

Westminster Village Memory Care

by
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Final Project

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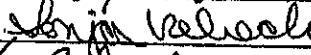
We hereby recommend that the Final Project submitted by: **Shelby Parmer**


Entitled: **Westminster Village Memory Care**

Be accepted in partial fulfillment of the requirements for the degree of Master of Healthcare Administration

Advisory Committee:







We certify that in this Final Project all research involving human subjects complies with the Policies and Procedures for Research involving Human Subjects, Saint Mary-of-the-Woods College, Saint Mary-of-the-Woods, Indiana 47876

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Abstract

Alzheimer's disease and dementia are two growing epidemics, effecting more than 5.5 million Americans. With a growing population receiving this incurable diagnosis it is evident that there is a significant need for facilities that specialize in memory care. Westminster Village is a well-known long-term care community within the Wabash Valley, the implementation of a memory care unit will be a valuable addition to the high quality of care they currently provide. Within this project several components are discussed in regards to this futuristic structure; focusing on the specifics of caring for and providing for individuals with this appalling disease. Researchable variables within this project include the measurements of events, ideas, and costs to convert Westminster Village's existing services into a more enhanced quality of care; a secured memory care community.

Keywords: Westminster Village, Alzheimer's disease, dementia, memory care

Introduction

The number of Americans living with Alzheimer's disease and dementia is increasing at a rapid pace, "As the older population explodes, Alzheimer's disease and other forms of dementia are also on the rise. The Alzheimer's Association reports that more than 5 million people are living with Alzheimer's in 2017 — and this number could more than triple by 2050. Someone in the United States develops the disease every 66 seconds. One in three seniors dies with Alzheimer's or another form of dementia. Alzheimer's disease is the sixth leading cause of death in the U.S. overall, killing more people than breast cancer and prostate cancer combined." (Assisted Living Today) To further break down those statistics, "Of the estimated 5.5 million Americans living with Alzheimer's dementia in 2017, an estimated 5.3 million are age 65 and older and approximately 200,000 individuals are under age 65 and have younger-onset Alzheimer's." (Alzheimer's Association)

With an increase in the growing population having been diagnosed with Alzheimer's and dementia, it is apparent that the problem for Terre Haute specifically is that the city lacks the ability to serve individuals diagnosed with Alzheimer's and dementia; providing only two identifiable locations that serve individuals diagnosed with this dreadful disease. These same facilities can also serve individuals that are diagnosed with Alzheimer's if they choose to do so; maximizing the quality of care they provide should they take the proper steps towards planning for this added implementation. For instance, Westminster Village is the largest Life Plan Community in the Terre Haute area, yet they do not adequately serve individuals with a memory care diagnosis. For this specific facility, implementing a secured memory care community into their existing long-term care facility will enhance the overall quality of care, producing a more sufficient way to care for those individuals affected by Alzheimer's and dementia.

General Company Background

In May of 1976 community leaders met to discuss the creation of a retirement community in Terre Haute. It was decided that there was a need for a unique community that offered the full continuum of care. In October of 1981, Westminster Village began operations. To this day, Westminster Village remains as the only Life Plan Community in Terre Haute. Since opening its doors, Westminster Village has maintained a strong partnership with Life Care Services as its management partner. Life Care Services is based out of Des Moines, Iowa. LCS has been a successful provider of the planning, development and management of senior living communities since 1961. Life Care Services currently manages over 140 senior living communities across the United States.

Mission Statement:

Westminster Village Terre Haute, Inc., a not-for-profit retirement community, is committed to providing services and care to senior adults in a continuing care environment that includes independent living, assisted living, and a health care setting. Westminster Village Terre Haute, Inc. respects the rights and individuality of its residents. We are committed to serving our residents with dignity and worth without regard to race, religion, sex, national origin, age or disability. While striving to maintain a safe and secure environment, we seek to provide the utmost fulfillment of life to each of our residents. (Westminster Village)

Philosophy:

Westminster Village Terre Haute, Inc. is unique. It is relatively different than any other health center or retirement communities. One item that makes them unique is their philosophy, which makes those they serve the focus for all that they do. It is their intent that all residents be recognized as the reason for each of them being here. Their goal is to maintain a level of superiority by providing the very highest quality care possible. Meeting this goal requires a commitment to excellence, a desire to improve, and a willingness to go above and beyond. Hospitality is a culture that Westminster Village Terre Haute, Inc. fully embraces.

