TO: Long Term and Behavioral Health Committee
FR: Edward R. Jagnandan
Executive Director, Wilson Housing Authority
RE: Clarification to Agency Report to Adult Care Home Petition
DATE: September 14, 2007

- We take exception to the standard methodology used to determine bed utilization as it does not take into account other factors that determine the need for long term care. The methodology works against the disabled adult population, living alone, and *under the poverty level*, that are in need of services. We requested that the methodology be reviewed to include other factors affecting need.
- A meeting with Wilson County Social Service Department revealed that the number of empty beds in adult day care is lower than reported by the plan, as it does include family care homes that, due to their size, are not able to provide the type of services required in an adult care home. A 10% vacancy rate in assisted living/nursing home facilities is considered full occupancy in all other states
- Existing adult care homes select the residents they want to admit. Telephone calls were made to all five adult care homes in the City of Wilson and although they had empty beds they were reluctant to admit individuals in wheel-chair, who were incontinent, or suffering from the early stages of Alzheimer's disease.
- Aging in place occurs when individuals are able to remain in the community where they have lived all their lives. That is the case for Continuum of Care Retirement Community where residents need to move from independent units to assisted living units within the same campus. Wilson Housing Authority residents will remain in the same campus, among friends and family members, and will receive services in private units, with private bathrooms, subsidized by the federal government. Adult Day Care homes provide to our residents only shared accommodations with common bathrooms shared by five other residents.
- Cost savings comes from the fact that these residents will avoid premature nursing home admission if given the opportunity to stay in their homes with the required services as well as less hospital admission and emergency room visits with services that will improve their cognitive and physical health.
- North Carolina lags behind other states in the nation that have successfully embraced public housing assisted living models. Numerous precedents exist in other states. We have provided the department with the names and phone numbers of state departments and housing authorities that have implemented this type of project. HUD (Department of Housing and Urban Development) and the Department of Health & Human Services (HHS) are in the process of signing an agreement to promote this type of projects throughout the U.S. This is a good precedent to set in North Carolina. The Department's concern should be the welfare of the low-income elderly/disabled North Carolinians.
- The physical plant requirement of expanding the corridors from 5' to 6' to comply with the Institutional building code is not possible in Tasman Towers. The Division's Construction Section indicated that the widening of corridors pertain only if the facility admits more than six individuals unable to evacuate on their

own. Wilson Housing Authority will not admit more than six individuals unable to evacuate on their own to their future project.

- Assisted living facilities are "home like" facilities. No 24 hour nursing/medical services are permitted. An individual that needs this higher level of care needs to be transferred to a nursing home – a "healthcare" facility. An assisted living license requires that assistance with activities of daily living, bathing, grooming, eating, transferring, toileting, be provided by unlicensed staff. Nursing oversight is performed by home health care nurses or by a registered nurse under contract. There is no conflict with the licensing requirements in our statement that healthcare services will be contracted out to home health agencies or registered nurses already providing these services.
- Originally, Adult Care Homes were not included in the certificate of need requirement, as is the case in most other states. In most cases, nursing homes, hospitals, acute care facilities, amongst others, are included in a certificate need requirement. Adult Care Homes were included in the certificate of need temporarily until "a finding of a more definitive means of developing and maintaining the quality of adult care homes beds is found". Public Housing assisted living projects represent a new solution to the rising costs and low quality services that the state is faced with today.
- Options given by the department fail to address the need for 24-hour supervision and these options are currently in a moratorium. We have discussed with the department both the Home Option and the Multi-Unit Assisted Housing with Services to find out that no funding is available for these options.

Respectfully, we understand why the industry association is objecting to this type of project since after all they have to represent the interests of their membership. However, we fail to understand the reluctance of the HHS department to test this project that has proven to be so successful in curtailing costs and improving the health and well-being of the poor seniors and disabled adults in most of the states of this nation. We can only conclude that there are other agendas than improving the care of these deserving and often neglected North Carolinians.

The housing Authority firmly believes that this is a moral issue and that our residents deserve better. We hope that the Long Term & Behavioral Health Committee will consider the best interests of these North Carolinians, and approve our petition.

HOSPICE

Hospice of Davidson County . . .
We Make the Difference

Ask for us by name – Your Hometown Hospice

DFS Health Planning
RECEIVED

SEP 07 2007

Medical Facilities
Planning Section

September 5, 2007

Mr. Floyd Cogley, Planner
Medical Facilities Planning Section
Division of Health Services Regulation
2714 Mail Service Center
Raleigh, NC 27699-2714

Dear Mr. Cogley:

Hospice of Davidson County, NC, Inc acknowledges that Kate B. Reynolds Hospice Home in Winston Salem has been instrumental in meeting the needs of terminally patients in and around Forsyth County, however we oppose the approval of the special needs petition for more beds at this time.

Our opposition is based upon the impact expected once our hospice house is completed in 2008 and those being constructed in surrounding counties. Currently, patients from counties adjacent to Forsyth County use the Kate B. Reynolds Hospice House. One the new facilities are constructed, patients will have the option of using several facilities capable of meeting the needs of hospice facility care. Adding additional beds now will not add value but risk creation of occupancy issues.

Ones the facilities currently under construction begin to serve patients, the need for additional beds should be re-evaluated to ensure the needs in our communities are being met.

Sincerely,

Gary M. Drake

Gary M. Drake
Chief Executive Officer
Hospice of Davidson County, NC, Inc