

Making the grade worksheet: CONTINUING CARE RETIREMENT COMMUNITIES (CCRCs)

A CCRC is distinct in three important ways from other types of retirement communities:

Offers a combination of living accommodations and a “continuum of care” for the remainder of the resident’s life.

The continuum of care encompasses different levels of service all at one location — from independent living to assisted living and skilled nursing. These services are either pre-funded or provided on a fee-for-service basis, for the remainder of the resident’s lifetime.

CCRC residents sign a contract that involves the right to live in a specific place, and the intent to purchase services.

Prior to your visit:

Look up the facility’s rating on medicare.gov/nursinghomecompare or on state websites referenced on the same website.

This worksheet is designed to familiarize you with the types of services offered by CCRCs. Consider reviewing the guide in advance of your visit, and bring along a copy of this questionnaire to take notes and evaluate the community based on your impressions.

A continuing care retirement community (CCRC), or life care community, offers maintenance-free housing and a multi-dimensional lifestyle along with a contract for care for health care services.

When visiting a CCRC with the intent of moving there, be sure to check out their health care facilities. Although they may not be needed today, they could come into play later. Be sure to thoroughly tour all aspects of the community, including assisted living, skilled nursing care and memory care facilities.

Use this guide to assess the CCRC communities you are considering for your move.

Community profile

Name of community		Date visited
Address		Phone no.
City	State	Zip code
Contact name	Your rating 1–5 (5 being the highest)	

Release from liability: Any selections the individual or family makes in terms of care are the sole responsibility of the decision maker. The Financial Advisor, Legg Mason, and The Center for Innovative Care in Aging at the Johns Hopkins University School of Nursing are held harmless and released from any liability that may occur from selecting a care center, caregiver, community or facility.

INVESTMENT PRODUCTS: NOT FDIC INSURED • NO BANK GUARANTEE • MAY LOSE VALUE

Community basics

Number of:

Residents (total) _____ Assisted living residents _____

Units/available residences (total) _____ Skilled nursing beds _____

Independent residents _____

Setting (e.g., in-town, suburban, country) _____

Average age of the residents _____

Name of developer/sponsor _____

Is the sponsor for profit not-for-profit (Affiliated with: _____)

What is the financial position of the sponsor? (Request financial statements) _____

Is there debt? How is it structured? Yes No

How many years has the community been in business? _____

What is the history of any parent company or sponsor? _____

Occupancy rate (%) _____

Is there a waiting list? Yes No

Cost to join the waiting list: _____

Is the cost refundable? Yes No

Length of waiting list: _____

How is the waiting list managed? _____

Percentage of residents from local area? _____

Model unit preference? _____

Admissions criteria _____

Health _____

Financial _____

Location

Convenient to family? Yes No

Convenient to friends? Yes No

Convenient to shopping/restaurants/entertainment (e.g., movies)? Yes No

Location (Continued)

Convenient to medical care (e.g., doctors, specialists, hospitals, specialized rehabilitation facilities)? Yes No

Parking/Storage/Transportation

What are the parking accommodations for residents (e.g., garage, driveway, on-street)?

Free resident parking? Yes No

Is parking assigned? Yes No

Visitor parking? Yes No

Additional storage units? Yes No

Does the community offer transportation to shopping, doctors, etc.?. Yes No

Is scheduled transportation or public transportation offered nearby? Yes No

Community environment

Does it feel welcoming? Yes No

Do the residents appear happy and engaged? Yes No

Does the facility appear clean? Yes No

May residents bring personal items from home? Yes No

Is there a secure outside area for the residents to walk in? Yes No

Are pets allowed in independent living? Policies/rules/restrictions? Yes No

Are pets allowed in assisted living? Policies/rules/restrictions? Yes No

Community services

What type of care can be brought into the residence if additional support is required? (For example, home health aides or skilled nursing care.)

Is there a security system? Yes No

Is there a 24/7 concierge system? Yes No

Is there an emergency response system? Yes No

Community services (Continued)

What security measures are in place to keep residents with Alzheimer’s disease from wandering out of the building (the assisted living facility or the skilled nursing facility)?

Is there a secure outside area for the residents to walk in? Yes No

How do you accommodate a couple if one spouse needs a higher level of care?

Health and medical care

What type of health care and medical care services are available during each phase — independent, assisted living and skilled nursing?

Phase of Care

	Independent		Assisted living		Skilled nursing	
	Yes	No	Yes	No	Yes	No
In-house physician						
Nurse/medic on call						
Physical therapist						
Wellness care						
On-site pharmacy						
Other specialists						

How are emergency health problems handled?

What is the protocol for contacting family members should an emergency or another important issue arise?

Is short-term skilled nursing and rehabilitation available if someone requires them after an illness or surgery? Yes No

Is there someone on staff to help arrange doctor appointments? Yes No

Are there doctors on site on certain days? Which specialists? Yes No

What is the lead time to be seen by a doctor?

