

## State News

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### Assisted Living Rulemaking Hearing Postponed Until March 17, 2004

A rulemaking hearing on the proposed regulations concerning assisted living facilities originally scheduled for January 21, 2004 has been postponed until March 17, 2004. The postponement was at the request of the Health Facilities and Emergency Medical Services Division to address comments provided by the Attorney General's Office. The comments direct the Division to amend various regulatory provisions to ensure further clarity regarding what is required for compliance.

In order for the Division to make such changes and give stakeholders sufficient opportunity for review and comment, the Division sought postponement until the March Board of Health meeting.

### Rocky Mountain PBS Airs Denver's Town Hall Meeting on Caregiving

Supported by CAHSA and AAHSA, "And Thou Shalt Honor: A Town Hall Meeting on Caregiving" aired on January 20 on Rocky Mountain PBS (KRMA-TV, Denver). The program, taped at AAHSA's annual meeting in October, offered a revealing look into the economic, emotional, spiritual and political aspects of caregiving for older persons in America. It featured experts in aging, bioethics, healthcare policy and caregiving, including CAHSA/AAHSA members Total Longterm Care, Christian Living Campus-University Hills, Seniors' Resource Center, and Residences of Franklin Park. CAHSA is working to secure copies of this presentation, and we will keep you posted when it becomes available.

### Study Says Too Few Adult Day Services Centers in Colorado

A new report, released by Partners in Caregiving, shows that there is a serious lack of services available for the elderly population. The National Study of Adult Day Services reveals that there are 60 percent fewer adult day centers than are needed to meet the demands of the growing elderly population. Experts warn that the lack of services and rising elderly population will force baby boomers to make difficult decisions regarding the care of elderly friends and relatives. As one solution, experts recommend the development of new adult day centers.

Adult day centers are community-based group programs designed to meet the needs of functionally and/or cognitively impaired adults. They are structured, affordable and comprehensive programs that provide a variety of social and related support services including health care, but are not 24-hour care.

*continued on Page 10*

CAHSA is the  
Colorado affiliate of



American Association  
of Homes and Services  
for the Aging



Assisted Living Federation  
of America

## Register Now For CAHSA's Annual Legislative Luncheon

You are cordially invited to CAHSA's Legislative Luncheon  
at 12:00 PM - 1:30 PM on Thursday, March 4, 2004  
at Maggiano's Little Italy Restaurant, 500 Sixteenth Street  
Denver Pavillions Mall, Denver



*Use this time to speak with Colorado legislators  
and discuss current and future directions in  
care and services for Colorado's seniors.*

*Cost is \$50*

# Executive Update

January was a busy month at CAHSA! The first week of January, I attended the AAHSA Executive Forum meeting "back east." We heard a report on the upcoming AAHSA Technology Conference in March and about plans for a special reception with our members of Congress to showcase the latest in technology. We developed a strategic approach to our hill visits, reviewed preliminary drafts of issues papers for use during those hill visits, and got a very preliminary report on the impact of the Medicare Reform bill recently passed.

The next week I went to Fairfax, Virginia, to attend the ALFA Affiliate Executive Council meeting. This was our first "official" meeting with ALFA's new CEO, Rick Grimes. He shared with us his vision for the future. Members will hear more about his plans at the upcoming ALFA conference in early May in Chicago. He appears to be focused on strategic priorities and his leadership is welcomed!

Upon my return, the legislature was in full swing and our lobbyists were busy at work on your behalf. Issues of our *Capitol Focus* publication are underway to keep you on top of our efforts on your behalf at our state Capitol. This weekly reminder includes a summary of the bills we are tracking and our position on those bills. Speaking of bills, there's still time to join our Legislative Action Team. The primary responsibility of this group is to assist us in the review of bills and testify, if available. Testifying is optional, however, so don't let that keep you from volunteering for this important CAHSA activity!

In mid-January we launched a new publication exclusively for our nursing home members, *CAHSA Lifelines*. This publication will be emailed or faxed to our nursing home members twice a month and is designed to be a resource for assistance with surveys and other hot topics of relevance to this member group. An exclusive, members-only benefit, we have received positive response since releasing the inaugural issue. Long time CAHSA/AAHSA member Ann Brown is our reviewer and consultant for this publication. You may reach Ann through our office with any questions on the content of *CAHSA Lifelines*.

As I mentioned in last month's column and at the membership meeting in December, we sent a survey to our members late last year to help us understand your interest in our current workshop offerings. We want to be very strategic with your investment in membership and focus our educational efforts only on those topics with the highest perceived value. Historically, we offered many programs covering different topics you said you wanted. However, we don't always have high attendance at these programs, hence our inquiry. The Board will review the results of the survey this month and we should have a report for the membership in March. It continues to be our intent to offer quality education programming during the year in addition to our convention. It is our hope, however, that those we offer will have greater participation and provide a good return on your investment in education from CAHSA. Special thanks to all of you who participated in the survey.

Speaking of the annual convention, the brochure is in the mail and on the home page of our website. We have an outstanding program this year and I hope that you have marked the dates on your calendar to attend. Those dates are May 20-21 and once again we will be in Vail. In March we will announce the winner of the drawing for the lucky member who entered our contest for a free registration and hotel night in conjunction with the education survey. Good luck to all of you!

For more information on any of these updates please call me at the CAHSA office at 303/837-8834 or email me at [laura@cahsa.org](mailto:laura@cahsa.org).



Laura Landwirth  
Executive Director

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## CMS Acting Administrator Named

Dennis Smith will serve as interim head of the Centers for Medicare and Medicaid Services following the departure of Administrator Tom Scully. Health and Human Services Secretary Tommy Thompson announced December 17, 2003. Smith previously served as director of CMS' Center of Medicaid and State Operations. Leslie Norwalk will continue in her role as deputy administrator and chief operating officer at the agency, Thompson said. Norwalk is also in charge of implementing the Medicare legislation that President Bush signed into law.

## OSHA Emphasis on Nursing Homes Dropped

The Occupational Safety and Health Administration has decided to discontinue their national emphasis program targeting senior housing (nursing homes, assisted living and other institutional settings). If an institution has a case rate of 9 or higher utilizing a formula including days away from work for injury and illness, or if their lost work day and illness rate exceeds 14 they may still be selected for inspection. This relates to about 400 nursing facilities being selected for inspections in 2004, as opposed to 884 in 2003.

## New Method for Detecting Alzheimer's

Researchers studying Down syndrome patients believe they have found a way to detect Alzheimer's disease before symptoms of dementia appear. Brain scans of adults with Down syndrome showed increased metabolic activity in the temporal cortex, the same region of the brain where Alzheimer's disease commonly develops. The researchers at the University of California at Irvine School of Medicine speculate that Alzheimer's may begin with a similar metabolic increase, because Down syndrome often leads to dementia during adulthood. If so, early detection of Alzheimer's could be accomplished through positron imaging tomography (PET), a brain scan that employs radioactively labeled glucose to show the brain at work. Their findings appear in the December 23 issue of *Neurology*. For more information go to [www.neurology.org/cgi/content/abstract/61/12/1673](http://www.neurology.org/cgi/content/abstract/61/12/1673).

