Assisted Living in San Diego

We cover it all from the origins, available options, how to tell if it’s time, choosing a community, legal issues, making the transition, and much more!

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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 all 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 providing guides, resources and explaining the many options available to help remove some of the fear and make way for clear, well-informed decisions.
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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, well over 8,000 assisted living facilities are licensed by the State of California. Assisted living (now referred to by the state as Residential Care Facilities for the Elderly or RCFEs) is offered to anyone over the age of 60 in need of non-medical services.

Prior to these facilities becoming known as “assisted living” or “residential care” the state referred to them as “board and care homes” and the term is still quite common. The state views all as Residential Care Facilities for the Elderly and all are licensed under that title. Approximately 80% to 90% of these licensed homes provide 4 to 15 beds and are most commonly referred to as “residential care facilities” while larger facilities with capacities of up to 200 and more are usually referred to as “assisted living”. With all that said, more and more facilities, no matter the size, are referring to themselves as “assisted living”.

Prior to these facilities becoming known as “assisted living” or “residential care” the state referred to them as “board and care homes” and the term is still quite common.
Who Oversees Assisted Living in San Diego?

Assisted living facilities are certified and licensed by the State of California, Department of Social Services, Community Care Licensing (CCL) (Appendix A). The Community Care Staff is responsible for inspecting each licensed Residential Care Facility for the Elderly (RCFE). The investigation staff considers operations and facility issues such as staffing patterns, building structure and cleanliness in their evaluations. Results of the most recent inspection and a copy of any valid complaints within the past year must be provided by the facility upon request.

Facilities that perform well on inspections and have no complaints may not be inspected for up to five years, while problem facilities could be inspected much more often until problems have been resolved.

California requires administrator certification. Some college, experience, ongoing classwork and a criminal background check are required of all. Staff must be at least 18 years of age and also pass a criminal background check. Since residential care facility licensees are considered non-medical there are no requirements for nurses or doctors.
How to Tell if it’s Time for Assisted Living

Sometimes a recent illness or loss will leave no question that a loved one 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?

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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.

Is a family caregiver exhausted due to the amount of care your loved one needs?

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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:

1. Talk Sooner Rather Than Later
   Have the conversation about long-term care before the need arises.

2. Prepare Yourself
   Take the initiative by doing your homework and offering options.

3. Prepare Your Loved One
   Ask permission of your loved one to have the discussion.

4. 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.

5. Stay Positive
   Understand that it is normal to encounter resistance the first time you bring up long-term care.

6. Be a Good Listener
   By listening, you can learn the wants and needs of your loved one.

7. 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 Senior Guide publication “Staying in the Home”. Just go to our Web site www.retirementpublishing.com > Idaho Publications). This will extend the current living situation and buy more time for the decision-making process.
Which Type of Assisted Living is Best for Your Situation

California assisted living communities range from small homes to multi-unit complexes. Generally, those with four to eight beds are considered Residential Care Facilities. Larger Assisted Living Facilities may have over ten to hundreds of beds. Some are new, state-of-the-art buildings, while others may be a converted home, renovated school or apartment building.

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 four 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 dementia residents 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. The Residential Care option is usually much more affordable than the larger facilities.

Assisted Living Facilities can range in capacity anywhere from ten to more than a hundred. Fifteen residents make for the most efficient use of staff. 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. 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” (AIP) and “Life Care” communities.

The “Life Care” communities must guarantee health care coverage for life with no exceptions, must include a nursing facility in the community and assure a resident will be kept on by the community even if the residents resources are depleted. They usually require large down payments or deposits for entry and, for this reason, are highly regulated by the state. There aren't many “Life Care” communities in the state but if you’re considering one, definitely have an attorney look over your contract.

The main advantage to a “Continuing Care” or AIP community is that as your needs change you can still live within the same community. Some require an entry fee and others do not.

Alzheimer’s/Memory Care Extra training and experience can qualify Residential Care Facilities for the Elderly to offer dementia care for their residents. The ability to do this varies as widely as the behavior of Alzheimer’s/dementia residents. You will want to be assured the facilities and skills offered match those needed by the resident. To help in this endeavor you may want to call for our free Alzheimer’s Resource Directory for San Diego County at 1-800-584-9916 or visit our Web site, www.retirementpublishing.com to view or download a copy.
Some 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 almost impossible 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.