Maximum Census:

Westminster Village has 200 Independent Living residences, 38 Assisted Living residences (licensed for 55 residents), and 78 Health Center residences (dually certified Medicare/Medicaid beds). They are the only Life Plan Community in Terre Haute offering independent living (IL), assisted living (AL) and skilled-nursing care (SNF). They are also the only provider of “life care contracts” in Terre Haute, which is essentially a lifetime promise of care. For instance, if an individual ever runs out of financial resources, Westminster Village continues to take care of the resident in their appropriate level of care.

Project Description

Westminster would like for their memory care community to be licensed as an assisted living facility, but with a higher staffing ratio consisting of staff with more dementia-specific training. “Memory care tends to be more intensive than a lot of other nursing home care. Most residents require 24-hour supervision and have high-level needs. So, memory care units typically have higher staff-to-patient ratios, and the staff usually have greater training requirements than staff in other units. All of those factors, combined, often result in higher rates being charged to residents.” (Great Senior Living) Westminster would like to avoid new construction at this point, and utilize an existing wing of their IL apartments. Their leadership team believes an ideal memory care wing would be suitable for 20 or less residents.

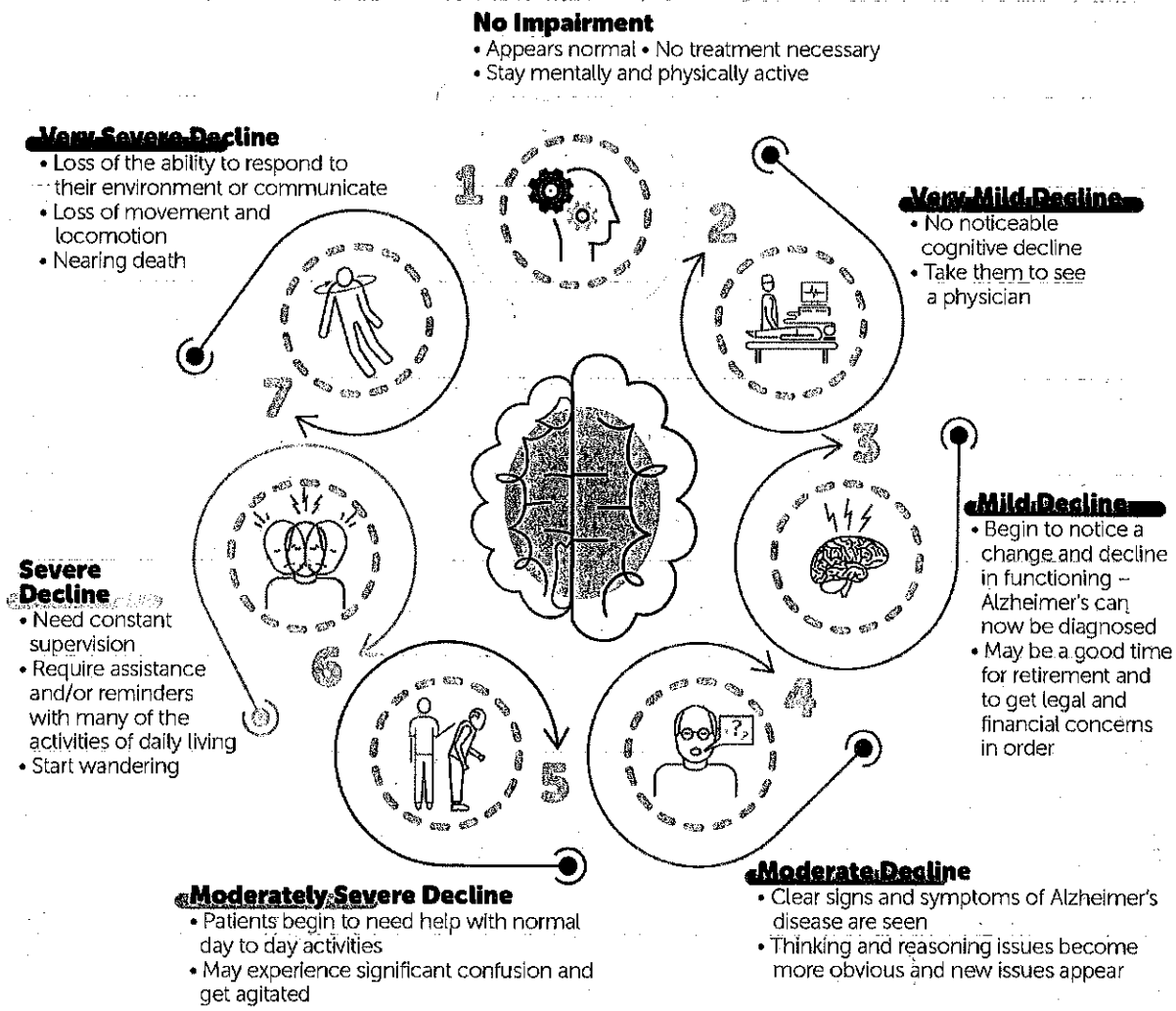
Literature Review

Alzheimer's Disease & Dementia Overview

Alzheimer's and dementia are often considered to be the same, however they are not, instead one is the main point while the other is a sub point; intertwining with one another. In fact, Alzheimer's disease is only one disease that defines dementia, yet this specific disease accounts for 60 to 80 percent of dementia cases." (What is Alzheimer's?) Dementia is known as an umbrella term of memory loss and social and cognitive impairment; having nearly 90 different types of irreversible and reversible diseases. "People can have more than one type of dementia. This is known as mixed dementia. Often, people with mixed dementia have multiple conditions that may contribute to dementia. A diagnosis of mixed dementia can only be confirmed in an autopsy." (Dementia and Alzheimer's: What Are the Differences") Other top causes of dementia include; vascular dementia (post stroke), frontotemporal lobe dementia (combativeness), Lewy bodies dementia (hallucinations), Parkinson's disease, and Hunter's disease. Reversible dementia examples are disorders that are only temporary and can be treated overtime including; urinary tract infections, pain, emotional disorders, endocrine disorders, and nutritional deficiencies.

