobility restrictions
- Special Care Needs
- Health and behavioral Conditions
- Other Resident Criteria
- Assistance with Medications
- Resident Characteristics

IV. **SERVICES** – *information to be used primarily for consumer evaluation of screened facilities*

- What are the food and dining options?
- Does the RCFE handle special diets?
- Is there a flexible schedule for meals?
- Are there planned activities?
- Are health care services available on site? If so, what type?
- What kind of transportation is provided or available nearby?

- Food & Dining Options
- Activities
- Health Care Services
- Transportation
- Other

V. **STAFFING** – *information to be used primarily for consumer evaluation of screened facilities*

- Is the RCFE staff adequate to meet my care needs and preferences or those of my loved one?

- Staff availability
- Types of Staff
- Language competency

VI. **COSTS & SOURCES OF PAYMENT** – *information to be used for both base screening and detail evaluation*

- Will my budget accommodate this RCFE? – base screening
- What is the range of the monthly base costs?
- What is the range of typical monthly service fees?
- Are there any upfront fees, e.g., assessment?
- Do you accept Supplemental Security Income (SSI)?

- Rates & Fees
- Upfront Charges
- Sources of Payment

VII. **LICENSING HISTORY – COMPLIANCE** – *information to be used primarily for consumer evaluation of screened facilities*

- Is the quality of care provided sufficient in the RCFE?
- What is the RCFE's track record in meeting state licensing requirements?
- Where can I obtain copies of important licensing reports?

- Basic summary information
- Advanced detail information

VIII. **RESIDENT CHARACTERISTICS** – *information to be used for consumer detail evaluation of screened facilities or other policy or operational purposes*

- Demographics
- Care Needs Provided
- Admission Sources
- Discharge Status

Section 2 - RCFE Consumer Information – Detail content
July 3, 2009

The following detail information provides the 2nd draft of the proposed content of informational categories and subcategories and the detailed data elements forming the foundation of a future RCFE consumer information website. The document is organized in the same structure as the document reviewed during our meeting and includes the suggestions of the workgroup participants on June 10, 2009. We now seek additional review and feedback from workgroup participants. Once we have compiled the feedback we will prepare a 3rd draft of this document, organizing the information into a format more adaptable to website applications. We expect to have the 3rd draft of the RCFE consumer information proposal available later in July.

The majority of the data elements shown here are required information by licensees. As before these are shown in black. Some of this required information may be available electronically, as indicated **in red**. Other data elements are presently not required but may be beneficial to consumers (or others), and are identified **in blue**. The items suggested in 'black', may have to be obtained, at least in the short term, via questionnaires or by data entry off of existing hard copy documents. The feasibility of adapting required reporting documents into electronic forms for the high priority items will be explored over the next several months. We are not expecting that such a phase-in will be possible in this current project timetable, but we would want to identify such priorities for future budgeting and program infrastructure development as a project deliverable.

Based upon workgroup members suggestions:

- We will investigate incorporating a consumer information guide and/or checklist available on the website, and perhaps some additional tutorial pull down or linkable materials. These will be organized as we move forward. We will be asking for input/content from you as we start writing these pieces.
- Additionally we were asked to provide a definition for the website of Residential Care Facility for the Elderly (RCFE). Shown here is a definition taken from CCLD. "Residential Care Facilities for the Elderly (RCFE) provide care, supervision and assistance with activities of daily living, such as bathing and grooming. They may also provide incidental medical services under special care plans. The facilities provide services to persons 60 years of age and over and persons under 60 with compatible needs. RCFEs may also be known as assisted living facilities, retirement homes and board and care homes. The facilities can range in size from six beds or less to over 100 beds. The residents in these facilities require varying levels of personal care and protective supervision. Because of the wide range of services offered by RCFEs, consumers

should look closely at the programs of each facility to see if the services will meet their needs.”

- We are aware of the concern regarding provider participation and potential burden and are committed to address those issues as the project progresses.

