Assisted Living Assessment Guide

Rights of privacy, dignity, respect and freedom from coercion and restraint

TOPIC:  Access to a private way to communicate with friends and family

In general:  Each individual must be offered an accessible way to privately communicate with persons outside of the AL setting.

Acceptable practices:

- The individual may take a cordless phone to his/her room or other private area or is able to use a corded phone in a private area.
- Computer available for use in a commons area – other options must also be available to individuals unable to use a computer;

Unacceptable practices:

- Individual’s method of communication is not in a location that provides for privacy.

TOPIC:  Privacy in medication distribution

In general:  The practices of medication distribution in the AL setting recognize each individual’s right to privacy in regard to medications and the protection of health-related information.

Acceptable practices:

- Offering a choice of locations where medications may be obtained

Unacceptable practices:

- Injections where privacy is not protected
- The sole option is coming to central location for medications when other individuals are present.

Optimizes individual initiative, autonomy, and independence in making life choices

TOPIC:  Individuals’ Access to the Building

In general:  Policies must be in place which balance the AL’s responsibility for safety with individuals’ right to come and go as they choose.

Acceptable practices:
• Sign in/out processes that monitor safety are appropriate as long as the process is not used to restrict individuals’ access to the broader community (e.g., individuals report plans to be absent for meals or at medication times)
• Providing individuals with keys or access codes to building.

Unacceptable practices:

• Specifying the individual must have an escort to leave the building.
• Specifying with whom the individual may leave the building (e.g., individual family or POA).
• Individuals must rely on assistance from staff to enter the building either because of the time of day or because individuals do not have keys or an access code.
• Specifying times or reasons a person cannot leave or must return to building.

TOPIC: Food/dining choices

In general: Individuals have access to a variety of foods at a variety of times throughout the day and night.

Acceptable practices:

• Diners choose where to sit in the dining area. If there’s “assigned seating” it is established through individuals’ choices not provider convenience.
• If only one mealtime menu is offered, individuals have other options for a preferred entrée (e.g., requesting a sandwich alternative in advance; choosing to prepare the meal in their apartments)

Unacceptable practices:

• Individuals are expected to eat in the dining room with alternatives accommodated only in case of illness.
• Individuals are not allowed to keep and eat foods/snacks in their apartment.
• Individuals do not have access to snacks provided by the AL at all times.

TOPIC: Choices in performance of household activities such as cooking and laundry.

In general: Individuals have options to participate in performing household activities as they choose.

• A food preparation area is available to individuals in their apartments or a common area.
• Individuals may cook in the kitchen area upon request, with appropriate staff supervision and assistance.
• Laundry options are provided to meet the individual preferences.

Unacceptable practices:

• Individuals are not allowed to choose whether to participate in daily activities.
• Only one method (e.g., staff perform) is offered for performance of cooking or laundry.
• Individuals have to go to a commercial laundry at their expense.
• Individuals are required to have their names marked in their clothing.
Individual choice regarding services and supports and, and who providers them

TOPIC: Choosing providers

In general: Individuals have the right to choose from among Medicaid-approved providers for needed supportive services in the setting (e.g., pharmacy, physical therapy).

Acceptable practices:

- Any limitation in additional service providers (e.g., pharmacy when the AL administers the medication to promote consistency in packaging to limit errors; or providing transportation to only one physical therapy clinic) is provided in writing to the individual at admission and a vendor change is planned. By Licensure, these limitations must be cited in the Resident Service Agreement.

Unacceptable practices:

- Individuals are required to use AL-designated providers without prior notification.

Opportunities to engage in community life.

TOPIC: Access to activities in the AL setting and in the broader community.

In general: The provider not only offers activities in the setting but also takes steps to encourage individual access to activities in the broader community. This requirement may be as basic as providing information about community happenings; it promotes but does not require that the AL make arrangements for or fund outside activities. Each individual chooses his/her preferred level of participation in all activities.

