

A woman in a red jacket and a grey face mask is looking down at an elderly woman. The elderly woman has white hair, wears glasses, and is smiling while painting a green design on a white cup with a small brush. She is wearing a colorful, textured sweater. The background is slightly blurred, showing what appears to be a window with blinds.

Beyond the Amenities

When It's Time to Discuss **Assisted Living**

Your recommendation makes a difference,
because health is tied to how patients live.

Deciding the best place for a patient to continue a happy and fulfilling life when their health changes can be an emotional process that's full of uncertainty for patients and their families. It's often complicated by the fact that the need for senior living can be unexpected and sudden due to medical emergencies or the realization that living at home is no longer safe. The industry began as a hospitality business, but today, senior living communities are caring for many more residents living with chronic conditions than ever before.

Healthcare professionals (HCPs) are some of the most trusted and influential sources of information in this critical decision. Brookdale put together this guide from our expertise in senior living to help inform your conversations with patients. We hope it helps you address some of their top concerns and guide patients and their care partners to an informed decision that's best for everyone.



What to consider when it's time to consider assisted living

IF THE PATIENT NEEDS ASSISTANCE WITH DAILY LIVING

Even if a patient can manage in an apartment on their own fairly well, more management of daily habits could improve health outcomes, especially for chronic conditions. When an individual requires a daily check-in or needs help with meals and medications, senior living services could help relieve stress for patients and care partners. You can find a community with multiple levels of care — from independent living to assisted living and even memory care — to suit the patient's needs. Other benefits are cleaning services, meals provided, a social community of other residents, medication management and transportation to doctor's appointments.

The social aspect cannot be overlooked. Because seniors may be more likely to live alone, either losing friends and family to death or illness or suffering from memory issues or hearing loss, older adults are at increased risk for loneliness and social isolation, according to the CDC. This can significantly affect a person's health at a similar level that smoking, obesity and physical inactivity might. It's also associated with about a 50% percent increased risk of dementia. During the pandemic, we saw how seniors especially were forced to be more socially isolated than ever before. There's evidence that social isolation directly influences medication/treatment adherence, blood pressure, immune functioning and inflammation, as well as the ability to conduct activities of daily living (ADL).¹

Consistent human contact can reduce stress, as well as the risk of depression. Family and care partners can be so caught up in managing daily care needs that they miss out on providing social opportunities. It's worth considering how the patient's social needs are being met in their current living situation or how they may alter with changing health conditions.

When evaluating communities, consider whether their social enrichment programming pays special attention to residents' individual needs or interests or if it's simply limited to an activities calendar. Senior living communities help residents stay socially connected with fellow residents with activities or outings and provide occasions for friends and family to participate as well. Some communities can provide very purposeful enrichment for seniors, which can contribute to improved health outcomes.


¹ Julianne Holt-Lunstad, PhD, The Potential Public Health Relevance of Social Isolation and Loneliness: Prevalence, Epidemiology, and Risk Factors, Public Policy & Aging Report, Volume 27, Issue 4, 2017, Pages 127-130, <https://doi.org/10.1093/ppar/prx030>

IF THE PATIENT NEEDS HELP MANAGING CHRONIC CONDITIONS

Assisted living decisions should prioritize health and clinical expertise. Many senior living decisions are made solely on hospitality and amenities. But we're having this conversation, because the patient requires an additional level of clinical attention. Assisted living can provide evidence-based, specialized care resources for the most common chronic health conditions, from cancer or diabetes to chronic pain. Sometimes the larger networks of communities can serve a wider range of populations with more diverse care needs. Providers even do rounds in some assisted living communities, and the care teams there can coordinate with outside providers to help manage a resident's care. Assisted living can be a partner in managing their chronic conditions, looking out for signs and symptoms that friends and family may not be trained to recognize at home. Things to consider in a community are patient-to-staff ratios and the clinical training or leadership of the organization. Having RNs on staff is a good sign of a higher level of clinical expertise and better staffing oversight than communities who have no nurses. Look for a senior living community that proactively facilitates coordination between providers inside and outside the communities.

Another benefit to assisted living is proactive medication management. There are negative health outcomes associated with medication management at home. The issues can surface from a lack of administration routine, duplicated therapeutic effects between two medications, multiple prescribers that aren't coordinated, hoarding pills, confusion differentiating prescriptions, multiple storage locations, and continuing to take refills that are no longer needed. Not to mention expired medications and poor adherence to taking medication due to forgetfulness or having to remember multiple instructions.² Approximately 46% of people ages 70 to 79 take at least five prescription drugs³, and at least 15% of seniors have suffered a medication problem.⁴ Evidence shows that in at least half of these cases, the problem was preventable.

Well-run assisted living communities monitor and assist in evaluation of the number and type of medications a resident may be taking, both prescription and over the counter, and follow up with providers to ensure each of those prescriptions are necessary. Communities without a single medication management system risk higher rates of medication errors, adverse effects and duplication. Staff training, software to track residents' medications and relationships with preferred pharmacies are all important factors to look for in a community's medication administration programs.