Financial Options

Almost all facilities accept only private pay. Unlike nursing homes, Medicare (health insurance for the aged and disabled) and Medi-Cal do not pay for assisted living services.

The State of California offers a Supplemental Security Income (SSI) for qualifying RCFE residents. The SSI program is very difficult to qualify for and even when you do, very few facilities can accept SSI residents because of the low rate of reimbursement.

The VA offers veterans and their spouses help in the form of their Aid and Attendance program. To find out more about qualifications and reimbursements contact the nearest VA office (Appendix C).

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. Again, the time to shop for policies is long before the care is needed.

Costs for care in a Residential Care Facility for the Elderly vary depending on room size, services needed, the type and size of the facility, location, and several other factors. The base costs almost always covers room, board and meals. Each facility

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Financial Options (cont.)

determines its own fee structure. This may be presented as a all-inclusive fee, or as a base cost plus fee-for-service expense. You can add on more for Alzheimer's/dementia or other illnesses requiring more intensive non-medical care. Facilities can increase fees for level of care increases with a two working day notice but are required to give 60 day notice to increase rates. Many facilities also require a deposit that may or may not be refundable.

The cost for Residential Care Facilities (10 or fewer capacity) can run from a minimum of approximately $1600 - $1800 to a high of over $4000 per month, with an average ranging in the $2600 – $3200 area.

The cost for Assisted Living Facilities (from 10 to a capacity of hundreds) can run from a minimum of approximately $1900 - $2000 to a high of well over $5000 per month with an average ranging from $3200 to $3800 per month.

While these rates can sound quite high, when compared to an average nursing home of $7000 to $10,000 per month, they can represent quite a savings.

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 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.

A referral agency is another source of help. Agencies in the San Diego area are plentiful and can be found in area phone books, most senior publications or guides in the area. Their fees are paid by the facilities and are free to seniors or families seeking

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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 healthcare workers or agencies can supply
one. You can also call (during business hours 800-
584-9916) or email: admin@retirementpublishing.
com and we will get one out to you.

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?)

How to Find a Facility that
Fits Your Needs (cont.)

Most checklists are pretty lengthy so you might want
to pick out a few items that are most important to
you. 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.

When you've done your homework, request
individual survey reports from administrators.
These reports from the Community Care Licensing
(CCL) (Appendix A). identify any deficiencies and
complaints at the facility of choice, and their plans
for correcting them.

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.
The Contract

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.

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Making the Transition (cont.)

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.
• Pack wisely. Don’t bring everything (the hardest).
• Obtain a list of suggested items to bring from the residence.
• 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, San Diego Counties’ Aging & Independence Services (Appendix B) have two programs you can turn to for help.

The Ombudsman program “provides advocates for residents in Long-term care facilities. There advocates maintain a presence in the facilities: respond to, and resolve, complaints; act as mediators; support residents rights; and witness certain legal documents. Visits by ombudsmen are unannounced, and all discussions with residents are confidential”.

Adult Protective Services (800-510-2020) 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 Social Services, Community Care Licensing Division (Appendix A)

And Finally

We hope this booklet has been helpful in your search for assisted living. Please keep in mind that the (your name here) has made this booklet possible. They feel it is 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 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
Appendices

Appendix A
Department of Social Services - Community Licensing Division – Adult and Senior Care Program Offices

Southern Adult Care Regional Office
770 The City Drive, Ste. 7100 MS:29-28
Orange, CA 92868
714-703-2840 FAX 714-703-2868

San Diego Local Unit
7575 Metropolitan Dr., Ste. 109 MS:29-06
San Diego, CA 92108
619-767-2300 FAX 619-767-2252

Appendix B
San Diego County
Aging & Independence Services
800-339-4661
800-510-2020
sandiego.networkofcare.org/aging

Appendix C
Veterans Service Office
5560 overland Ave., Ste 310
San Diego, CA 92123
858-694-3222
FAX 858-505-6961

Veterans Administration Outpatient Clinic
1300 Rancho del Or
Oceanside, CA
760-643-2049