Acceptable practices:

- Non-medical transportation is provided or arranged by the AL, as requested by the individual.
- Individuals are able to access materials to learn of activities (newspaper, internet, etc.)
- Individuals in the AL may attend NF activities, as one option.
- AL offers activities as well as encouraging community involvement.

Unacceptable practices:

- AL offers no activities.
- No recognition of individuals rights to access the greater community activities.

Opportunities to control personal resources

TOPIC: Access to personal needs allowance funds

In general: Individuals and/or their representatives handle financial matters.
Acceptable practices:

- Individuals are able to access and control of their personal needs allowance funds.
- Individuals able to choose their banking services.

Unacceptable practices

- AL assumes a role in managing individuals’ personal needs allowance funds.

**If provider-owned, provides a specific unit/dwelling that is under a legally enforceable agreement**

**TOPIC: Location, Lease, and Options for an AL Apartment**

In general: The individuals’ Resident Service Agreement is applicable to a specific unit in the AL, which does not isolate Waiver-eligible individuals from other units in the building and includes the same responsibility and protections from eviction that tenants have under Nebraska landlord-tenant law.

Acceptable practices:

- Multiple occupancy is initiated by the individual requesting a roommate. “Roommate” selection requires a prior relationship such that the two persons would choose to share living arrangements in any home setting.
- Individuals may decorate their rooms. If materials or labor cost is involved, that is negotiable. The provider must have written policy describing any limitations considered to adversely affect provider property or compromise unit safety (e.g., fire code).
- Landlord tenant protections are addressed in the Resident Service Agreement.

Unacceptable practices:

- Fail to identify the specific unit covered by the lease agreement.
- Apartments available to waiver individuals are congregated in isolation from private-pay apartments.
- The provider initiates the idea of multiple occupancy.

**If provider-owned, provides units with lockable entrance doors, with appropriate staff having keys to doors as needed**

**TOPIC: Locks**

In general: Apartments have lockable doors with access controlled by the individual.

Acceptable practices:

- All apartments have locks. All individuals have keys/access codes to their apartments.
- Only appropriate staff have access keys to an individual’s apartment.
Unacceptable practices:

- No locks and/or no ability to lock the apartment doors.
- Unrestricted access by staff to individual’s apartments.
- Individuals have to pay for lock and installation.

If provider-owned, provides freedom and support to control their schedules and activities and have access to food any time

TOPIC: Scheduled activities such as mealtime, wake/sleep, bathing, etc.

In general: Individuals direct their daily schedules.

Acceptable practices:

- Individual preferences for daily scheduling for bathing, leisure activities, wake/sleep time, etc. are honored.
- Practices promote choice (e.g., meals are served during a range of times with accommodation for an individual meal outside that timeframe, as needed).
- Individuals choose whether to participate in activities.
- A variety of activities are available within the setting.

Unacceptable practices:

- Any policy that limits Individual choice (e.g., the number of baths per week, AL-determined, inflexible schedule)
- Fee is assessed for additional baths.

If provider-owned, allows individuals to have visitors at any time

TOPIC: Visitors

In general: Policies must be in place which balance the AL provider’s need to assure the well-being of all persons in the building with individuals’ right to have visitors as they choose in their home. Unless there is a specific reason to deny or limit access to a specific person, a visitor is any person an individual chooses to invite into his/her home.

Acceptable practices:

- The provider must have a written policy in regard to visitors, including duration of stay and fees for lodging; guest meal costs; other. These policies must be provided in writing to the individual upon admission.
- AL providers may require visitor sign in due to responsibility to know who is present and the number of persons present (e.g., in case of fire or other emergency)
- Visitors whose current or previous visits have caused harm or disruption to any individual may be restricted according to the circumstance to promote individual choice while providing for the safety of all.
Unacceptable practices:

- The provider may not determine acceptable reasons or set limitations based on the visitor-individual relationship.
- Prohibit overnight visitors.
- Set schedule of visiting hours.