



Supportive Living Framework



Alberta

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Supportive Living Framework

1. Purpose

The main objectives of this framework are to describe supportive living in Alberta including clarifying roles and responsibilities and using common terminology. The principles that should guide current and future supportive living developments, and a series of related terms and definitions are also included. Four levels of supportive living are described here according to their *building features, hospitality services, health and wellness services, and resident needs*. Given that the nature of supportive living is to respond to individual needs and maximize choice, it is not possible to describe all of the possible combinations of housing, support services and care that exist now or that will exist in the future. This framework will need to be updated as the supportive living concept continues to evolve and mature.

The framework should be adopted by all key players as a meaningful and useful tool to help with planning and operations. The framework does not aim to prescribe what housing operators should or can provide, or the criteria that should be used to determine entrance and exit criteria. Supportive living operators and service providers are expected to comply with relevant legislation, regulations, bylaws and rules established by municipalities, and the Governments of Alberta and Canada. Contract agreements may also include other practices that are not in legislation.

2. Why is a provincial supportive living framework needed?

All levels of government, regional health authorities, management bodies, other housing operators, developers, planners, health service providers, potential residents and their families will all benefit from a common framework. One framework means:

- Common terms and definitions can be referred to when working with partners on developing supportive living options.
- Plans and programs can be developed based on a clear understanding of roles and responsibilities.
- Referral guidelines can be clarified and consistently applied.
- Residents and their families will be able to match the resident's needs with appropriate building features, hospitality services and health and wellness services.

3. *What is supportive living?*

Supportive living is both a *philosophy* and an *approach* for providing services within a housing environment. It provides a residential setting where people can maintain control over their lives while also receiving the support they need. Buildings and common areas are specifically designed to meet residents' needs and to support their safety and security.

Supportive living options can serve the needs of a wide range of clients who need support to live as independently as possible, including seniors and adults with developmental or physical disabilities. However, there are also limits to what supportive living can provide. For example, individuals who have complex care needs and require access on a 24-hour basis to a registered nurse may not be appropriately accommodated in supportive living.

There are a number of benefits for individuals who live in supportive living and for their families. If a range of supportive living options is available locally, people have the option of staying close to their families and friends to have their current and future needs met. Supportive living provides services including meals; activities and social events that can help maintain and improve quality of life and overall health and well-being based on the changing needs of the individual.

Currently, there are about 21,000 supportive living spaces in Alberta. These spaces are in lodges, enhanced lodges, assisted living, designated assisted living, group homes, adult family living, and family care homes. They are in buildings owned and/or operated by government-supported management bodies or by private for-profit and non-profit or voluntary housing operators.

4. *What principles should guide current and future supportive living?*

Current and future supportive living developments should be based on the following principles:

1. Supportive living options recognize the individuality of each resident and his or her changing needs.
2. Communities will strive to have a range of supportive living options that can meet the service and affordability needs for local residents wanting to stay in or near their own communities.
3. All orders of government, regional health authorities, housing operators, and other stakeholders will work collaboratively to develop and deliver supportive living options.
4. To maximize choice and flexibility, health, housing and social service providers will work together and with residents and/or their families when coordinating and collaborating on a person's housing, care and service options.

5. To the extent they are able, Albertans are responsible for the costs associated with their supportive living accommodation. Provincial accommodation assistance will be targeted to those who need it most.
6. Regional health authorities are responsible for funding professional health services and personal care services to address individuals' assessed unmet needs.
7. The provincial government is responsible for setting overall policies and strategies, legislation, and funding in areas of its responsibility, while operational decisions will be made at the local level, consistent with provincial priorities and accountability requirements.

5. *How is supportive living different from home living and facility living?*

In Alberta, there are three streams that are often referred to within the continuing care system:

- The **home living stream** includes people who live in their own homes, including but not limited to single family dwellings, apartments, condominiums, and other seniors' independent living options.
- The **supportive living stream** combines accommodation or housing and hospitality services with other supports and care. Supportive living operators are responsible for coordinating and arranging hospitality services and may coordinate or provide personal care and other support services.
- The **facility living stream** includes long-term care facilities (e.g., nursing homes and auxiliary hospitals) that provide care for individuals whose health needs are such that they are unable to remain at home or in a supportive living situation.

CONTINUING CARE SYSTEM		
Home Living	Supportive Living	Facility Living

In **home living**, individuals are largely responsible for and capable of arranging any care and assistance that they may need. They can access publicly funded health services through home care or other community-based health programs or they can purchase personal and other support services privately.