On the right side of this document, we are asking you to identify how you would rank the importance of the data element. Check all the priority levels that apply for each item (e.g., you may check a priority if you feel the information is necessary for consumers – Priorities 1 to 4, and also to indicate its value for other purposes - Priority 5).

Priority 1 - Essential consumer information for *1st level screening* (e.g., location, basic care choices, basic budget constraints)

Priority 2 - Necessary consumer information for *advanced screening* (i.e., extended search) for types of specialty services/features (e.g. dementia care, hospice care, mobility restrictions).

Priority 3 - Necessary consumer information for a *detailed evaluation* of a set of screened facilities. (e.g., staffing, services, amenities, licensing compliance)

Priority 4 – Low or no opinion on the usefulness of the data for consumers

Priority 5 – Valuable for uses other than consumer information, such as quality assurance, policy and/or operational oversight

RCFE CONSUMER INFORMATION –Detail Content

I. RCFE CONTACT INFORMATION

Score	Location					Priority
	1	2	3	4	5	
Name of RCFE						
Address of RCFE						
Date of Licensure						
Proximity to public transportation. # of blocks						
Website to enable search by city, zip code, county						
Website to capture and provide proximity to medical services: # of miles						
Website to incorporate Google link with map/radius to an address						

IX.

Contact Information

	Priority Score				
	1	2	3	4	5
Name of Licensee					
Licensee Number					
Public Phone					
Fax/TDD Number					
Administrator Cell Phone (for CCLD use only)					
Facility emergency contact information (for CCLD use only)					
Public Email Address					
RCFE Website Address					
Postal service mailing address, if different					
Name of Administrator or admissions contact					
Regional Licensing Office and contact information					
Local Ombudsman Office and contact information					

X.

II. RCFE DESCRIPTION

Program Statement

	Priority Score				
	1	2	3	4	5
Program Statement (fixed character limit, one photo & link to website)					
<i>Is this facility part of a larger campus? Y/N</i>					

Capacity & Living Arrangement Options

	Priority Score				
	1	2	3	4	5
Number of Licensed Beds					
Number of Non Ambulatory Beds					
Number of Ambulatory Beds					
Number of Private Rooms					
Number of Shared Rooms					
Number of Apartment-Style Units					
Number of Rooms with Private Bathrooms					
Number of Rooms with Private Kitchenette					
Number of stories in building?					

Vacancy Information

	Priority Score				
	1	2	3	4	5
Current Vacancies Y/N					
Waiting list Y/N					
o If Yes, average number of days of wait time					

Safety Features

	Priority Score				
	1	2	3	4	5
Call bell system or emergency alert system Y/N					
Wander Alert Y/N					
Door System Delays Exit Y/N					
Fenced Yard or Enclosed Perimeter Y/N					
Secured Dementia Unit or Section Y/N					
Locked Perimeter (External Doors or Gates) Y/N					
Smoke detectors Y/N					
Automated sprinkler system Y/N					

Comfort Features

	Priority Score				
	1	2	3	4	5
Can residents bring their own furniture? Y/N					
Laundry services provided Y/N					
Housekeeping services provided Y/N					
Central heating? Y/N					
Central air? Y/N					
Can resident control temperature in own room? Y/N					
Is there an elevator to all non 1 st floor levels? Y/N					
Is there cable TV hookup in each room? Y/N					
Is there access to the internet in each room? Y/N					
Are private telephones available? Y/N					
Are rooms equipped so that residents can do their own cooking? Y/N					
Do residents have sinks in their rooms? Y/N					

Other Distinguishing Features/Amenities

	Priority Score				
	1	2	3	4	5
Garden area Y/N					
Outdoor Patio area Y/N					
Enclosed yard Y/N					
Hair dresser/barber services on site Y/N					
Religious services are offered on site Y/N					
Dedicated room for activities Y/N					
Dedicated Fitness center or room Y/N					
Library room Y/N					
Theatre room Y/N					
Resident council Y/N					
Family council Y/N					
Personal pets OK Y/N					
Safes / Locked draws for resident use Y/N					
Care home pet(s) Y/N					
Cable TV in common room Y/N					
Internet access in common area Y/N					
Smoking allowed Y/N					
Other (Specify :)					