Alzheimer's slowly develops overtime, but it is not a normal process of aging. Unfortunately, there is not a current cure for this disease. Many individuals who are diagnosed with this disease undergo treatments and research to better understand the causes and potential effects; they undergo the individual experience of progressive, predictable, and terminal. The below diagram breaks down the differential diagnosis in Alzheimer's disease algorithm.

PROGRESSION OF ALZHEIMER'S DISEASE



Alzheimer's treatment and care are connected. Although there is no cure, there is a lot that can be done.



The treatment regimen that will be prescribed varies from person to person. Finding the appropriate treatment depends on the patient and any comorbid conditions that he or she may have.

(Takeddine, 2017)

The disease branches into three progressive categories; mild Alzheimer's, moderate Alzheimer's, and severe Alzheimer's. These three branches are further narrowed into the seven different stages that categorize individuals within the disease process:

- Stage 1: No Impairment – Alzheimer's disease is not detectable and no memory problems or other symptoms of dementia are evident.
- Stage 2: Very Mild Decline – Minor memory problems or lose things around the house, the individual will still do well on memory tests and the disease is unlikely to be detected by physicians or loved ones.
- Stage 3: Mild Decline – Individual starts having problems finding the right word during conversations, remembering names of new acquaintances, planning and organizing. Physicians are now able to detect impaired cognitive function.
- Stage 4: Moderate Decline – Symptoms are apparent. Individuals have trouble with simple arithmetic, forget details about their life histories, and inability to manage finance and pay bills
- Stage 5: Moderately Severe Decline – Patients begin to need help with many day to day activities; significant confusion, inability to recall simple details about themselves such as their own phone number, difficulty dressing appropriately. However, individuals can still bathe and toilet independently, they know their family members, and still have recollection of their personal histories.
- Stage 6: Severe Decline - Patients need constant supervision and frequently require professional care; major personality changes and potential behavior problems, the need for assistance with activities of daily living such as toileting and bathing, inability to recognize faces except closest friends and relatives, and significant wandering.

- Stages 7: Very Severe Decline – Final stage of Alzheimer’s disease, patient loses ability to respond to their environment or communicate; difficulty forming words/phrases and trouble swallowing.