Compared with home living, **supportive living** provides:

- Basic hospitality services such as meals (at least one main meal per day), housekeeping, laundry, and life-enrichment services on site and arranged by the housing operator.
- A common area for meals, social functions, etc.
- A safe and accessible environment.
- 24-hour, 7 days a week, safety and security.

Supportive living meets the needs of a wide range of people, but not those who have highly complex and serious health care needs. People with the highest and most complex needs are served primarily in facility living. Supportive living is also typically unable to serve individuals who exhibit unpredictable behaviours that put themselves and/or others at risk.

Compared to supportive living, **facility living**:

- Cares for residents with medical conditions that may be serious, chronic and/or unpredictable and require access to registered nursing services on a 24-hour basis. These professionals are able to respond to the need for unscheduled assessments and prescribe interventions.
- Provides 24-hour registered nursing care from nursing staff that are able to respond immediately and on a sustained and unscheduled basis.
- Has specialized physical design and infrastructure to address highly complex needs.
- Is governed by the *Nursing Homes Act* or the *Hospitals Act*.

6. Framework summary table

The framework identifies four distinct levels of supportive living in Alberta:

- Residential Living – Level 1
- Lodge Living – Level 2
- Assisted Living – Level 3, and
- Enhanced Assisted Living – Level 4.

The one-page framework summary table on page 6 includes a detailed description of *resident needs, building features, hospitality services and health and wellness services* that correspond with each of the four levels of supportive living in Alberta.

Resident Needs

The purpose of this section of the framework is to describe the range of needs of persons residing in supportive living. As resident needs increase, so does the level of supportive living service. Consistent with the concept of “unbundling” health and housing services, supportive living facilities are not typically limited to serving only one level of resident needs (e.g., only Residential Living – Level 1 or Lodge Living – Level 2). In fact, services can often be modified or enhanced based on the resident’s changing needs.

In most supportive living settings, residents apply directly to the housing operator for tenancy. In the remaining cases (“designated” spaces), entry into supportive living is based on an assessment of resident needs and is a collaborative process between the regional health authority and the housing operator. It is recognized that there may be some risks to those individuals who exercise their choice to live in a given supportive living space when their needs exceed the level of services that can be provided.

Building Features

The purpose of this section of the framework is to describe the minimum requirements for common areas that must be available within a supportive living site and to describe the ideal in terms of residents' suite features. A number of supportive living spaces are located in older facilities; therefore they may not be able to meet the expectations associated with new construction.

Hospitality Services

The purpose of this section of the framework is to describe the services that the housing operator is responsible to co-ordinate and/or provide to residents. When a service is identified as "may be available" the housing operator may or may not have the ability or capacity to co-ordinate or provide this service to its residents. If a service is identified as "available" the housing operator has the capacity to provide the service to residents who want or need the service or to co-ordinate its delivery by another vendor. When a service is identified as "provided" the operator supplies this service to residents.

The services listed in each of the four levels are not meant to be "prescriptive" meaning that residents must either need, want or pay for some or all of these services. An operator is also not required to make available or provide all of these services to their residents in order to be classified as a certain level of supportive living. Upon move-in, residents and operators are expected to have a common understanding of what services may be available, are available and are provided, and the related costs.

Health and Wellness Services

The purpose of this section is to describe the roles and responsibilities of the health care system (both publicly funded and privately purchased services) in relation to individualized case management, assessment of needs and the provision of services to address the unmet needs of supportive living residents.

7. In Summary

The agreed upon terms, definitions, descriptions, and roles and responsibilities that are included in this framework are the basis on which supportive living options in Alberta can now be identified. All levels of government, regional health authorities, housing operators, developers and planners, service providers, and residents and their families can now refer to one document when assessing what is already in place and what is needed. Supportive living has grown dramatically in recent years and this expansion is expected to continue. This framework is intended to provide the compass by which future supportive living developments are created to best meet the needs of a wide range of Albertans.