... In other Alzheimer's research, a study of young adults who have a gene mutation link to Alzheimer's suggests the brain-destroying disease starts decades before symptoms appear, indicating that some day it might be possible to begin prevention therapies at an early age, according to an Associated Press article in *USA Today*. A team, led by researchers at the Banner Good Samaritan Medical Center in Phoenix, scanned the brains of 12 young patients who have a mutation of the POE gene associated with a high risk of Alzheimer's disease. They found that the young patients shared some of the same metabolic changes seen in patients with advanced and mild cases of the disease. They found that the gene carriers had an abnormally low level of brain glucose metabolism when compared to the non-carriers. The low level of metabolism occurred in the same sections of the brain that other studies have shown are most dramatically affected in Alzheimer's patients. Earlier studies have found low levels of glucose metabolism in the brains of patients with mild and severe Alzheimer's.

## People & Places

Congratulations to **Senior Housing Options**, one of 33 non-profits honored at the 15<sup>th</sup> El Pomar Awards for Excellence Presentation Banquet in December.

OPEN! **Total Longterm Care** opened its new **Cody Center**, a day/health center on Alameda in Lakewood. The center is expected to serve 200 participants per day. Congratulations!

Great work and congratulations to **The Argyle**, for being the Long Term Care Team Cup winner for medium-sized facilities at the Alzheimer's Association 2003 Memory Walk in Colorado.

Kudos to these 2003 RHP (Retirement Housing Professional) Graduates: **Linda Cook** (Liberty Heights), **Bill Gohl** (Liberty Heights at Northgate), **Carolyn Mickey** (Eben Ezer Lutheran Care Center), and **John Torres** (Golden West Senior Residence).

Congratulations to **Christian Living Campus** for the January 10 article in the *Rocky Mountain News* on their 110-year-old resident **Mamie Legg**, and to **It's Never 2 Late**, whose senior-friendly computer equipment was featured along with **Jack York's** son, **Nathan**.

Saying five years is about the correct length of time for a senior executive to serve and lead, the President and CEO of the American Health Care Association (AHCA), **Charles H. Roadman II**, MD, CNA, announced on January 13 that he will not extend his tenure at AHCA beyond October 2004, and expressed gratitude to the Association for providing him the opportunity to serve the long term care profession.

# Best Practices

## Kentucky Circle Village Ann Lane, Administrator

In 1959, three churches – First Plymouth Congregational United Church of Christ, Green Mountain Presbyterian Church, and the American Baptist Churches of the Rocky Mountains – came together to develop Kentucky Circle Village, a non-profit foundation providing affordable housing for independent seniors 55+.

Kentucky Circle Village is overseen by a board of directors made up of members from the three founding churches. Currently, the non-profit independent living community has around 156 residents living throughout 31 one-, two-, and three-story apartment buildings. In 1998, due to an extensive waiting list, the board of directors undertook the task of adding four new buildings with 47 additional units for a total of 173 apartments available to residents today.

Kentucky Circle Village employs six full-time and two part-time staff, including administrator Ann Lane. Lane has been with Kentucky Circle Village since 1987 and prior to that, served four years on the board of directors.



**Ann Lane**

Kentucky Circle Village works with AARP as a designated site for the AARP BenefitsCheckUp program – a simple, confidential way for seniors to discover which public benefits they may be eligible for and how to access them. The Web-based program is a service of the National Council of Aging and uses a short questionnaire to determine which programs seniors may be eligible for. On the second Thursday of each month, an AARP representative visits Kentucky Circle Village to assist residents and help ensure that they are applying for everything they may be entitled to.

The Kentucky Circle Village board of directors signed the AAHSA Quality First Initiative last summer and established certain priorities for the organization. According to Lane, the main goal is “to let the community know that we are here and to try and touch not only the people that live here, but also the neighboring communities.”

Over the years, Kentucky Circle Village residents have been generous contributors and supporters for a number of outreach projects in the community, donating to local clothing drives, emergency food banks and the Battered Women’s Shelter. They have worked with a local preschool and participated in Red Cross projects as well. Most recently, residents and staff contributed to a fund to benefit neighbors who were victims of the tragic fire at the Spanish Gate apartment building.

All activities at Kentucky Circle Village are resident-driven with the Residents’ Council planning weekly bingo and pinochle games, craft shows, monthly birthday parties, pancake suppers, potlucks, family talent nights, ice cream socials and more.

Kentucky Circle Village has been a long-term member of CAHSA. Lane said the networking opportunities have been invaluable to her and to Kentucky Circle. “When residents can no longer be independent and families come to me, I feel comfortable making referrals through the contacts I have with CAHSA because of the quality of the organization and its membership. It [CAHSA] has always been very important because we have a small staff, too. When you have a small organization, you really have to look for outside people to talk with, bounce ideas off and get assistance, and I’ve certainly found that.”

In the future, Kentucky Circle Village plans to continue developing the grounds. They are in the development stages of adding concrete patios to create more spaces for resident socialization. In addition, the organization is working closely with two local churches to develop a caregiver program that would eventually evolve into a community outreach program for seniors.

Kentucky Circle Village is an excellent example of a senior community that maintains strong ties within the community where it lives. Thanks for being a great inspiration!

## Another View

### “Does your organization have an employee policy regarding cell phone usage during business hours?”

“Yes it does. The policy states that employees can’t use cell phones. They can use them on their breaks, but not while they’re working.”

**Jo Tansey**  
Executive Director  
Spring Ridge Park

“We do. We have kind of an in-house policy that employees not have their cell phones on during business hours; only during breaks and lunch time and not on the floor.”

**Carla Pradia**  
Administrator  
Barth Hotel

“We do not. We do not allow personal phone calls. What we’ve decided to do is to use it as a performance issue and not a policy issue. So, it’s recommended that people, care providers specifically, keep their cell phones either in their lockers or in their cars.”

**Mary Hillsman**  
Executive Director  
Cantril House

## A Business Partner

**Natalie Bass, Principal**

**Bass & Bradshaw, Inc**

**How long have you been a member of CAHSA?**

Since Fall, 2003.

**Why did you become a member?**

Bass & Bradshaw has a great deal of experience in senior living marketing and advertising and would like to expand our Colorado client base. Joining CAHSA also provides a valuable opportunity to network with other individuals who work with seniors.

**What would you like members to know about your service/product?**

Since 1985, Bass & Bradshaw has specialized in healthcare communications and has worked with more than 150 healthcare organizations nationally. Senior living clients include independent living, assisted living and continuing care retirement communities. Our projects include start-up communities, as well as established communities interested in attracting new residents. We created marketing materials for these communities that effectively target both consumers and referral sources. Recently, we assisted clients in developing logos, collateral materials, direct mail, and print advertising. Bass & Bradshaw structures our working relationships with a great deal of flexibility and works on a project (versus a retainer) basis.