Is there a social worker on staff for help with care and resources, if needed? Yes No

What type of care (e.g., home health aides or skilled nursing care) can be brought into the residence if additional support is required?

What happens if there is a short-term need for hospitalization?

Health and medical care (Continued)

How often do residents return to the residence after a stay at rehab or hospital?

What health setbacks would trigger a move from independent living (e.g., mobility, incontinence, oxygen, cognitive decline or dementia)?

Who makes the decision to move the resident to a higher level of care?

What happens if assisted living or skilled care is needed and there is no available space (i.e., unit/bed)?

Who is the contact when the family has questions about patient care?

Activities and amenities

How are new residents welcomed to the community?

What types of activities and events (e.g., book clubs, bingo nights, holiday events, etc.) are offered?

What amenities (e.g., pool, tennis, fitness, dining, golf, etc.) are offered?

What types of services are available?

Are there dining options available? Yes No

If yes ...

Are meals part of the service provided in every phase — independent, assisted living and skilled nursing? Yes No

Are the costs for meals included in the monthly fee? Yes No

What meals are provided each day (e.g., breakfast, lunch, dinner and/or snacks)?

Can specific dietary needs be accommodated? Yes No

If no ...

If meals are not included in the monthly fee, how much do they cost?

How would the process work if one needed to have meals arranged for them?

Activities and amenities (Continued)

Optional services:

Housekeeping _____	Storage _____
Handyman _____	Guest rooms for visiting families _____
Salon _____	Visitor parking _____
Linen/Laundry _____	Other _____

Staff

Is the staff available 24 hours a day? Yes No

Is the staff friendly, respectful and personable? Yes No

What is the staffing level on weekdays, weekends and evenings?

What is the staff turnover rate?

Management

Who determines the management of the community?

How is the management supervised?

What feedback mechanisms exist for residents and their families?

Contract and fees

What services are included in the care agreement/service contract?

What types of contracts are offered? (e.g., Type A, B, C, D, etc.) Attach the community's fee schedule to this page after your visit.

By what percentage have the monthly fees increased over each of the last five years?

What is the change in monthly fee for additional levels of care?

What happens if a resident can no longer cover their monthly fees?

Contract and fees (Continued)

What happens if a resident wants to leave after a month, year or several years?

What happens if a resident dies? What portion of the entrance fee will be refunded to the estate?

Could the community discharge a patient? If so, for what reason? Please provide some examples.

What would the financial implications of a discharge be?

Check with local regulatory agencies and the Better Business Bureau to confirm compliance and see if any complaints have been filed.

CCRC housing options

Residents of CCRCs have the certain knowledge that as they age and their health care needs grow, they can access additional levels of care in the community. Though the need for care may not be immediate, be sure to explore the breadth of quality of that care and the process by which decisions will be made that may affect your quality of life.

Assisted living

What level of care is provided in assisted living? For example, what health setbacks would surpass its capabilities?

Is there a written plan for the care of each resident, and is there an ongoing process for assessing changing needs?

What is ratio of staff to residents?

How difficult is it to secure an assisted living space (when necessary)?

Who makes the final call about a long-term move to or from assisted living?

What health setbacks would trigger a move from assisted living to skilled nursing?

Skilled nursing

What type of health care and personal care services are available?

Skilled nursing (Continued)

Is there a written plan for the care of each resident, and is there an ongoing process for assessing changing needs? Yes No

What is ratio of staff to residents?

Who makes the final call about a long-term move to or from skilled nursing?

How are medical problems handled?

What is the overall Medicare rating?

Memory care

Does the facility have a special wing or floor for residents with dementia or cognitive impairment? Yes No

What type of training has the staff received in caring for patients with dementia or cognitive impairment?
Who does the training?

How does the staff handle behaviors such as wandering and agitation?

What security measures are in place to keep residents with dementia or cognitive impairment from wandering out of the building?

Is the staff available 24 hours a day? Yes No

Who makes the final call about a long-term move to memory care?

For facilities without specific memory care units, what training has the staff received to care for people with memory-related issues?

Who is the contact when the family has questions about patient care?

All investments involve risk, including loss of principal.

Legg Mason, Inc., its affiliates, and its employees are not in the business of providing tax or legal advice to taxpayers. These materials and any tax-related statements are not intended or written to be used, and cannot be used or relied upon, by any such taxpayer for the purpose of avoiding tax penalties or complying with any applicable tax laws or regulations. Tax-related statements, if any, may have been written in connection with the "promotion or marketing" of the transaction(s) or matter(s) addressed by these materials, to the extent allowed by applicable law. Any such taxpayer should seek advice based on the taxpayer's particular circumstances from an independent tax advisor.