Visiting Policy

	Priority Score				
	1	2	3	4	5
Are there specific restrictive visiting policies? Y/N					
Are there specific visiting hours? Y/N					
What are the daily visiting hours? From time to time					
Are there rules regarding when residents can leave the building? Y/N					

Ownership

	Priority Score				
	1	2	3	4	5
Ownership Type: privately owned; limited partnership; corporation; non-profit					
Owner					
Licensee					
Number, names and license numbers of other RCFEs owned in California					
Is this facility part of a chain or parent corporation? Y/N					

III. CARE

All RCFEs provide personal assistance and care as needed by the resident and as indicated in the pre-admission appraisal, with those activities of daily living such as dressing, eating, bathing and assistance with taking prescribed medications.

Mobility Restrictions

	Priority Score				
Does the RCFE accept and provide care for:	1	2	3	4	5
Persons relying on canes Y/N					
Persons relying on walkers Y/N					
Persons relying on wheelchairs Y/N					
Persons using electric wheelchairs Y/N					
Persons requiring assistance in leaving facility in case of emergency due to either physical or cognitive disabilities Y/N					

Special Care Needs

	Priority Score				
Does the RCFE provide the following types of care?	1	2	3	4	5
Assistance in going to and from room for meals or activities Y/N					
Assistance going to the bathroom Y/N					
Assistance getting in and out of bed Y/N					
Persons with dementia. Y/N					
Persons who wander. Y/N					
Persons who exhibit "combative behaviors", e.g. hitting, grabbing Y/N					
Assistance with eating? Y/N					
Assistance with feeding? Y/N					
Assistance with incontinence of bladder Y/N					
Assistance with incontinence of bowel Y/N					
Assistance with colostomy or ostomy care Y/N					
Assistance with catheter care Y/N					
Assistance with diabetic management Y/N					

Health & Behavioral Conditions

	Priority Score				
Does the RCFE accept and retain persons with any of the following:	1	2	3	4	5
Persons with dementia. Y/N					
Persons who wander. Y/N					
Persons who exhibit "combative behaviors" Y/N					
Persons that need or may eventually need hospice care (Hospice Waiver in place) Y/N					
Persons with one or more serious health care conditions? (e.g. in need of injectable medications; requires nursing oversight or require the use of special equipment such as oxygen) Y/N					
Persons requiring bariatric (obesity) services Y/N					

Persons needing assistance to reposition in bed Y/N					
Persons with secondary psychiatric diagnoses Y/N					
Persons needing assistance with developmental disabilities. Y/N					
Persons with substance abuse issues Y/N					
Persons with HIV/AIDS Y/N					

Other Resident Criteria

	Priority Score				
Does the RCFE offer any of the following:	1	2	3	4	5
Predominant Gender M/F					
Respite stays, e.g. weekend to 2 weeks (minimum duration) Y/N					
Persons under 60 years of age Y/N					

Assistance with Medications

	Priority Score				
	1	2	3	4	5
Does the RCFE centrally store and dispense medications? Y/N					
Assist with self administration of medications Y/N					
Does the RCFE order medications? Y/N					
Does the RCFE pick up ordered medications Y/N					
Does the RCFE assist with diabetic management? Y/N					
Is there licensed staff (i.e., MD, Physician Assistant, RN or LVN) available to administer medications, e.g., injections? Y/N					
Does the RCFE centrally store and dispense medications? Y/N					
Does the RCFE order medications? Y/N					
Does the RCFE pick up ordered medications Y/N					
Does the RCFE assist with diabetic management? Y/N					
Is there licensed staff (i.e., MD, Physician Assistant, RN or LVN) available to administer medications, e.g., injections? Y/N					