**What do you think is the biggest challenge for providers in relationship to your service/product?**

In our experience, senior living providers do not always budget sufficiently for marketing and advertising services. With competition increasing daily, providers need to stand out from the crowd to attract new residents. Every senior living community has benefits and services that are unique. Once these are identified, compelling, consistent messages can be developed and promoted to various target markets, including consumers and referral sources. A common mistake we have seen over the years is the development of a single brochure, direct mail piece or print ad that attempts to reach multiple target markets with one message. In our experience, different audiences are motivated by different messages. Marketing is most effective when separate materials are created for different audiences.

**Who's your hero?**

I do not have a single individual whom I would consider a hero (or heroine). There are many people who have inspired me in my life by their kindness, good deeds, and faith in my abilities. They include my family members, friends and colleagues.

**What do you do on your time off?**

I love to travel and spend a lot of time in Frisco, Colorado where I have a small condo in the mountains.



BASS & BRADSHAW  
HEALTH CARE COMMUNICATIONS

# Get out there!

## Tips for Gaining Exposure

### Taking Small Steps of Action to Make Your Political Voice Heard

*"Never doubt that a small group of thoughtful committed citizens can change the world. Indeed, it's the only thing that ever has."* – Margaret Mead

Today's mass media is a powerful conduit and provides a wealth of opportunities to publicly express a wide range of political commentary—including yours! Political views gain exposure in print, news programming, online and through dial-in democracy talk shows. However, too few citizens take advantage of the opportunities to tap media resources and ensure that their political voices are heard. Now that the legislature is back in session, take action of your own. Here are relatively easy ways to get started voicing your opinions:

- **"Letters to the Editor"** – This is one of the most well-read sections of the newspaper. Elected officials and members of their staff often read the letters section and it is an easy way to reach and educate local policy makers. Before submitting a letter, know the paper's policy regarding length restrictions, format and delivery preference. Make sure your letter is timely in responding to recent articles, editorials or opinions. Keep it local, use statistics and reference credible sources. Tell personal stories about people you know. Mention congressmen by name and write your letter on professional letterhead. Use your title and cite your expertise in the body of your letter. If your letter is published, clip it and send it along with a personal note to your member of Congress and to CAHSA so we can put it on the

website.

- **Meet with elected officials** – Begin to develop a personal relationship and try to get to know members of Congress. Before talking with your legislator, do your homework. Keep track of their voting records and policy positions. Establish regular, ongoing contact and try to sit down with legislators a few times a year. Request commitment and hold elected officials accountable when they don't vote your way; publicly ask them why. Be sure to thank them when they do vote your way.
- **Communicate with elected officials** – Look up your senators' and representatives' information online and get familiar with those working in your district. Get their phone, fax and email information. Know committee and subcommittee assignments. Writing letters, sending emails, making phone calls and arranging personal meetings are excellent ways to communicate with elected officials and make your voice heard.
- **Call radio talk shows** – When taking to the airwaves, get to know the show's subject matter, host, style, format and political leaning. Select a topic and practice what you are going to say before you make your call. Determine one or two key points to address.

Throughout the legislative session, as usual, CAHSA will keep you posted on legislation and regulations that impact us and the seniors we serve. If we ask for your help, please jump in and support us via one of the methods discussed above or by signing a petition, testifying at the legislature, or attending public hearings.

Remember, making your voice heard doesn't take a lot, but it does require action. Take the first step to locate your political voice and influence the actions of government. Talk is infectious and the greater use we all make of media for democratic purposes, the greater spark for activism among all citizens.

## Quality First Reaches Milestones

AAHSA's Quality First Initiative has reached two milestones: the first is that, nationally, 2000 members have now signed the Covenant - almost forty percent of AAHSA's membership. In Colorado, seventy-eight percent of CAHSA's non-profit members have signed the Covenant. Congratulations to all who have made this commitment to a journey that will help all of us publicly reflect the good work we do and increase the public's confidence in us.

The second milestone is that an agreement has been reached with the National Quality Forum to manage the work of the Quality First National Commission. The National Quality Forum is a private, non-profit membership organization created to develop and implement a national strategy for healthcare quality measurement and reporting. The mission of the NQF is to improve American healthcare through endorsement of consensus-based national standards for measurement and public reporting of performance. The NQF is committed to providing meaningful information about whether care and services are safe, timely, beneficial, client-centered, equitable, and efficient.

## Housing News

### HUD Proposes Language Translation Requirements

On December 19, 2003, HUD published in the *Federal Register* the *Notice of Guidance to Federal Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons*. In this proposed policy guidance, HUD directs housing facilities to "take reasonable steps to provide meaningful access to their programs and activities by limited English proficient (LEP) persons." HUD states that the notice "clarifies existing legal requirements for LEP persons by providing a description of the factors recipients should consider in fulfilling their responsibilities to LEP persons."

While HUD is calling this policy a "guidance," the New York Association of Homes and Services for the Aging (NYAHS) is concerned that this notice as written could be used to determine the effectiveness of facility compliance with this newly defined civil rights issue in the event of a complaint, fair housing compliance review, or possibly even as part of the regular management review. In addition, this policy could provide legal requirements for some HUD facilities to have available extensive, and expensive, written translated documents and oral interpretation services in many languages for their residents and applicants. This policy could require some facilities to spend thousands of dollars for translating "vital" documents and interpretation services.

"Vital" facility documents would be required to be translated for the appropriate LEP persons under this notice. A document will be considered vital if it contains information that is critical for obtaining federal services and/or benefits, or is required by law. Some of the required written documents that could be expected to be translated, in potentially several languages (depending on the facility location and population mix), would include the facility application, lease, lease attachments, resident notice of recertification, the fair housing notice, facility rules and regulations, facility policies, facility marketing materials, the reasonable accommodations policy, portions of the tenant selection plan, portions of the fair housing plan, disclosure notices, notice of free interpretation services, and any termination/eviction notices and policies. In addition, these documents would need to be verbally translated to those who do not read in their native language. These documents would also need to be verbally interpreted to LEP applicants and residents where the written documents are not available at the facility in their native language.

To access the notice in PDF format, go to [http://www.hudclips.org/sub\\_nonhud/cgii/pdf/31267.pdf](http://www.hudclips.org/sub_nonhud/cgii/pdf/31267.pdf); to access the notice on the HUD Webclips site, go to [http://www.hudclips.org/sub\\_nonhud/cgii/nph-brs.cgi?d=REF1&s1=@di%3E=20031216&l=200&SECT1=NAVOFFHL&SECT5=NA00&p=1&u=http://www.hudclips.org/cgii/index.cgi&r=19&f=G](http://www.hudclips.org/sub_nonhud/cgii/nph-brs.cgi?d=REF1&s1=@di%3E=20031216&l=200&SECT1=NAVOFFHL&SECT5=NA00&p=1&u=http://www.hudclips.org/cgii/index.cgi&r=19&f=G).

Reprinted with permission from the *Senior Communities Update*, published by the New York Association of Homes and Services for the Aging, (Volume 3, Issue 1, January 2004).

### AAHSA's Future of Aging Services Conference – March 15-17

AAHSA's spring conference will include dozens of forums and workshops on state-of-the-art high quality care. Join more than 1,000 aging services professionals for this three-day conference – featuring 40-plus sessions, two general sessions, special events and demos, plus networking activities. Of special interest will be live demonstrations by the Center of Aging Services Technologies (CAST) of emerging technologies to conference participants and members of Congress. The demos will feature prototype technologies not yet on the market that will have a dramatic impact on the field of aging services. Go to <http://future04.expexchange.com/> for more information.

