How To Choose a Nursing Home:

Preparing for Your Choice

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Part of the Senior Service Network – Supported by the DC Office on Aging
Long-Term Care Choices

1) DC Community Based Services:
   a) Home Health Care
   b) Subsidized Senior Apartments/Dwellings
   c) Board and Care Homes
   d) Assisted Living Facilities
   e) CCRCs: Continuing Care Retirement Communities

2. DC Medicaid Waiver Supported Programs:
   a) Elderly and Physically Disabled Waivers
   d) 50 – 64 Medicaid Waivers
   c) Straight Medicaid Services Coverage
Where Do I Start?

- Involve your loved one in making decisions
- Involve other family members: share responsibility
- List nursing homes close to family, friends, and community network
- Locate your Local or State Long-Term Care Ombudsman Program
- Seek nursing home advocacy groups: both inside and out
- Contact the State or local Office on Aging
- Meet and plan with hospital discharge planners and social workers
Skill Level Needed and Certification

- **SNF = Skilled Nursing Facility**
  1. Care after a 3 day period of hospitalization
  2. Medicare Certified and Coverage
     a) 1 - 20 Day 100% of services are covered
     b) 21 - 100 Day: Services covered except co-insurance daily rate 133.50 per day (2009 rates)

- **NF = Non Skilled Facility**
  1. Care for residents needing activities of daily living
  2. Medicaid Certified (usually)
Best Source of Information

A. Long-Term Care Ombudsman
B. Members of Citizens Advocacy Groups
C. Families and Family Councils
D. Residents and Resident Councils
E. NH Employees – Front Line Staff
F. Doctors, Hospital SWs, Clergy, other professionals
Made my choice, NOW WHAT?

- Read the inspection report and seek help with deciphering the report
- Visit the home, a few times:
  - at least one unscheduled visit (weekends or nights)
  - Eat a meal or two
  - Talk to residents, staff, and visitors
  - Talk to the director
Signs of Good Care

- **Cleanliness:** a fresh appearance and smell
- **Dignity:** staff treating all residents with friendliness, patience and respect
- **Activity:** Residents participating in exercises and activities (Not Just Watching TV)
- **Good Food:** tasty, balanced, menu has variety
- **Helpfulness:** staff and professionals respond quickly to call bells and helping residents who need assistance with eating, mobility, or interacting
- **Home-like Environment:** Signs that administration regards this as a place as a home
- **Resident Focused**
Signs of Bad Care

- **Orders:** pervasive odors of urine, feces, chemicals indicates lack of staff to assist resident or keep facility clean
- **Physical Restraints:** vests, wrist restraints, wheelchair bars, locked lap trays, bed bars to force people to stay in bed
- **Lack of Privacy:** unclothed or partially clothed in rooms and hallways, knocking before entering, phone calls, and mail
- **Disrespect:** disrespectfully or roughly spoken or care for, lack of assistance
- **Unanswered Calls for Help:** cries for assistance, unanswered call bells, or ignored
- **Isolation and Inactivity:** lined in hallways or sitting in rec rooms for hours

*DO NOT BE FOOLED BY PRETTY DECORATIONS TO MASK STAFF SHORTAGES OR OTHER SERIOUS PROBLEMS*
What If ???

1) Don’t Have Much Time To Look?

2) Hospital Wants to Discharge Now, What Do I Do?

3) Hospital Found a Nursing Home Placement but I Don’t Thinks It is Suitable?
Other Issues to Think About

✓ Nursing Home Contracts Are Legal Docs
✓ Stay Involved!
✓ Seek Assistance From:
  a) DCOA, Aging and Disability Resource Center: (202) 535-1444
  b) DC Long-Term Care Ombudsman Program: (202) 434-2190
  c) Legal Counsel for the Elderly: (202) 434-2120
  d) AARP DC: (202) 434-7702
  e) NCCNHR: (202) 332-2275
  f) Alzheimer’s Association: 800-872-3900