

CARF Accreditation Report
for
Armed Forces Retirement Home -
Gulfport

Five-Year Accreditation



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About CARF

CARF is an independent, nonprofit accreditor of health and human services, enhancing the lives of persons served worldwide.

The accreditation process applies CARF's internationally recognized standards during a site survey conducted by peer surveyors. Accreditation, however, is an ongoing process that distinguishes a provider's service delivery and signals to the public that the provider is committed to continuous performance improvement, responsive to feedback, and accountable to the community and its other stakeholders.

CARF accreditation promotes providers' demonstration of value and Quality Across the Lifespan® of millions of persons served through application of rigorous organizational and program standards organized around the ASPIRE to Excellence® continuous quality improvement framework. CARF accreditation has been the recognized benchmark of quality health and human services for more than 50 years.

For more information or to contact CARF, please visit www.carf.org/contact-us.

Organization

Armed Forces Retirement Home - Gulfport
1800 Beach Drive
Gulfport, MS 39507-1508

Organizational Leadership

Cynthia A. Lee, RN, MSN, Performance Improvement Integrator
James Branham, COO
Jeffrey Eads, Administrator
Stephen Rippe, CEO
Travis Cook, FACHE, CHFP, CDFM, Chief Financial Officer

Survey Number

147394

Survey Date(s)

October 18, 2021–October 20, 2021

Surveyor(s)

Karen L. Russell, MBA, Administrative
Elizabeth R. Gossett, RN, Program
K. A. Tutterow, CPA, RHP, NHA, Virtual Finance

Program(s)/Service(s) Surveyed

Continuing Care Retirement Community

Previous Survey

August 29, 2016–August 31, 2016
Five-Year Accreditation

Accreditation Decision**Five-Year Accreditation**

Expiration: October 31, 2026

Executive Summary

This report contains the findings of CARF's site survey of Armed Forces Retirement Home - Gulfport conducted October 18, 2021–October 20, 2021. This report includes the following information:

- Documentation of the accreditation decision and the basis for the decision as determined by CARF's consideration of the survey findings.
- Identification of the specific program(s)/service(s) and location(s) to which this accreditation decision applies.
- Identification of the CARF surveyor(s) who conducted the survey and an overview of the CARF survey process and how conformance to the standards was determined.
- Feedback on the organization's strengths and recognition of any areas where the organization demonstrated exemplary conformance to the standards.
- Documentation of the specific sections of the CARF standards that were applied on the survey.
- Recommendations for improvement in any areas where the organization did not meet the minimum requirements to demonstrate full conformance to the standards.
- Any consultative suggestions documented by the surveyor(s) to help the organization improve its program(s)/service(s) and business operations.

Accreditation Decision

On balance, Armed Forces Retirement Home - Gulfport demonstrated substantial conformance to the standards. Armed Forces Retirement Home - Gulfport (AFRH-G) offers five levels of care, with many amenities and activities for residents. Person-centered care is a strategic initiative, and residents are happy and feel well cared for. A wide variety of medical services are offered on the campus, with a wellness center that is available 24/7. A well-developed and detailed performance improvement program that reaches every level of the organization is the cornerstone to measure success and improvement of resident care processes, operation processes, and business functions, which drives the organization forward. The COVID-19 pandemic currently limits family visitation and resident activities, but residents still find opportunities for socializing. Consultation is offered in this report, and areas for improvement are identified in the recommendations provided. Areas noted for improvement in this report include implementing a policy in program/service structure.

Armed Forces Retirement Home - Gulfport appears likely to maintain and/or improve its current method of operation and demonstrates a commitment to ongoing quality improvement. Armed Forces Retirement Home - Gulfport is required to submit a post-survey Quality Improvement Plan (QIP) to CARF that addresses all recommendations identified in this report.

Armed Forces Retirement Home - Gulfport has earned a Five-Year Accreditation. The leadership team and staff are complimented and congratulated for this achievement. In order to maintain this accreditation, throughout the term of accreditation, the organization is required to:

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.
- Maintain ongoing conformance to CARF's standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.