### HUD's New Rural Gateway

A new HUD-funded and nonprofit-created technical assistance program, the Rural Housing and Economic Development Gateway, will help develop the capacity of rural nonprofits, local governments and for-profits to address their communities' needs for housing, infrastructure and economic development. The Gateway has bilingual staff now available at 1-877-RURAL-26 (1-877-787-2526) or [gateway@ruralhome.org](mailto:gateway@ruralhome.org) to meet groups' technical assistance needs. Information and publications are also available at the new Gateway website, <http://www.ruralhome.org/gateway>.

### Funds Available From RHS To Develop Rural Home Health Demos

More than \$1 million is available from the Rural Housing Service (RHS) for the Rural Community Development Initiative (RCDI) Home-Based Health Care Demonstration Program, according to a recent notice of funding availability in the *Federal Register*.

Eligible participants include nonprofits and public agencies. The grants are for pre-development and revolving loans to establish rural home health cooperatives.

Intermediaries that receive revolving loans are expected to provide matching funds in a 50-50 split. Deadline for applications is February 13. For more information, contact Stephen Wetherbee, senior loan specialist, Community Programs, RHS, United States Department of Agriculture, 202/720-1503.

### Summer RHP Classes Announced – June 7-12

Summer classes have been announced for the Retirement Housing Professional Program. A national certification for retirement housing professionals, the program is designed to educate and train service professionals involved in the management of assisted living facilities, continuing care retirement communities, senior housing, and other types of aging services. The program was established by AAHSA in 1986 and promotes excellence in management, administration, and services. The summer dates are:

June 7-8 Core Course I: Administering the Retirement Housing Community  
June 9-10 Core Course II: Management and the Aging Resident  
June 11-12 Core Course III: Managing the Financial and Physical Environment

All of the courses will be held in Dallas, Texas. For more information or an application for the summer or internet courses, please visit [www.unt.edu/aging/rhp.htm](http://www.unt.edu/aging/rhp.htm).

## ALFA Survey: 13 States Wrestling With Regulatory Reform

Regulatory reform efforts are expected to move forward in at least 13 states this year, according to a recent informal poll of ALFA state affiliates nationwide. Recent conversations between ALFA government relations staff and affiliates' executive directors have revealed regulatory reform as a top public policy issue for assisted living in Idaho, Iowa, Louisiana, Maryland, Michigan, Missouri, Montana, New Hampshire, Oregon, Pennsylvania, Virginia, Washington, and Wisconsin.

Maryland is one state that could see major changes. The state survey agency is considering revision of certain sections of assisted living regulations, including proposed changes concerning executive directors. Although the state initially wanted to license these individuals, the state staff might be willing to accept a certification program if it would allow for measures such as imposition of penalties and withdrawal of certification for various citations. Should agreement be reached, the proposal might be submitted as part of a legislative package including other provisions. One provision that the ALFA state affiliate intends to oppose would allow multiple residences having a single owner and larger than 17 beds but smaller than 50 beds to be considered as a single entity for imposition of sanctions, such as mandatory staffing patterns. Another proposal the association will oppose would allow the state to impose penalties on individuals, including corporate investors, for residence noncompliance.

Other ALFA state affiliates are also grappling with regulatory reform. The Washington affiliate wants to introduce legislation in 2004 that would adjust current regulations, including areas such as supervision and oversight, medication management, and the definition of basic services. ALFA's Idaho affiliate is preparing legislation that essentially rewrites the existing statute. One provision, for example, seeks to move regulatory control of assisted living from the Department of Health to the Bureau of Occupational Licensing. And for the past five years, the survey agency under the New Hampshire Department of Health and Human Services has been working on new assisted living regulations. The department's proposed 80-page document has received much criticism, particularly from the industry. The ALFA state affiliate organized an internal work group of about 20 providers to devise a regulatory package of its own. The work group produced a 45-page proposal in a couple of months, and the department is considering adoption of the package.

The next biggest priority for ALFA affiliates in 2004 will be seeking increased – or at least level – Medicaid funding for assisted living. While state budgetary troubles remain nearly universal, ALFA affiliates cite efforts to shore up Medicaid funding in 12 states: Alabama, Arizona, Florida, Indiana, Massachusetts, Missouri, New Hampshire, New Jersey, New York, Ohio, Rhode Island, and Washington.

In perhaps the boldest effort of its kind nationwide, ALFA's New York affiliate banded with assisted living residents to file a lawsuit against the state over the alleged inadequacy of the Medicaid base rate and failure of the state to provide Medicaid services for residents of adult homes. The suit charges that the state's denial of Medicaid-funded personal care services to eligible adult home residents, combined with an inadequate Supplemental Security Income (SSI) rate, has created a statewide crisis for people who rely on government assistance to help pay for their housing and care. Seventy-four adult homes have closed in the past four years, resulting in a loss of 3,566 beds for elderly and disabled seniors. The state's refusal to approve critical Medicaid services to adult home residents is both contrary to state law and illegal discrimination, according to the lawsuit, which seeks Medicaid-funded personal care services for adult care residents and an increase in the state portion of the SSI payment.

"It is our mission to ensure access to assisted living for all New Yorkers who need it, including those who need government assistance to help them pay," says Lisa Newcomb, executive director of the Empire State Association of Adult Homes and Assisted Living Facilities, an ALFA affiliate. "This lawsuit is about access to assisted living for our state's senior and disabled population."

Promising efforts are also underway in other states. For example, Medicaid assisted living payment rates have been historically low in Arizona, due in part to the fact that they originally were based on the foster care reimbursement rate set eight years ago and increased only 10 percent since then. To bring more money into the program, the industry must justify its costs, so ALFA's Arizona affiliate is working with the state on the design of a cost report, which is expected to be finalized within the coming year.

In Florida, the ALFA affiliate is urging the state to increase funding for the assisted living waiver and state plan amendment programs. The additional money could come from Florida's share of the recent federal Medicaid bailout. Medicaid funding efforts in other states aim to get results through approaches involving building coalitions, supporting research to validate Medicaid programs, exploring prospects for additional funding, and lobbying state leaders to reallocate funds budgeted for Medicaid and other programs.

The ALFA poll shows that other public policy issues are also being taken up in smaller numbers of states: the regulatory process, including survey agency and process, is being addressed in eight states; tort reform in seven states; liability insurance in six states; medication aides in five states; executive director requirements in five states; dementia care funding and regulations in four states; fire safety in four states; and levels of care in three states. ALFA routinely collects such information to identify industry trends, compare data across states, and share promising approaches.

## CMS Releases Preview of New QMs to Nursing Homes

On January 12, the Centers for Medicare & Medicaid Services released a preview of the new, expanded set of nursing home quality indicators. Each facility's data should be available in their mailbox on the QIES system. The new QMs were endorsed by the National Quality Forum in 2003, and they will replace the QMs originally released in late 2002.