LEVELS OF SUPPORTIVE LIVING IN ALBERTA

Residential Living - Level 1	Lodge Living - Level 2	Assisted Living - Level 3	Enhanced Assisted Living - Level 4
RESIDENT NEEDS			
<ul style="list-style-type: none"> - Can arrange, manage and direct own care and is responsible for decisions about day-to-day activities. - Can manage most daily tasks independently. - Some supports/services are required. - All personal assistance can be scheduled. - Primarily needs housing for safety, security and socialization 	<ul style="list-style-type: none"> - Can arrange, manage and direct own care and is responsible for decisions about day-to-day activities. - Can manage some daily tasks independently. - A basic set of supports/services is required. - All or most personal assistance can be scheduled. - May require some assistance/encouragement to participate in social, recreational and rehabilitation programs. 	<ul style="list-style-type: none"> - Has choices but may need assistance in making some decisions about day-to-day activities. - Requires assistance with many daily tasks. - Most personal assistance can be scheduled. The need for unscheduled personal assistance is infrequent. - May require increased assistance to participate in social, recreational and rehabilitation programs. 	<ul style="list-style-type: none"> - Needs assistance in making decisions about day-to-day activities, but should still be given as many choices as possible. - Requires assistance with most/all daily tasks. - The need for unscheduled personal assistance is frequent. - Requires enhanced assistance to participate in social, recreational and rehabilitation programs.
BUILDING FEATURES			
<p>All Levels - Building safety and design features are appropriate for residents' needs</p> <p>Ideally, each suite is private, includes a lockable door, a bedroom, sitting area, bathroom and a kitchenette. Suites for residents with Residential Living - Level 1 needs may also include a full kitchen.</p> <p>Except for Residential Living - Level 1, that might only contain a common area for dining, all other levels of supportive living are expected to have common areas for dining and social/recreational activities.</p>			
HOSPITALITY SERVICES			
<p>Meal Services At least one main meal per day is available</p> <p>Housekeeping Services Services are available</p> <p>Personal Laundry Personal laundry equipment is available Personal laundry services may be available</p> <p>Laundry and Linen Services Laundry and linen services may be available.</p> <p>Safety & Security 24 hour security is provided</p> <p>Social, Leisure & Recreational Opportunities Services may be available</p> <p>Coordination and Referral Services to Community Supports Guidance/Advocacy/Advisory role may be available Assistance with accessing community services may be available</p> <p>May be Available- Housing operators may or may not have the ability or capacity to co-ordinate this service or provide it to residents.</p> <p>Is/Are Available – The housing operator has the capacity to provide the service directly or arrange for its delivery by another source, if the resident needs or wants the service.</p> <p>Provided –These are the services that housing operators supply to meet residents' needs.</p>	<p>Meal Services Full meal services are available (2 meals if kitchenette in suite)</p> <p>Housekeeping Services Weekly services are available</p> <p>Personal Laundry Personal laundry equipment is available Personal laundry services may be available</p> <p>Laundry and Linen Services Weekly laundry and linen services are available</p> <p>Safety & Security 24 hour staff on site Personal response system is provided</p> <p>Social, Leisure & Recreational Opportunities Services are available</p> <p>Coordination and Referral Services to Community Supports Guidance/Advocacy/Advisory role is available Assistance with accessing community services is available</p>	<p>Meal Services Full meal services are available Some special dietary requirements can be met</p> <p>Housekeeping Services More than weekly services are available Additional sanitization as required</p> <p>Personal Laundry Personal laundry equipment is available Personal laundry services are available</p> <p>Laundry and Linen Services Weekly laundry and linen services are available</p> <p>Safety & Security 24 hour staff on site Routine checking of residents as required Personal response system is provided</p> <p>Social, Leisure & Recreational Opportunities Services are available</p> <p>Coordination and Referral Services to Community Supports Guidance/Advocacy/Advisory role is provided Assistance with accessing community services is provided</p>	<p>Meal Services Full meal services are provided Most special dietary requirements can be met Food/nutrition intake monitored</p> <p>Housekeeping Services Daily services are provided Additional sanitization as required</p> <p>Personal Laundry Personal laundry equipment is available Personal laundry services are available</p> <p>Laundry and Linen Services Weekly/daily laundry and linen services are provided</p> <p>Safety & Security 24 hour staff on site Routine checking of residents as required Personal response system is provided</p> <p>Social, Leisure & Recreational Opportunities Services are provided</p> <p>Coordination and Referral Services to Community Supports Guidance/Advocacy/Advisory role is provided Assistance with accessing community services is provided</p>
HEALTH AND WELLNESS SERVICES			
<p><i>All Levels: General Service Needs</i></p> <ul style="list-style-type: none"> - Case management by RHAs for publicly funded services - Assessment for publicly funded health and personal care services completed by the RHA based on unmet need. - Other health services, services of health professionals are available as arranged locally and on an as needed basis. - Personal assistance and/or professional services may be provided to residents by: the RHA directly, the operator on contract to the RHA, the operator privately, or private pay by an alternate vendor. <p><i>All Levels: Medication Support</i></p> <ul style="list-style-type: none"> - Support will be provided by RHA's based on assessed unmet need. Support can also be purchased privately. Residents are responsible for the costs of their medications including dispensing fees. 			
<p>Staff Scheduled visits by RHA staff and other community supports. No health staff on site on a 24-hour basis.</p>	<p>Staff Scheduled visits by RHA staff and other community supports. No health staff on site on a 24-hour basis.</p>	<p>Staff Scheduled visits by RHA staff and other community supports. Suitably qualified, certified or trained staff on site – on a 24-hour basis</p>	<p>Staff Scheduled visits by RHA staff and other community supports. Suitably qualified, certified or trained staff on site – on a 24-hour basis. Regulated professional staff on site – on a 24-hour basis</p>