(What Are the 7 Stages of Alzheimer’s Disease?)

The Progression of Alzheimer's Disease

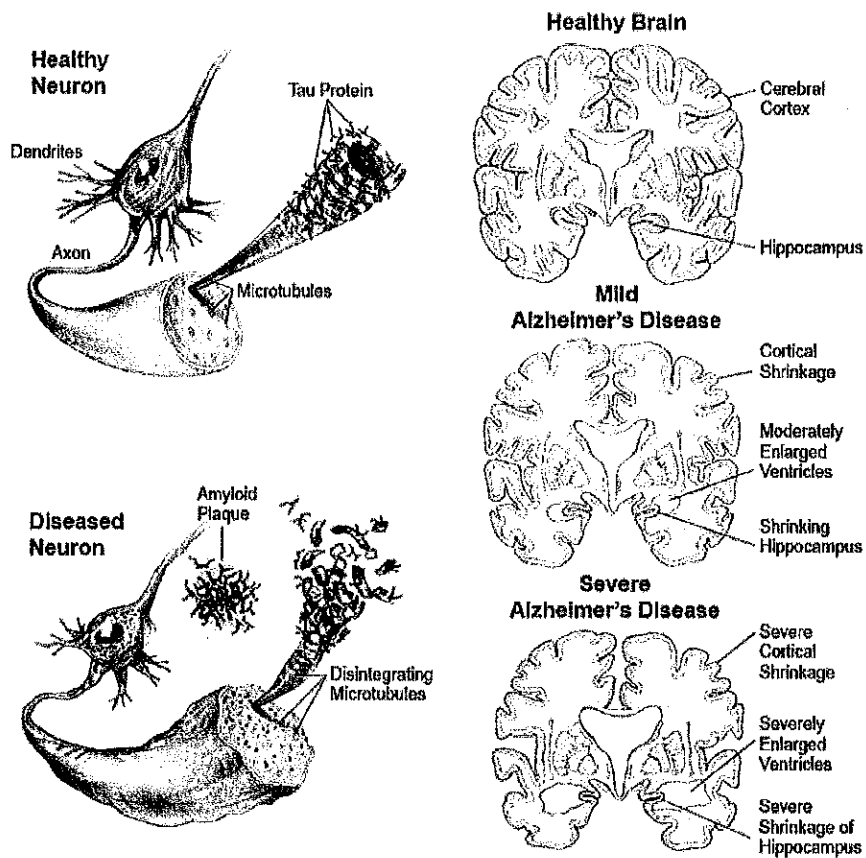


Illustration by Bob Morreale, provided courtesy of the BrightFocus Foundation



(Morreale, 2017)

Memory Care Regulations

Joint Commission established memory care requirements in 2014, however they have since been updated; the last updated version being December 28, 2017. Joint Commission has implemented two topic details in regards to memory care nursing centers; accreditation requirements and optional memory care certification. (Topic Details, 2017)

Memory Care Accreditation Requirements:

- Care coordination
- Staff knowledge and competency
- Activity programming based on abilities
- Behavior management
- Safe and supportive physical environment

Optional Memory Care Certification:

- Specialized care and service programming centered around a resident's unique needs
- Advanced staff training and demonstrated current best practices in dementia care
- Providing opportunities for intergenerational activities
- Providing an environment that minimizes noise
- An organizational learning culture
- Availability of support groups for family members of patients or residents with dementia

Following these accredited requirements and implementing this optional certification allows for Reflections to provide an enhanced memory care unit for individuals with Alzheimer's disease and dementia; creating a sense of comfort for the residents and their loved ones. Overall, allowing Westminster Village to become the LTC provider of choice in the area.