The instructions for access to the CMS website are the same as those used for earlier previews – currently, they are available at <http://www.cms.hhs.gov/quality/nhqil>. Members should look under the heading "Data Preview Reference Materials," which is about halfway down the NHQI home page. The new QMs for all certified facilities were posted on "Nursing Home Compare" website by the end of January (at: [www.medicare.gov](http://www.medicare.gov)).

The Quality Improvement Organization in each state (in Colorado the Colorado Foundation for Medical Care) will distribute reference materials to providers explaining the new QMs shortly. The QIO is also the designated point of contact for providers who have questions or concerns about the preview data, including problems with accessing the information.

## CMS Announces Rate Hikes for Docs

The Centers for Medicare and Medicaid Services has issued a final rule that will increase payments to doctors and other health care professionals for services under the Medicare Physician Fee Schedule. The increases – mandated by the Medicare reform bill recently signed into law by President Bush – replace rates published in November that would have reduced physician payments by an average of about 4.5 percent. The increase will average about 1.5 percent for calendar year 2004, though physicians in some rural areas will see an additional increase in payments by as much as 4.8 percent as a result of the new law's provision requiring CMS to revise payments to recognize area cost differences. The final rule, with comment period, was published in the January 6 *Federal Register* and was effective January 1, 2004. Comments will be accepted until March 8. CMS will review and respond to public comments through additional rulemaking later in 2004.

## New CMS Memo on Promissory Notes, Deposit Fees, and Surety Bonds

CMS issued a survey and certification letter on January 8, clarifying whether nursing facilities requiring promissory notes or deposit fees as a condition of admission violate resident protection regulations, and the implications of deposit fees on surety bonds.

The letter notes that regulations at 42 CFR Part 483 and 42 CFR Part 489 preclude a facility from requiring an admission deposit or promissory note for Medicare and Medicaid beneficiaries. The letter clarified, however, that these regulations do not prohibit facilities from imposing these charges for non-beneficiaries.

The letter also reminds facilities that they must have a security bond that covers the amount of any refundable deposit fees or other resident funds entrusted to or managed by the facility. A facility is permitted to charge residents while Medicaid eligibility is pending. However, the Medicaid rate must be accepted as payment in full for all dates the resident was both Medicaid-eligible and a resident of the facility.

## Nurses, Negligence, and Malpractice

An analysis of 250 cases against nurses, conducted by Eileen Croke, EdD, ANP, and reported in the Sept. 2003 *American Journal of Nursing*, found that 8 percent of all malpractice cases are brought against nurses practicing in nursing homes. Overall the six major categories of negligence that resulted in malpractice lawsuits included:

1. Failure to follow standards of practice;
2. Failure to use equipment in a responsible manner;
3. Failure to communicate;
4. Failure to document;
5. Failure to assess and monitor; and
6. Failure to act as a patient advocate.

To reduce potential liability nurses are encouraged to:

- Maintain open, honest and respectful communication with patients and families;
- Maintain competence in your specialty area;
- Know legal principles and incorporate them into everyday practice;
- Practice within the bounds of professional licensure; and
- Know your strengths and weaknesses.

## FDA Public Health Notification: Safety Tips Available for Preventing Hospital Bed Fires

In late December, the Food and Drug Administration reported that they had received 95 reports of fires involving electrically-powered hospital beds since 1993. To help prevent incidents of this kind, they have developed a list of safety tips. They apply to both electrically-powered and manual healthcare beds, and to adjustable medical beds. They may be particularly useful for older model beds. The list is intended for the clinical staff and the other for staff responsible for bed maintenance. For more information, please visit [www.fda.gov/cdrh/safety/bedfires.html](http://www.fda.gov/cdrh/safety/bedfires.html).

## Workplace Environment is Key to Front-Line Workers' Job Satisfaction, Study Says

*What Workers Want: Lessons from California*, a recently released report from the California Association of Homes and Services for the Aging in partnership with AAHSA's Institute for the Future of Aging Services (IFAS) found that the workplace environment is at least as important as money – if not more so – in determining the job satisfaction of more experienced workers. It also concludes that "dissatisfaction with nursing leadership and the work environment may affect recruitment and retention more than any long term care administrators realize." The report includes seven characteristics of a successful workplace:

1. Clearly articulated expectations;
2. Timely feedback;
3. Open door management;
4. Two-way accountability between nurses and CNAs;
5. Mentoring and Role Modeling Management Styles;
6. Career advancement opportunities; and
7. Strong leadership skills for directors of nursing.

The report also emphasizes the effect of a "culture change" on successful workplaces. For a copy of the entire article from IFAS's *FUTUREAge* newsletter, September 2003, visit AAHSA's website or contact [Melanie@cahsa.org](mailto:Melanie@cahsa.org).

## Conference Speakers Share Solutions for Success in Assisted Living

The speakers at the ALFA 2004 National Conference & EXPO represent the single most impressive collection of expertise and experience in assisted living anywhere. CEOs and other top executives, researchers and scholarly experts, consultants and service providers are gathering at the Hyatt Regency Chicago on May 5-7 to distill the best in industry leadership.

You are invited to participate as they share practical, workable solutions to the problems you face daily. How can you navigate the shifting landscape of opportunities in the industry? How can you continue to provide high-quality care while maintaining a sound bottom line for your business? How can you develop the leadership skills necessary to move your company and your career ahead? Attendees will find answers to these questions and solutions for success.

The world of assisted living is entering a period of unprecedented expansion, change, and opportunity. With experts forecasting widespread economic growth in the next few years and record numbers of seniors seeking care over the coming decades, our industry has never embraced more tremendous possibilities – or faced more important challenges.

Take home answers to your most pressing questions and solutions for immediate improvement. Complete conference information is now available at ALFA Online ([www.alfa.org](http://www.alfa.org)). Register today!

## Salute Assisted Living's Heroes

Do you know a hero? Each year, ALFA Hero Awards recognize the administrator, staff member, caregiver, and volunteer who personify the spirit of ALFA's 10-point philosophy of care. We invite you to nominate your colleagues for this prestigious honor – the seventh annual ALFA Hero Awards.

The immeasurable impact that our award winners have on the lives of our assisted living, independent living, and continuing care retirement community residents is evident to all who meet them. The ALFA Human Resources Executive Council is honored to select the outstanding winners of the ALFA Hero Awards, who are recognized annually at the ALFA National Conference & EXPO, the assisted living industry's most highly-attended event.

For more information on ALFA, the ALFA 2004 Hero Awards nomination form, the 2004 National Conference & EXPO, and ALFA's 10-point philosophy of care, visit [www.alfa.org](http://www.alfa.org) or call 800/258-7030.

# Assisted Living News (cont.)

## GAO Studying Best Practices in Assisted Living

The U.S. Senate Special Committee on Aging has asked Congress's General Accounting Office (GAO) to conduct a wide-ranging study of state efforts in assisted living. Three members of the committee – Senators Craig (R-ID), Breaux (D-LA), and Wyden (D-OR) – have jointly issued a letter requesting that the GAO “identify states that have developed ‘model’ consumer protection requirements to address key concerns regarding assisted living arrangements.”