DEFINITIONS

Supportive Living	Supportive Living means a philosophy and an approach for providing services within a housing environment. It provides a home-like setting where people can maintain control over their lives while also receiving the support they need. The building is specifically designed with common areas and features to allow individuals to “age in place.” Building features include private space and a safe, secure and barrier-free environment. Supportive living promotes residents’ independence and aging in place through the provision of services such as 24-hour monitoring, emergency response, security, meals, housekeeping, and life-enrichment activities. Publicly-funded personal care and health services are provided to supportive living residents based on their assessed unmet needs.
Typical Resident Related Terms	
Scheduled, Unscheduled	Scheduled assistance can be planned for and provided at a fixed or predictable time. Unscheduled assistance cannot be planned for and is provided in response to an unpredictable event.
Hospitality Service Related Terms	
May be available Available Provided	<u>May be Available</u> - Housing operators may or may not have the ability or capacity to co-ordinate this service or provide it directly to residents. <u>Available</u> – The housing operator has the capacity to provide the service directly or arrange for its delivery by another source, if the resident needs or wants the service. <u>Provided</u> –These are the services that housing operators supply to meet residents’ needs.
Main Meal/ Full Meal Services	Main meals are a hot lunch or dinner. Full meal services means the provision of breakfast, lunch and dinner plus snacks, approved by a Registered Dietitian or qualified Food and Nutrition Manager in accordance with <i>Canada’s Food Guide to Healthy Eating</i> .
Special Dietary Requirements	Includes residents’ dietary needs (e.g., low salt, low or no sugar) and how food is served (e.g., minced, pureed, liquid, etc.).
Housekeeping Services	Regular cleaning of residents’ rooms and common areas. Includes vacuuming, dusting, kitchen, dining room and bathroom cleaning and disinfecting.
Personal Laundry	The laundering of the resident’s personal clothing.
Laundry and Linen Services	Regular laundering of bedding, towels and common linens, either owned by the facility, resident or a laundry service, for the exclusive use of the residents. “Bedding” includes bed sheets, pillowcases and blankets. “Towels” includes bath towels, hand towels and face cloths. “Common linens” includes tablecloths and napkins.
Safety and Security	Safety and security may be achievable through some form of electronic monitoring such as a personal response system or on site staff. On site means in a building or in close proximity to several buildings.

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Social, Leisure and Recreational Opportunities	These are organized and planned activities that are offered to residents on a regular basis to enhance their well-being and social needs. In comparison, “recreational therapy” provides treatment, education and recreation services to help people develop their leisure in ways that enhance their health, independence and well-being.
Coordination and Referral Services	Services provided by the housing operator on behalf of the resident, such as contacting health professionals, and assisting with pension information, tenant’s insurance, other forms, etc.
Guidance/Advocacy/Advisory Role	The provision of assistance to residents to cope with issues that impact their lives. This assistance ranges from helping residents to fill out forms, to establishing links with a variety of external services, to liaising with families, as well as other services specific to residents.
Health and Wellness Service Related Terms	
Unmet Needs	Means needs that are based on an individual assessment as those needs where individuals with family or community supports, are unable to meet the health need (e.g., if they are able to use the toilet without assistance, it is a met need. If they require assistance to use the toilet, it is an unmet need.)
Case Management	Case management is a client-centred strategy for the provision of quality health and social services. Case management is used to manage the provision and coordination of care across the continuum and to balance potential client outcomes with effective use of available resources.
Personal Care Services	Personal care services includes assistance with the activities of daily living (e.g. bathing, personal hygiene, grooming, dressing, toileting, incontinence management), assistance with therapeutic regimes (e.g. range of motion, medication assistance and reminders, simple wound care, respiratory equipment, ostomy care), simple bedside care (e.g. mouth care, turning, application of lotions), therapeutic interventions for behaviour management and maintenance of health records.
Health Care Aid (HCA), Personal Care Attendants (PCA), Nursing Attendants/Assistants/Aides	Are an unregulated/unlicensed group of workers trained on the job, and students and graduates of certification programs at colleges and vocational schools, which vary from 12 to 40 weeks. They assist regulated nurses in the provision of health services to residents. They are known by a number of different terms depending on their training and the employers’ terminology.
Licensed Practical Nurse (LPN)	Licensed Practical Nurses (LPN) are regulated/licensed by the College of Licensed Practical Nurses of Alberta and are included under the <i>Health Professions Act</i> . They typically have completed a 15-month study program in a college setting. LPNs apply nursing knowledge, skills and judgment to assess residents’ needs, and provide nursing care for residents.