Constructing Memory Care Facilities

“Memory care facilities have been on the rise for almost a decade to accommodate this influx. As of the second quarter of 2016, there were about 65,594 memory care units in existing inventory, according to the National Investment Center for Seniors Housing and Care (NIC). That’s an 8.3% increase on a year-over-year basis from 60,548 in 2015.” (Garber, 2017) Memory care facilities offer many qualities, but the overall goal is to enhance the individual’s quality of life. Westminster Villages has these appealing conveniences within their AL, however they are missing one important concept of quality of care with today’s growing population of Alzheimer’s disease and dementia; a memory care community. Many facilities have implemented memory care units within their AL’s but it is important to understand the difference between the two; both requiring different levels of continuum in care. “Memory care is a distinct form of long-term skilled nursing that specifically caters to patients with Alzheimer’s disease, dementia and other types of memory problems. Also, called special care units (SCUs), memory care units usually provide 24-hour supervised care within a separate wing or floor of a residential facility.” (Stevenson, 2017)

Situation Analysis

Westminster Village, like other long-term care communities serve the needs of seniors that can no longer live independently. Strong LTC communities periodically create a SWOT analysis; identifying their strengths, weaknesses, opportunities, and threats. An implementation of a memory care community would be influenced by the following snapshot for Westminster Village.

Strengths:

- Awarded a Five-Star quality rating in 2017
- Specialized care for Alzheimer's disease and dementia individuals
- Secured unit, allowing individuals to wander freely within limits
- Increased population

Weakness:

- 24-hour supervision (more intensive care within memory care; more one on one care)
- Higher staff-to-patient ratios
- Additional training
- Resident behaviors

Opportunities:

- Providing an important service within the Wabash Valley
- New market
- Increased revenue

Threats:

- Additional state regulations
- Elopement risks (residents potentially escaping the building)

Layout Plan

Currently Westminster Village offers assisted living, which provides the following conveniences for their residents:

- 24/7 nursing staff
- 3 meals served daily
- State Licenses
- Secured Areas
- Weekly housekeeping and laundry
- State required safety checks every two hours
- Emergency push-button pendent
- Assistant with ADL's (Activities of Daily Living: showers, dressing, cuing)

Westminster Village's memory care community will be referred to as Reflections, straying away from identifying the unit as a diagnosis, instead identifying it as a home that residents can reflect on their lives in various ways. The current IL (independent living) apartments will be converted into a secured unit, creating safe living quarters that 20 diagnosed Alzheimer's and dementia residents can call home. Each apartment doorway will display the resident(s) name while also providing a shadow box which will serve as a memory box; allowing residents to have a sense of recollection and safety when entering their apartment. Reflections will provide both private and shared living spaces for residents, offering twenty-four-hour supervised care by staff specifically trained in dementia care. All doors will be secured with passcodes, but also having key entry should the facility encounter electrical issues. Having a secured unit will allow residents to wander freely within the unit. Aside from the fifteen resident apartments, the unit will also be fully equipped with the following:

- Secured nursing station and med room
- Three administrative offices
- Dining room (both public and private)
- Kitchen
- Common room
- Two public restrooms
- Therapy room
- Four functional activity rooms
- Sunroom
- Courtyard

The nurses station will be assessable to only staff members through keypad entry, the med room will be within this designated area but with a key entry lock instead, as only those certified for med-pass will be allowed in this designated room. The nurses station will be equipped with half-dome safety mirrors in two different areas; allowing staff members to sufficiently monitor residents throughout the halls. The main entry and exit door will be in eye-line sight of the nurses' station, allowing only staff members to buzz out family members and guests; hindering the occurrence of a residents eloping without awareness of nonaffiliated personnel.

Three administrative offices will be within the unit; an Alzheimer's Director, a Reflections Program Director, and a Director of Nursing will fulfil these offices. These individuals will act as immediate resources for not only the nursing staff, but for residents and their families as well.

The common room, otherwise known as the family room will be in the middle of the unit. This room will be fully furnished with an entertainment center, couches, recliners, rocking chairs, and an electric fireplace with a mantel which will have a mounted television; providing a sense of comfort for residents. Both public restrooms will be near the common room, providing availability for residents, staff, and family members to utilize while visiting. From the common room, you are able to see the dining room which is connected to the enclosed kitchen. Although the main kitchen is enclosed, the unit has its own mobile cooking station that can be brought into the middle of the dining room; allowing residents to participate in cooking interaction. The tables will seat four individuals at each table with comfortable seating; allowing the residents to dine with dignity. The private dining room will sit catty-corner from the main dining room, allowing residents and their families to celebrate special occasions together in a secluded area.