The GAO, the evaluative and investigative arm of Congress, was asked to focus the review on states' best practices in terms of licensing assistance services to providers, disclosure of full and accurate consumer information, and procedures for addressing consumer complaints and grievances. The letter also stated that “the development of regulations at the state level can help protect the rights of people looking to move to, or already residing in, an assisted living facility.” The study is expected to be completed in late spring.

“The committee's request appears to be positively focused, given its emphasis on ‘models’ and ‘best practices,’” says ALFA Senior Vice President Janet Forlini, director of government relations. “And, generally speaking, the request is highly reflective of ALFA's position that it is important to keep regulation of assisted living in the hands of the states.” Committee members appear to want to build upon recommendations of the Assisted Living Workgroup presented to the committee in April 2003.

“Assisted living is still a fairly new industry and continues to grow and be a popular option for individuals needing assistance with long-term care,” observes Forlini, former staff member of the Special Committee on Aging and senior aide to Sen. Breaux. “Given that the Senate Aging Committee works to promote quality of life for all American seniors and protect those who are vulnerable and frail, the committee members feel strongly about continuing to gather information in this area.” ALFA government relations staff will be working with the committee staff as they move forward on this effort and will keep members apprised as more information becomes available.

## 2003 Closes With Major Transactions

CNL Retirement Properties, a real estate investment trust headquartered in Orlando, Florida, announced it has acquired 22 senior housing facilities from EdenCare Senior Living Services, LP for about \$172 million. Sunrise Senior Living, Inc. will manage the 22 properties under long-term management agreements, and Harbor Retirement Associates, LLC will serve as the tenant. Separately, CNL has acquired three senior housing residences from EdenCare for \$27 million. Harbor Retirement Associates, LLC will lease and operate the three properties under long-term agreements.

Additionally, CNL has acquired Dogwood Forest of Dunwoody from 7400 Peachtree Dunwoody Road, LLC. Sunrise will manage the property under a long-term management agreement, and Solomon Holdings II – Dogwood Forest, LLC will serve as the tenant.

Newton, Massachusetts-based Senior Housing Properties Trust announced that it has closed an \$86.6 million purchase and lease transaction with NewSeasons Assisted Living Communities, Inc. SNH purchased 10 communities with resident capacity of 1,019. Simultaneously, NewSeasons leased these communities from SNH for an initial term ending in 2017, plus tenant renewal option terms thereafter for a total of 30 years. The rent payable to SNH will average roughly \$9.3 million a year during the initial lease term, although it will commence at a lower rate of about \$8 million a year and then increase at agreed times during the lease term.

Assisted Living Concepts, Inc. of Dallas, Texas, announced the refinancing of its Junior and Senior Notes and the secured loan provided by GE Capital, which represent a total principal amount of about \$88 million in debt. The Junior Notes were due to mature January 2012 and would have converted to cash pay interest of 12 percent in 2005. The Senior Notes were due to mature January 2009 and accrued interest at 10 percent. The GE Capital loan had a maturity of December 2004, and a minimum interest rate of 8 percent. These facilities are being replaced by a loan from Red Capital, as lender for Fannie Mae, in the amount of \$38.4 million and a new loan from GE Capital in the amount of \$50 million.

## Sixth Annual National Awards Contest for Adult Day Centers

The Information Source for Adult Day Centers is proud to sponsor the Sixth Annual National Awards Competition for Adult Day Centers. Prizes include cash and newsletter subscriptions. The 2004 competition is open for applications until March 1, 2004. Winning entries will be featured in the June 2004 issue of the *Information Source for Adult Day Centers*. Categories include: (1) therapeutic activity award; (2) marketing/promotion award; (3) operations best practices award; and (4) therapeutic activities for targeted populations. The criteria for each category are specified on the application. For more information, visit [www.theinfosource4adc.com](http://www.theinfosource4adc.com).

## Adult Day Services in Colorado *continued from Page 1*

The study was funded by the Robert Wood Johnson Foundation in partnership with the Wake Forest University School of Medicine.

Among the findings for Colorado is that only 40 percent of the needs of seniors are being met with 58 new centers needed around the state. The underserved counties in Colorado include Adams, Arapahoe, Boulder, Chaffee, Denver, Douglas, El Paso, Fremont, Jefferson, La Plata, Larimer, Mesa, Montezuma, Montrose, Otero, Pueblo and Weld.

The study also found that sixty-one percent of the centers in the state are currently operating at a deficit. Forty percent of their revenue comes from public reimbursements, 38 percent from private pay, 14 percent are non-operating revenue, and 10 percent comes from other operating revenue. For more information on the study and state and county level data, go to [www.rwjf.org](http://www.rwjf.org).

## Research on Aging Design Completed, New Project Launched

*By Bill Brummett, President, William Brummett Architects*

Colorado-based William Brummett Architects has recently completed a two-year research project in conjunction with the University of Wisconsin's Institute on Aging and Environment, "*Design and Development Forecast for the Future of Housing and Care for the Aging*." The two-phase project, presented at the AAHSA Conference in Denver, included a general demographics/interviews analysis phase (see CAHSA Connecting, June 2003), and a case study phase, focusing on innovations in independent housing, assisted living, re-inventing skilled nursing, and hospice design. The results present not only some interesting findings and design inspiration, but, as is often the case, point to the need for further research. Some of the findings include:

- The industry is maturing and is serving its clients (not "patients") in better and more holistic ways.
- Specialization is growing exponentially, as we learn more about caring for different conditions.
- Specialization is even trickling down to independent senior housing, which is getting more sophisticated, providing more services, and being much more specifically designed.
- The era of building multi-family "senior" housing (with age restrictions) is gratefully fading.
- Aging-in-place continues to be a large driver of services and design. More facilities are being designed to accommodate aging-in-place, allowing seniors to stay in an apartment whether they need assisted or skilled care.
- CCRC Wellness Centers (the subject of an upcoming survey) are being better defined and designed.
- All levels of housing and care are beginning to take the statistics of dementia occurrence seriously, and including dementia-supporting design in many aspects of their facilities.
- Skilled nursing is also seeing significant revitalization, including the inclusion of such spaces as Snoezelen Rooms.

The next phase of research we are embarking on, beginning immediately, will span a wider spectrum of housing and care environments, and take the form of a carefully designed series of surveys. The intent of the surveys is to provide a state-of-the-industry snapshot as well as share best practices, interventions and innovations relating to supportive design.

William Brummett Architects will be contacting not only CCRCs and providers of skilled nursing, but other kinds of care providers too. All those facilities that participate in this 3-4 page survey, due out in March, will receive a free copy of the monograph containing the results to be published in June. This information will be extremely valuable to facilities, enabling them to learn from each other as well as understand how their environments compare with others. Monographs of the case studies and phase one work will be available this spring. The firm's goal is to continue expanding our knowledge and understanding of the best ways to create these environments.