IV. SERVICES

Food & Dining Options

	Priority Score				
	1	2	3	4	5
Meal times					
Are in-between snacks provided? Y/N					
Flexible meal schedule Y/N					
Is a meal plan available? Y/N					
Are there any restrictions on dining room hours? Y/N					
Is tray service available? Y/N					
Are meals to go available? Y/N					
Are guest trays available? Y/N					
Is alcohol allowed? Y/N					
Are alternate menus available? Y/N					
Are alternate hot meal menus available? Y/N					
Are there separate dining rooms based on physical or cognitive ability?					
Prescribed or special diets Low sodium? Y/N for each <ul style="list-style-type: none"> o Low sodium o Diabetic 					

<ul style="list-style-type: none"> ○ Calorie restricted ○ Allergy restricted ○ Mechanical soft ○ Puree ○ Thickened liquids ○ Vegetarian ○ Other 					
Ethnic food available? Y/N (Specify, e.g. Kosher)					

Activities

	Priority Score				
	1	2	3	4	5
Special activities program for dementia clients Y/N					
Scheduled activities Y/N					
Planned outings, e.g. movies, parks, shopping trips Y/N					
Are individual activities available? Y/N					

Health Care Services

	Priority Score				
	1	2	3	4	5
Assist in scheduling medical appointments Y/N					
Is a nurse available for on-site assessments? Y/N					
Are medical services (MD/NP) available on site? Y/N					
Are podiatry services available on site? Y/N					

Transportation

	Priority Score				
	1	2	3	4	5
Transportation provided to routine medical appointments Y/N					
Transportation to other services, e.g., shopping, church, etc. Y/N					
Is accompaniment to medical appointments available? Y/N					
Is accompaniment to non-medical services available? Y/N					
Is transportation available for persons in wheelchairs? Y/N					

V. STAFFING

Definition: A direct care staff is defined as a staff person who assists with activities of daily living – bathing, dressing, grooming, toileting, eating)

Staff Availability

	Priority Score				
	1	2	3	4	5
# Hours per week administrator on site					
How many direct care staff are available in the day time?					
How many direct care staff are available in the evening?					
How many direct care staff are available during the night?					
How many direct care staff are awake during the night?					
Does the direct care staff live in the facility?					

Types of Staff

	Priority Score				
	1	2	3	4	5
Is there a licensed nurse (RN/LVN) on staff? Y/N Hours per week?					
If not, is there a licensed nurse acting as a consultant on site? Y/N Hours per week?					
What other types of staff are available for residents? <ul style="list-style-type: none"> o Medical Doctor o Activity Director o Chef o Housekeeping/Laundry o Receptionist o Driver o Other (Specify) 					

Language Competency of Staff

	Priority Score				
	1	2	3	4	5
Bilingual staff, if yes, what other languages are spoken? (Drop down box of languages to choose from.) <ul style="list-style-type: none"> o Spanish o Cantonese o Mandarin o Tagalog o Vietnamese o Japanese o Russian o Korean o Other, specify language 					

VI. COSTS & SOURCES OF PAYMENT

Admission Agreement

	Priority Score				
	1	2	3	4	5
Admission Agreement (Link to PDF on Facility Website)					

Rate Schedule

	Priority Score				
	1	2	3	4	5
Rate Schedule (Link to PDF on Facility Website)					

Rates & Fees

	Priority Score				
	1	2	3	4	5
Does the RCFE have the admissions agreement available electronically? Y/N					
Is there a rate sheet available electronically? Y/N					
Does the RCFE charge a single all-inclusive rate for all care and services? Y/N					

Does the RCFE charge a basic rate, and then charge extra for the type and level of services needed? Y/N					
Cost range for private room (or average monthly cost)					
Cost range for semi-private room					
Cost range for Apartment-Style Units					
Cost range for Rooms with Private Bathrooms					
Cost range for Rooms with Private Kitchenette					
Is there an additional cost for transportation? Y/N					
Is there an additional cost for accompaniment services? Y/N					
Cost range for dementia care					
Cost range for hospice care					
Cost range for non ambulatory care					
Cost range for additional care and service fees, above the base rates					