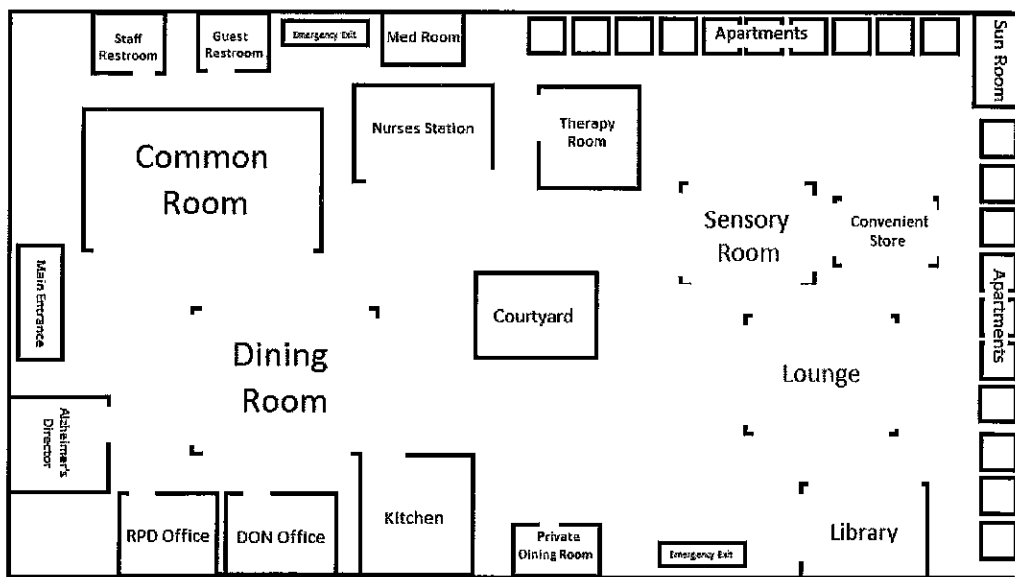
The therapy room will be conveniently located near the DON office. This room will be fully equipped with therapeutic equipment; providing residents with the tools they need to get back to ADLs.

Reflections will also have four functional activity rooms, which will act as stimulating rooms. The first activity room will provide a library for residents, allowing them to reflect on their earlier roles in life whether that be a teacher, a librarian, a newspaper writer, or a lawyer. This room will provide teaching desks, tables and chairs, newspapers, magazines, and puzzles. The second room will serve as a convenient store, equipped with a cash register and replica convenient store merchandise like coke bottles, candy bars, and comic books will also be provided. The third activity room will serve as a sensory mechanism, providing a space for cuddle therapy and aromatherapy. Life-like babies, stuffed animals, and Scentsy aromas will be provided in this room; creating an enhanced soothing effect for residents. The fourth room will

serve as a lounge, for male or female residents. This room will be set up as a sports bar, with various sporting team logos and mounted TVS, a golfing simulator will be located in one corner of the room, and the other corner will have an arcade machine. All four of these rooms will be spaced throughout the unit, acting as various reflections throughout stages of residents' lives based upon their hobbies up until the diagnosis of the disease.

The sunroom and courtyard will serve as additional calming mechanisms. The sunroom will be on the interior portion of the unit, looking into the exterior courtyard. The sunroom will include wicker furniture and gliders; providing a soothing remedy. The exterior courtyard will only be accessible with keypad entry, staff will be able to escort residents to the courtyard filled with flowers, shrubs, and bird feeders. A concrete slab with patio furniture will also be provided. This can be enjoyed by residents and their families during the warmer Indiana months.

All storage closet doors, office doors, and exit doors although secured will be painted with a redirecting mural concept in mind; a coat closet, a bookshelf, entertainment center, and fireplace. These door murals will serve as redirecting mechanisms for agitated and confused residents; providing a sense of home-like comfort.