DEFINITIONS

Registered Nurse (RN)	Registered Nurses (RNs) are regulated/licensed by the Alberta Association of Registered Nurses (AARN). RNs typically have completed a minimum two-year diploma program, and many complete a four-year university degree program. RNs apply nursing knowledge, skills and judgment to meet residents' needs, and provide nursing care for residents. They are also able to provide treatment and interventions and make referrals, prevent or treat injury and illness, teach, counsel and advocate to enhance health and well-being, coordinate, supervise, monitor and evaluate the provision of health services, teach nursing theory and practice, manage, administer and allocate resources related to health services, and engage in research related to health and the practice of nursing.
Medication Support	<p>A generic term to indicate a range of activities related to medications including reminding, assisting, administering and safely storing medications. Discussions and decisions related to who (the resident, an informal caregiver, or paid caregiver) is able to and responsible for providing the support that the resident requires to receive their medication(s) safely and on time are done on an individualized basis.</p> <p><u>Medication Reminding</u> - A staff person helps the resident remember that they need to take their medication.</p> <p><u>Medication Assistance</u> – The resident recognizes the need to take medication and consents to assistance with the medication regime.</p> <p><u>Medication Administration</u> - Means a RN /LPN has the responsibility to ensure the resident receives appropriate medication as ordered. This includes monitoring the effectiveness of the medications and coordinating appropriateness of medications with other health professionals, including the physician and the pharmacist.</p>
Other Common Housing with Service Terms	
Home Living	The primary housing option for persons who are able to live independently and with minimal support services. Home living is the housing option for persons who chose and who are able to maintain active, healthy, independent living while remaining in their family home as long as possible. In order to support continued independent living, basic Home Care services may be provided and/or the individual can purchase services from another agency.
Assisted Living and Supportive Housing	There are many definitions of “Assisted living” and “Supportive Housing”. Neither of these terms is protected in Alberta and can be used by housing operators at their own discretion. In the broadest sense, they both refer to the combination of housing and services in a residential setting. The services that are included in the rent or are otherwise available for purchase vary from building to building.

DEFINITIONS

<p>Seniors Lodges/Enhanced Lodges</p>	<p>Seniors lodges are supportive living facilities operated under the <i>Alberta Housing Act</i> that are designed to provide room and board for seniors who are functionally independent or functionally independent with the assistance of community-based services. “Enhanced Lodges” describes a new generation of lodges. While seniors lodges typically provide services as described in Lodge Living – Level 2, some provide additional services that would place them in Assisted Living – Level 3 or even Enhanced Assisted Living – Level 4. Some enhanced lodges have developed specialized areas in the facility to provide services for persons with Alzheimer’s disease and other dementias.</p>
<p>Designated Assisted Living Designated Supportive Living Designated Supportive Housing</p>	<p>The term “designated” refers to spaces within a supportive living facility where there is a contract between a regional health authority and a housing operator. Under the contract the facility operator provides health and support services based on assessed need. The regional health authority, in collaboration with the operator makes decisions regarding admission and discharge. Regional health authorities differ in terms of their target populations for these spaces, type and availability of health care staff, and the services that the operator must provide as part of the contract.</p>
<p>Facility Living</p>	<p>Facility living includes “nursing homes” under the <i>Nursing Homes Act</i> and “auxiliary hospitals” under the <i>Hospitals Act</i>. Persons with complex and chronic health needs who require support and 24-hour registered nursing care are placed within these institutional settings.</p>