*For more information on this study or upcoming survey, please contact Bill Brummett at [wba@brummettarchitects.com](mailto:wba@brummettarchitects.com).*

# Did You Know?

...Most people don't think of healthcare as a business and would prefer healthcare services to be provided by non-profits or government, according to a Harris Interactive Poll survey conducted for the *Wall Street Journal's* Online Health Industry Edition. Thirty-one percent of the U.S. public thinks that government should provide most health insurance, 25 percent say non-profit organizations should do so, and only 22 percent would prefer for-profit insurance. Forty-two percent thinks that universities should conduct most medical research, followed by 16 percent who think companies should do so. Many people say they are not sure who should provide or run pharmaceutical manufacturing (22 percent), in-home care (23 percent), health insurance (21 percent), nursing homes (22 percent), hospitals (19 percent) or medical research (16 percent).

...According to an article in the *Washington Post*, online search engine *Google* will stop accepting advertising from unlicensed pharmacies that sell narcotics and other prescription drugs online without proper medical supervision, following similar action recently by Yahoo! and Microsoft's MSN websites.

...According to the findings of a public opinion survey released by the American Hospital Association in January, affordable healthcare has emerged as a leading concern, surpassed only by concerns about the economy and jobs. Healthcare ranked on par with terrorism and national security concerns in the bipartisan poll conducted for AHA by Public Opinion Strategies and Greenberg Quinlan Rosner Research. Nearly seven in ten respondents say they would be willing to pay more in federal taxes to assure that every American citizen has healthcare coverage.

## Classifieds



Please visit the classifieds on our website - [www.cahsa.org](http://www.cahsa.org)

Elk Run Assisted Living in Evergreen seeks an **Administrator** for a 62-unit assisted living facility. Must be good team leader with strong marketing skills. Phone 303-679-8777 or fax resume to 303-679-8779, attn. Daniel Weingast.

The Wheat Ridge Assisted Living Community is looking for a **Certified A.L. Administrator** for their 47-bed facility, starting date approximately Feb. 15, 2004. Nursing background preferred. The position pays \$45k/year. For more information, call 303-506-0301.

**VP of Finance and Information Services:** As Colorado's exclusive PACE provider, Total Longterm Care, Inc. seeks an experienced financial officer to manage the organization's fiscal and IS functions. Responsibilities include, but are not limited to: P&L management; budgeting; forecasting; financial analysis; cash flow protection; management of general accounting (A/R, A/P); oversight of IS department; strategic planning; and management of staff in various areas. This role has a strong operational focus, but also is very hands-on and requires a detail-oriented position. Requirements: Bachelor's Degree in Accounting or Finance; CPA preferred 5+ years experience in private or public accounting, preferably in healthcare setting. Knowledge of government contracts a must. Strategic vision with analytical ability, good judgment, and high ethical standards. Contact: Clay Cooper, Employment Specialist, Total Longterm Care, Inc., 200 E. 9th Ave., Denver, CO 80203. Phone: 303-974-6755; Email: [cocooper@totallongtermcare.org](mailto:cocooper@totallongtermcare.org); Fax: 303-996-1615.

**Director of Marketing** - Put your experience and qualifications to work!! Aspen Retirement Corporation, an established company that provides service enriched living environments for senior residents, is currently seeking an experienced Marketing Director for Aspen Village at Lowry. Qualified candidates will possess experience developing and implementing marketing plans, department budgets, strong local contacts in the industry and a proven sales record. Desirable candidates will have a proven successful track record of setting and achieving uncommon goals and possess excellent organizational, time management, and self-directed skills. The community has exceeded all performance expectations and we are looking to take it to an even higher level. Aspen offers a competitive salary plus generous bonuses. We also offer excellent medical, dental, life, vision, and 401k benefits. EOE Please submit resume with salary requirements to Renee Flaherty, 150 Quebec St., Denver, CO, Email [Rflaherty@broe.com](mailto:Rflaherty@broe.com), or fax to 303-365-1570.

**Administrator/Nursing Home** - Eagle Ridge of Grand Valley (formerly Grand Junction Care Center) is seeking a licensed Nursing Home Administrator. Join a wonderful team under new management and ownership. Excellent benefits package. Salary commensurate with experience. Please send resume to Sugar Creek Healthcare Management, PO Box 9, Trenton, IL 62293. Applicants may also fax resumes to 309/403-0910 or send them by email to [jbridges@sugarcreekhealthcare.com](mailto:jbridges@sugarcreekhealthcare.com).

# Resources

**"Keeping Patients Safe: Transforming the Work Environment for Nurses,"** published by the Institute of Medicine of the National Academies (IOM), cites a correlation between nurse staffing and quality of care in health facilities. It examines staffing ratios, minimum staffing standards, mandatory overtime and other policy matters. Among the specific recommendations for long-term care are: update minimum staffing requirements for registered and licensed nurses; specify staffing levels that increase as the number of patients increase; and examine staffing levels for certified nurse assistants. The report can be accessed at [www.nap.edu/books/0309090679/html](http://www.nap.edu/books/0309090679/html).

**"The Hidden Epidemic: Finding a Cure for Unfilled Prescriptions and Missed Doses,"** cites the findings of research conducted by the Boston Consulting Group which found that almost one in three patients surveyed reported taking a medication less than prescribed during the previous year, about one in four reported delays in filling prescriptions and others reported taking medications in smaller doses than prescribed. Of the patients who reported not taking medications as prescribed, only 24 percent cited forgetfulness as the reason, with most of the other reasons cited suggesting an *active choice* not to comply with doctors' orders. For a copy of the compelling report, go to [www.bcg.com/publications/files/TheHiddenEpidemic\\_Rpt\\_HCDec03.pdf](http://www.bcg.com/publications/files/TheHiddenEpidemic_Rpt_HCDec03.pdf).

**HHS issued two national reports on quality and disparities in the use of health care services** in December 2003, the *National Healthcare Quality Report* and the *National Healthcare Disparities Report*, which provide baseline views of the quality of healthcare and differences in use of the services. Prepared by HHS' Agency for Healthcare Research and Quality (AHRQ), the reports present data on the quality of, and differences in the access to, services for seven clinical conditions, including cancer, diabetes, end-stage renal disease, heart disease, HIV and AIDS, mental health, and respiratory disease. The reports also include data on maternal and child health, nursing home and home health care, and patient safety. The measures included in the reports provide an important snapshot of the American healthcare system. The reports are available on a new website, <http://www.qualitytools.ahrq.gov>. Print copies of the reports also can be obtained by calling 1-800-358-9295 or by email to [ahrqpubs@ahrq.gov](mailto:ahrqpubs@ahrq.gov).

**"Advance Directives and Medical Treatment at the End of Life,"** by Daniel Kessler and Mark B. McClellan, published by the National Bureau of Economic Research, found that having a living will or surrogate decision-maker will influence the kind of care received but does not lead to savings in healthcare. Researchers looked at care of Medicare beneficiaries who died between 1985 and 1995 and compared states with laws enhancing incentives for compliance with advance directives or surrogates with states without them. To see the full report, go to <http://papers.nber.org/papers/W9955>.

**"Ethical and legal issues in nutrition, hydration, and feeding,"** a position paper by the American Dietetic Association, is available at [http://www.eatright.org/Public/GovernmentAffairs/92\\_adar0502.cfm](http://www.eatright.org/Public/GovernmentAffairs/92_adar0502.cfm).