Objectives

Contingent upon the expertise of the specific LTC, communities tend to have various objectives, however, they are all focused around one specific topic; resident care. For Westminster Village's future addition, their expertise is memory care. "The overall objective of Memory Care facilities is to provide care for seniors with Alzheimer's disease by keeping the participants as healthy and active as possible. Social services and programs are tailored to provide seniors with Alzheimer's disease and other Dementias with as much mental and memory stimulation as possible." (Memory Care) Other objectives of Westminster Village's memory care community include:

- Ensuring the highest quality of care
 - Serving 20 residents within the first 4 months of opening
- Providing safe and secure care
 - Meeting all safety requirements – both inside and outside resident apartments
- Providing dementia-based training
 - Track associate training
 - Ensure that training requirements are up to date quarterly
- Engaging residents and enriching lives
 - Analyze data and identifying gaps in activity programs
 - Measure specific activities that residents participate in the most
 - Create and monitor transportation needs of residents throughout the community
- Creating awareness
 - Increase access of information for available support for families and residents
 - Provide educational programs (lunch and learns, attracting prospective residents)

Staffing

Like Westminster Village's AL, IL, and SNF; Reflections will also be overseen by the Executive Director and Administrator. However, within Reflections, three separate administrative roles will also be present. This unit will have their own DON, which will oversee and direct all the nursing personnel within the department. The DON will guide the nursing staff in regards to medical and physician questions, while also provide insight in regards to resident behaviors.

Reflections will also have an Alzheimer's Director. This position will be a rather heavy workload, but will be the powerhouse for the entire unit. The AD will be responsible for providing the adequate Alzheimer's training for the nurses, CNAs, and RAs working within Reflections. The AD will provide insight for resident and family matters, assist with the transition of a resident move-in, and serve as an educated resource for staff and family in regards to questions about specific resident behaviors due to the disease. Furthermore, the AD may also be responsible for interviewing candidates; evaluating their ability to work with these specific type of individuals.

According to the Indiana State Department of Health, under the 410 IAC 16.2-3.1-13 Administration and management, "In facilities that are required under IC 12-10-5.5 to submit an Alzheimer's and dementia special care unit disclosure form, the facility must designate a director for the Alzheimer's and dementia special care unit. The director shall have a minimum of twelve (12) hours of dementia- specific training within three (3) months of initial employment as the director of the Alzheimer's and dementia special care unit and six (6) hours annually thereafter to: The director of the Alzheimer's and dementia special care unit shall do the following: (1) Oversee the operation of the unit. (2) Ensure that: (A) personnel assigned to the unit receive

required in-service training; and (B) care provided to Alzheimer's and dementia care unit residents is consistent with: (i) in-service training; (ii) current Alzheimer's and dementia care practices; and (iii) regulatory standards." (Indiana State Department of Health Health Care Quality and Regulatory Commission)

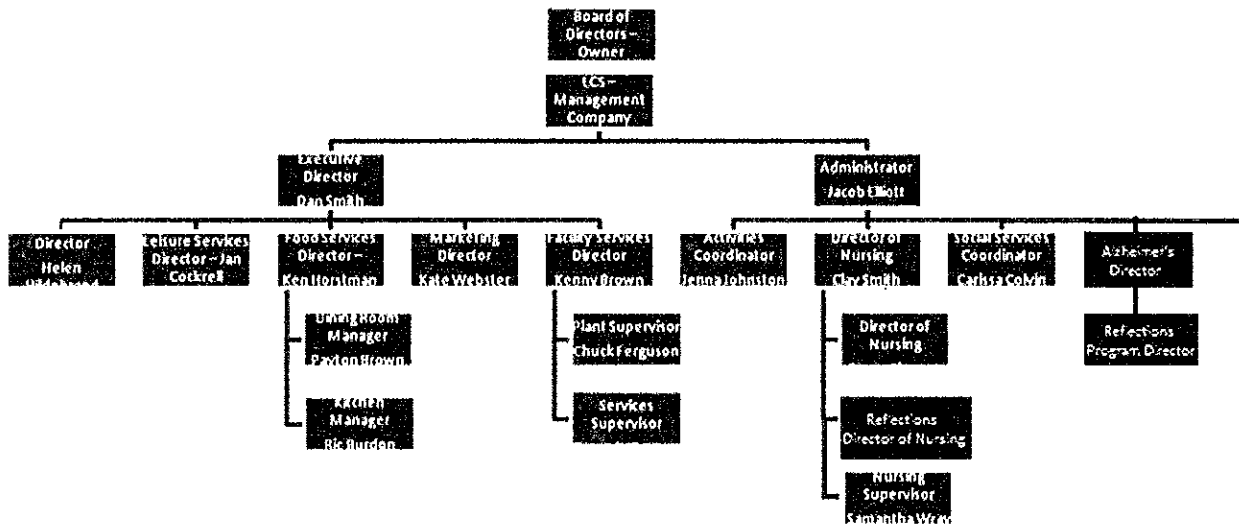
Reflections will also have a Program Director; RPD. This individual will be responsible for providing daily activities that focus on engaging residents; creating a monthly calendar that is centered around ADLs and their hobbies. The RPD will be responsible for creating emotional connections, encouraging self-expression, and lessening anxiety and irritability; taking a flexible and supportive administrative approach. The RPD will utilize all aspects of the unit, whether it be using the library for devotions and newspaper readings in the mornings, the sunroom for aromatherapy, or the men's lounge for simulated activities. The RPD will also work closely with the community of Terre Haute by bringing in volunteers, finding specific outings for residents, and participating in the annual Alzheimer's walk; providing a suitable marketing tool for Reflections and Westminster Village as a community. All three of the administrative roles within Reflections will work closely with the Executive Director and Administrator.