Upfront Charges

	Priority Score				
	1	2	3	4	5
Preadmission Fee Y/N					
Preadmission Fee Amount (Range)					

Accepted Sources of Payment

	Priority Score				
	1	2	3	4	5
Private pay only					
Long term care insurance					
Accept Supplemental Security Income (SSI)/Number accepted					
Accept VA program benefits for assisted living					
Accept Medi-Cal (e.g. Assisted Living Waiver Project)					

VII. LICENSING HISTORY – COMPLIANCE

In addition to the information below, show an industry average for counts of deficiencies, incidents, and substantiated complaints so that consumers have some sense of usual performance for the purpose of evaluation and comparison. Compilation of these averages might be based on one or more factors (e.g., statewide figures, by the region within the state or by facility size).

Basic Information

	Priority Score				
	1	2	3	4	5
RCFE inspected for any reason in past 12 months Y or N					
Date of last inspection					
Enforcement action taken to restrict license (in past 2 years) Y or N					
Date of administrative action					
Type of administrative action					

Advanced Information

	Priority Score				
	1	2	3	4	5
Number and type of reported licensing deficiencies in past 24 months.					
Incident reports resulted in a licensing visit in past 24 months Y or N.					
Enforcement action taken to restrict license (in past 2 years) Y or N					
Number of complaints in past 24 months					
Number of substantiated complaints in past 24 months					
Facility Evaluation Report (809)					

VIII. RESIDENT CHARACTERISTICS

This information can provide critical information to determine quality of care outcomes, and to evaluate the appropriateness of regulations to meet evolving resident needs. They give an industry snap shot of these attributes and could be used to monitor trends over time and to compare resident mix relative to facility staffing, deficiencies, incidents, etc.

Concerns raised were that such data collection would produce a burden for providers; is beyond the scope of the present project; and it is unclear how it would impact consumer choices. Note: Use #'s not percentages.

Basic Resident Characteristics

	Priority Score				
	1	2	3	4	5
Gender (# M and # F)					
# under age 70					
# over age 85					
# of residents needing assistance with psychiatric disabilities					
# of residents needing assistance with developmental disabilities.					
# of residents with substance abuse issues					
#of residents receiving hospice care					
#of residents under 60 years of age					

Other Demographic Information

	Priority Score				
	1	2	3	4	5
Source of payment – private pay or public funding					
Average Length of stay					
Primary and Secondary Diagnosis (e.g. Dementia)					

Care Needs Provided

	Priority Score				
	1	2	3	4	5
# of residents requiring assistance with dressing or grooming					
# of residents requiring assistance with bathing					
# of residents relying on canes					
# of residents relying on walkers					
# of residents relying on wheelchairs					
# of residents needing assistance with incontinence of bladder					

# of residents needing assistance with incontinence of bowel					
# of residents needing assistance with colostomy or ostomy care					
# of residents needing assistance with catheter care					
# of residents needing assistance with transferring.					
# of residents needing assistance with feeding.					
# of residents with dementia.					
# of residents who wander.					
# of residents who exhibit "combative behaviors"					
# of residents who are medically fragile persons with one or more serious health care conditions.					

Admission Sources

	Priority Score				
	1	2	3	4	5
# Self, per year					
# Family Member, per year					
# M.D., per year					
# Placement agency, per year					
# Other LTC professional, per year					
# Hospital, per year					
# Other RCFE, per year					
# Other (specify), per year					

Discharge Status

	Priority Score				
	1	2	3	4	5
Average length of stay for residents					
Nature of discharge (# eviction related to payment; # eviction related to level of care; # voluntary; # death) per year					
Disposition					
o # Home or home of family member					
o # Another RCFE					
o # Skilled nursing Facility					
o # Hospital					
o # Death					
o #Other (specify)					