**The Hartford Institute for Geriatric Nursing** seeks to shape the quality of health care older Americans receive by promoting the highest level of geriatric competence in all nurses. By raising the standards of nursing care, the Hartford Institute aims to ensure that people age with optimal function, comfort and dignity. Visit their website at [www.hartfordnig.org](http://www.hartfordnig.org).

**Handbook for Long-Distance Caregivers**, a new, free 29-page booklet available from the Family Caregiver Alliance (FCA) is described as an essential guide for families and friends caring for ill or elderly loved ones that live far away. Get the publication from FCA's website at [www.caregiver.org](http://www.caregiver.org) or send \$5 to FCA Publications, 690 Market Street, Suite 600, San Francisco, CA 94104.

**Assisted Living University is offering a "HIPAA ToolKit,"** which includes an introduction to HIPAA, health plan self-assessment tool, implementation plan, customizable policies and procedures, customizable forms, website resource, quick reference to privacy regulations, and training video. If your organization has health benefit plans, then your plan likely will be subject to HIPAA regulations – even if your business is not related to healthcare. Visit [www.alfaniversity.org](http://www.alfaniversity.org) online or call 800/258-7030 for cost and details.

**"Making Your Web Site Senior Friendly,"** developed by the National Institute of Aging and the National Library of Medicine, helps web designers create senior-friendly websites. It offers guidelines on typeface, text size, color, writing style, layout, navigation, and more. The booklet is available online at [www.nim.nih.gov/pubs/staffpubs/od/o\\_cplagingchecklist.html](http://www.nim.nih.gov/pubs/staffpubs/od/o_cplagingchecklist.html).

# The CAHSA Calendar

**February 5**      **Nursing Home Reimbursement & Quality Task Force**  
9:30 AM – 11:30 AM  
CAHSA Second Floor Conference Room

**February 11**      **CAHSA Finance Committee**  
3:00 PM – 4:30 PM  
Governor's Park Restaurant, Denver



*Get more information on  
these events from our  
website - [www.cahsa.org](http://www.cahsa.org)*

**February 27**      **CAHSA Board Meeting**  
12:00 PM – 3:00 PM  
Total Longterm Care Corporate Office, Denver

**March 4**      **CAHSA's Legislative Luncheon**  
12:00 PM – 1:30 PM  
Maggiano's Little Italy, Denver Pavillions

**March 9**      **Housing Group**  
9:30 AM  
Christian Living Campus, Johnson Center

**March 17**      **CAHSA Adult Day Coalition**  
10:00 AM – 1:00 PM  
Daybreak Adult Day, Denver

**Thank you for your generous support of CAHSA's 2004 Annual Conference and Exhibition:**

*American Baptist Homes of the Midwest and  
Baptist Home Association for the Rocky Mountains  
Christian Living Campus  
Eaton Senior Programs  
Granville Assisted Living  
Golden West Senior Residence  
HDS Services  
RehabWorks  
Total Longterm Care  
Ziegler Capital Markets Group*

*Sponsorships are still available. Contact CAHSA's Melanie Roth for more information at 303/837-8834.*

## CAHSA/AAHSA Listservs Serve Many Purposes

CAHSA and AAHSA members have numerous email listservs available to you. These subject-specific networks are a way to stay connected and for discussion about hot topic issues on the national and local levels. CAHSA's list serves, for CAHSA members only, provide a statewide forum to discuss any number of issues related to (1) housing, (2) nursing homes, (3) adult day services, (4) assisted living, and (5) CCRCs.

Here are a few of the list servs in which you might be interested in participating through AAHSA:

Assisted Living: Nationwide forum for discussion on a number of issues related to the field, including policy and legislation information.

Attorneys: Private discussion for attorney members only.

CCRC: A great place for CCRC providers nationwide to meet and discuss issues related to the field as well as a forum for AAHSA information on federal policy and legislation.

Daily Clips from AAHSA: Get links to news about aging services issues from major media worldwide, and links to examples of AAHSA, our state association partners, and our members in the news.

Home and Community-Based Services: The place to discuss and share information related to HCBS services including policy, funding regulatory and operational issues.

Human Resources Directors: An AAHSA member forum on human resources development, staffing and workforce issues.

Housing Management: Intended for HUD-subsidized and market-rate affordable housing providers, this listserv is meant to facilitate member-to-member discussions of hot topics, discretionary implementation options/experiences and other facility management concerns. It may also be used to disseminate information on the latest HUD operational requirements.

Marketing/PR: A forum for AAHSA members to ask for advice and share success stories about topics relating to marketing and public relations. The listserv includes periodic media opportunities posting and marketing/public relations tools.

Nursing Facilities: A forum or discussion among AAHSA nursing home members regarding operational and policy issues.

To sign up for a CAHSA listserv, please call CAHSA's Karen Simmering or email [info@cahsa.org](mailto:info@cahsa.org). To sign up for AAHSA's list serves, go to [www.aaaha.org](http://www.aaaha.org) and click on "members only" or contact Miriam Witherspoon at [mwitherspoon@aaaha.org](mailto:mwitherspoon@aaaha.org).

## Thank you for your Membership Renewal in January!

Anciano Tower	Colorado Springs Senior Homes	Hover Community, Inc.
The Argyle	Commercial Insurance Services, Inc.	Laurel Manor Care Center
The Barth Hotel	Community Capital Corporation	Liberty Heights at Northgate
Beatrice Hover Assisted Living Residence	The Courtyard of Loveland	Madison House
Bee Hive Homes	Covenant Village of Colorado	Maltese Cross Manor
Bent County Memorial Nursing Home	Dayspring Villa	Marycrest Assisted Living
BKD, LLP	DESCI	Mountain Vista Health Center
Bonell Good Samaritan	The Eastern Star-Masonic Center	Mullen Home-Little Sisters of the Poor
Boulder Good Samaritan Village	Eben Ezer Lutheran Care Center	Myers & Stauffer LC, CPAs
Broadmoor Court	Eben Ezer Lutheran Housing Center (Tabor)	The Myron Stratton Home
Cantril House	Barry Epstein, Attorney at Law	Nightingale Suites at Springwood
Centura Adult Day-Centura Senior Life Center	Financial & Accounting Support Specialists	Olin Hotel Apartments
The Chateau Des Mons	Feldhake & Associates, P.C.	Park Hill Residence
Christian Living Campus-Johnson Center	Fort Collins Good Samaritan	Prairie Creeks Living Center
Christian Living Campus-Living Center	Frasier Meadows Manor	Residences at Franklin Park
Christian Living Campus-University Hills	Garden Park Villa	Shughart, Thomson & Kilroy
Christian Living Campus-Village at the Johnson Center	The Granville Assisted Living Center	Total Longterm Care
Cinnamon Park	Guadalupe Senior Apartments	U.S. Foodservice, Inc.
Cliffview Assisted Living	The Haven	Union Printers Home
Colorado Assisted Living Homes LLC	The Highland Group	ViewPointe
	The Homestead Adult Day Care	Wellspring at Aurora
		Wheat Ridge Assisted Living