In addition, Reflections will have a Food Service Director that will comply with Indiana State Food and Service laws. The FSD and dietary aides will be responsible for obtaining an Indiana Food Safety Handler Manager Training and taking an American National Standard Institute Conference for Food Protection. Westminster will cover in full financial payments for the 14 courses and ANSI exam associates will be expected to complete.

Although there is not a regulated staff to resident ratio within a memory care unit, a suggested ratio for facilities to follow is 1:6. Reflections will have at least one certified LPN, RN, or QMA working the floor at all times of operation; passing medications and providing

supervision. Per Indiana requirements, “410 IAC 16.2-3.1-14 Personnel, can Each nurse aide who is hired to work in a facility shall have successfully completed a nurse aide training program approved by the division or shall enroll in the first available approved training program scheduled to commence within sixty (60) days of the date of the nurse aide’s employment. The program may be established by the facility, an organization, or an institution.” (Indiana State Department of Health Health Care Quality and Regulatory Commission) Aside from certified nurse coverage, Reflections will also staff a CNA and RA, more than one of each will be allowed should census grow at a rapid pace; behaviors and levels of care are also a determining factor.

Organizational Chart:



Strategy & Implementation

Terre Haute has many SNF and AL facilities, however they lack the availability of memory care facilities. The marketing strategy for Reflections is going to be completed through a variety of channels, seeing as how it is within a well-known CCRC like Westminster Village. Networking, direct marketing, and established relationships will fulfil Westminster Village's Memory Care marketing strategy; zoning in on the effected population in need. Our target market will be elderly 65+ years of age that have been diagnosed with Alzheimer's Disease or dementia. The development of brochures and informational videos will be available throughout the public area. Current marketing associated of Westminster Village will distribute information; promoting Reflections and the memory care service that will be provided. Implementation of Reflections will begin once the Westminster Village board approves the layout design and strategy.

Income Statement

Year Ending December 31, 2020

Revenue

Residential Fees	\$1,080,000.00 (\$4,500 per resident/monthly)
Fundraising	\$10,000.00
Anticipated Grants	<u>\$65,000.00</u>

Total Revenues

\$1,155,000.00

Expenses

Labor Hours	\$215,000.00	
Utilities	\$15,000.00	
Food Services	\$35,000.00	
Benefits	\$15,000.00	
Insurance	\$12,000.00	
Training Expenses	\$1,500.00	
Taxes	\$10,000.00	
Miscellaneous	<u>\$1,000.00</u>	
<i>Total Expenses</i>		\$304,500.00
<i>Net Income</i>		\$850,500.00
	15% Profit of Revenue to Investor	\$127,575.00
<i>Final Income</i>		\$722,925.00

Conclusion

With the number of Americans living with Alzheimer's disease and dementia increasing at a rapid pace, the need for memory care communities has become a greater demand. Due to no current known cure for this dreadful disease, the number of individuals affected within the population will continue to rise within the coming years; increasing the current demand significantly. For Westminster Village, implementing a memory care unit would complete their CCRC; adding an additional service and providing a higher quality of care. Should Westminster Village choose to implement Reflections, the well-known CCRC may very well become the provider of choice for memory care within the Wabash Valley; providing specialized dementia care within an extraordinary building.

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