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| **Assisted Living Residences** | **Personal Care Homes** |
| **CONCEPT** |
| * A residence that offers a long-term care alternative to skilled care.
* Offers a philosophy of service that promotes independence, privacy, dignity, and choice.
* Focused on resident directed service and care.
* Provides for a minimum package of services and care.
* Arranges or provides for transportation.
* Requires disclosure to Services and Pricing prior to admission.
* Emphasis on “Aging in Place”
* Informed Consent process for a resident to exercise independence in their care.
* Only a licensed ALR can advertise and represent themselves as Assisted Living.
* Expanded Resident Rights
 | * A home for those “who do not require the services in or of a long-term care facility”
* Offers a philosophy of keeping residents “as safe” as possible.
* Focused on “regulatory & facility” directed service & care
* Provides for a “defined by PCH” package or service & care.
* No requirements to arrange or provide transportation.
* No regulatory requirement for disclosure of pricing prior to residency.
* Discharge to higher levels when necessary
* No regulatory process required to exercise independence in their care.
* PCH cannot use the term Assisted Living in any marketing materials or a fine will be issued.
* Basic Resident Rights required
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| **CONSTRUCTION** |
| * Provides a private living unit with private bathroom
* Requires a private bath.
* New Construction requires a private kitchenette.
* Requires individual heating & cooling units for the living unit.

 . * New construction requires 225 square feet for a living unit that enhances a “home like setting”.
* Requires a telephone jack in each living unit.
* Requires an emergency response system in the bathroom and the living unit.
* Requires each living unit has a lockable door.
* More space is required in the common area (15 square feet per living unit up to 50 living units) indicated as “Indoor Living & Activity Space”.
 | * A “resident bedroom” that can be shared by up to four residents.
* Requires a “flushable toilet and shower for up to six residents”.
* No requirement of individual heating & cooling units but requires a screened window.
* Requires each bedroom to have 80 square feet of floor space.
* Require “a phone available in the home”.
* No emergency response system required.
* No locks required
* Requires that the combined living room and lounge area can accommodate all residents at one time.
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| **CLINICAL** |
| * Requires higher clinical assessment with an RN review of

 assessments and support plans.* Requires an Initial Assessment & Preliminary Support Plan developed within 30 days prior to residency.
* Requires a Final Support Plan developed and implemented with 30 days after move-in.
* Requires a licensed nurse on site or available 24/7.
* Requires a registered dietician on staff or under contract.
* Provides for a higher level of clinical needs, including those needing skilled care.
* Provides supplemental health services.
* Provides a waiver of exclusionary factors for ALR.
* Requires higher training standard for direct care and management staff. 16 annually for direct care staff.
* CPR requirements are 1 staff trained per 35 residents.
* Four hours of Dementia Training required for all staff within 30 days of hire and two hours annually.
* A residence can care for skilled nursing care residents, if they so choose, with written approval for excludable conditions.
 | * No licensed nurse required at all with PCH regulations.
* Requires Pre-Screening and an initial assessment completed within 15 days after residency.
* No requirement
* No requirement
* No requirement
* Does not provide for those needing a higher level of care than can be provided.
* No requirement
* Requires a resident to move if needing a higher level of care.
* No change to requirements for PCH. Direct care staff annually training requirement is 12 hours.
* CPR requirements are 1 staff trained per 50 residents.
* No requirement in PCH on dementia specific training for all staff upon hire or annually.
* A physician determined PCH suitability or requirement of a higher level of care.
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