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care resources for the most common chronic health conditions

² Julianne Holt-Lunstad, PhD, The Potential Public Health Relevance of Social Isolation and Loneliness: Prevalence, Epidemiology, and Risk Factors, Public Policy & Aging Report, Volume 27, Issue 4, 2017, Pages 127-130, <https://doi.org/10.1093/ppar/prx030>

³ Charlesworth CJ, Smit E, Lee DS, Alramadhan F, Odden MC. Polypharmacy Among Adults Aged 65 Years and Older in the United States: 1988-2010. J Gerontol A Biol Sci Med Sci. 2015;70(8):989-995. doi:10.1093/gerona/glv013

⁴ Pretorius RW, Gataric G, Swedlund SK, Miller JR. Reducing the risk of adverse drug events in older adults. Am Fam Physician. 2013 Mar 1;87(5):331-6. PMID: 23547549.



IF THE PATIENT NEEDS POST-ACUTE CARE

Your patient requires a specialized environment with attention and support for their high-risk condition. Especially in a post-acute care situation, it is important to provide personalized care and help manage medical conditions in an environment focused on the health and well-being of residents. Our priority here should be to find the ideal living situation with the right level of care. Assisted living communities should provide personalized assessments before the patient moves in to determine the right community for them. If the patient has been hospitalized, this will happen in the discharge process. They'll consider many aspects of the resident's life, such as mobility, dietary restrictions, medications and diagnoses. Communities should continue those assessments on a regular schedule for the entirety of a resident's stay; it can help them identify residents who may be at risk for declines in health, so they can intervene early and help to avoid unnecessary hospitalizations.

Having the appropriate level of care can make all the difference. Especially when there's been a recent hospitalization, there's a fine line between patient recovery and another acute care episode, and families and care partners may not have the resources to walk that line safely. A good assisted living community will stay in touch with external providers after a hospitalization or provide access to remote patient monitoring. This can streamline an often stressful process by providing a single source of communication, an easier patient transition, and if a community provides frequent consultations with their senior care management staff, that can potentially make your job easier.

IF THE PATIENT NEEDS MEMORY CARE

Patients with dementia or Alzheimer's need more than someone who can help keep them safe; they need a team that understands their holistic needs and believes in their ability to be content and find joy, despite the effects of the disease. There are communities with research-based programs designed to help people with dementia have a better quality of life and live with dignity. Look for a community with individualized programs based on the patient's cognitive abilities. People living with dementia need distinct support. There are communities with knowledgeable staff and experience managing these conditions who understand the importance of maintaining a routine schedule that's personalized to the individual's preferences and abilities. Sometimes that can be a lot to manage for a care partner or family member at home.

Even with home-based care, it can be expensive and challenging to find someone you trust to spend 24 hours a day as a companion and care expert. Some memory care communities assign care associates to residents who know their histories, routines and preferences. That can provide residents with a sense of stability and comfort. Sometimes a senior's family can feel the need to restrict what their loved one can do or where they can go out of concerns for safety. Memory care communities can attempt to provide safe opportunities for residents to continue to be involved in activities they enjoy, like cooking or small household activities under supervision. Engaging dementia residents in this way may help slow their decline.

When evaluating memory care, discuss their philosophies around using medication to manage behavioral symptoms of anxiety, depression or distress. Staff should be trained with behavioral intervention tools and to exhaust every other resource before they turn to these psychotropic medications, which can increase the risk of falls and have other impacts on health.⁵ Inquire about special services for the most advanced stages of dementia or their partnerships with hospice to keep a resident in a familiar environment. Transferring to different care communities as conditions change can be stressful for seniors and create opportunities for errors as a new care team has to orient themselves to a patient's medications or preferences. Ask communities how they focus on allowing residents to age with them and try to keep residents in one place longer.

⁵ Lindsey PL. Psychotropic medication use among older adults: what all nurses need to know. J Gerontol Nurs. 2009;35(9):28-38. doi:10.3928/00989134-20090731-01

PAYING FOR A SENIOR LIVING COMMUNITY

We're charging for exactly what the resident needs while also setting the bar high for quality of care and experience. Each resident's needs are unique and variable through time. Our personal service assessment at the start leads to an individual service plan for your patient, so they only pay for the care they need, when they need it. Meanwhile, some competitors offer tiers to choose from.

Dr. Thomas Lally, a Denver-based primary care physician, was surprised when he compared the rates of assisted living to what one of his senior patients was paying for round-the-clock-care at home. Assisted living would save his patient money. Moving into a Brookdale community provided access to 24-hour staff, plus meals, community amenities and social activities. This is a scenario we see every day as the clinical services in an assisted living setting are evolving. The industry began as a hospitality business, but today, we're caring for many more higher acuity residents living with chronic conditions than ever before. Providing those services at home takes a tremendous amount of financial and emotional resources for the resident and their support system.

We provide helpful information and resources to residents for this transition. The need for senior living can be unexpected and sudden due to medical emergencies or the realization that living at home is no longer safe. Brookdale provides information and resources to educate residents about their options, as long-term care can be a significant financial investment. Local Brookdale associates can assist with this for each individual resident and family.



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