Survey Details

Survey Participants

The survey of Armed Forces Retirement Home - Gulfport was conducted by the following CARF surveyor(s):

- Karen L. Russell, MBA, Administrative
- Elizabeth R. Gossett, RN, Program
- K. A. Tutterow, CPA, RHP, NHA, Virtual Finance

CARF considers the involvement of persons served to be vital to the survey process. As part of the accreditation survey for all organizations, CARF surveyors interact with and conduct direct, confidential interviews with consenting current and former persons served in the program(s)/service(s) for which the organization is seeking accreditation. In addition, as applicable and available, interviews may be conducted with family members and/or representatives of the persons served such as guardians, advocates, or members of their support system.

Interviews are also conducted with individuals associated with the organization, as applicable, which may include:

- The organization's leadership, such as board members, executives, owners, and managers.
- Business unit resources, such as finance and human resources.
- Personnel who serve and directly interact with persons served in the program(s)/service(s) for which the organization is seeking accreditation.
- Other stakeholders, such as referral sources, payers, insurers, and fiscal intermediaries.
- Community constituents and governmental representatives.

Survey Activities

Achieving CARF accreditation involves demonstrating conformance to the applicable CARF standards, evidenced through observable practices, verifiable results over time, and comprehensive supporting documentation. The survey of Armed Forces Retirement Home - Gulfport and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.
- Direct observation of the organization's operations and service delivery practices.
- Observation of the organization's location(s) where services are delivered.
- Review of organizational documents, which may include policies; plans; written procedures; promotional materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other documents necessary to determine conformance to standards.
- Review of documents related to program/service design, delivery, outcomes, and improvement, such as program descriptions, records of services provided, documentation of reviews of program resources and services conducted, and program evaluations.
- Review of records of current and former persons served.

Program(s)/Service(s) Surveyed

The survey addressed by this report is specific to the following program(s)/service(s):

- Continuing Care Retirement Community

A list of the organization's accredited program(s)/service(s) by location is included at the end of this report.

Representations and Constraints

The accreditation decision and survey findings contained in this report are based on an on-balance consideration of the information obtained by the surveyor(s) during the site survey. Any information that was unavailable, not presented, or outside the scope of the survey was not considered and, had it been considered, may have affected the contents of this report. If at any time CARF subsequently learns or has reason to believe that the organization did not participate in the accreditation process in good faith or that any information presented was not accurate, truthful, or complete, CARF may modify the accreditation decision, up to and including revocation of accreditation.

Survey Findings

This report provides a summary of the organization's strengths and identifies the sections of the CARF standards that were applied on the survey and the findings in each area. In conjunction with its evaluation of conformance to the specific program/service standards, CARF assessed conformance to its business practice standards, referred to as Section 1. ASPIRE to Excellence, which are designed to support the delivery of the program(s)/service(s) within a sound business operating framework to promote long-term success.

The specific standards applied from each section vary based on a variety of factors, including, but not limited to, the scope(s) of the program(s)/service(s), population(s) served, location(s), methods of service delivery, and survey type. Information about the specific standards applied on each survey is included in the standards manual and other instructions that may be provided by CARF.

Areas of Strength

CARF found that Armed Forces Retirement Home - Gulfport demonstrated the following strengths:

- AFRH-G has a long, rich, and well-established history, dating back to 1811. Hurricane Katrina destroyed the Gulfport campus in 2005. The campus was rebuilt, and in October 2010, a new, modern multitower complex was opened featuring green technology and supporting the philosophy of aging in place, offering five levels of care.
- AFRH-G has propane, petroleum, and generator power for up to two weeks of independent use. This gives it critical access to energy in case of severe weather, which can occur frequently in the Gulf Coast area.
- AFRH-G is an organization of the US government, subject to federal rules and regulations. The leadership and administration are overseen by the secretary of defense. AFRH-G's complex structure makes it unique, providing challenges and opportunities for the leadership and staff.
- As a retirement community restricted for the military, AFRH-G limits residency to those who have served in the US Armed Forces and have met specific admission guidelines. No one who is eligible for admission is restricted by finances. The resident fee structure makes it affordable for all.

- AFRH-G offers many resident amenities and activities. Some of these include (but are not limited to) a woodshop, painting and ceramics, a painting studio, a sewing and quilting room, a library and low vision assistance, a resident computer room and separate computer classroom, a movie theater, a bowling center, an indoor bocce court and game room, a large outdoor pool, a putting green, an outdoor walking and bike track with adaptive bikes available, and a pedestrian bridge to the beach.
- The leadership team includes many individuals that have military experience. They bring unique, strong, and structured leadership skills to the organization. There is focused attention to detail and “getting it right.” The members of the leadership are focused and work together well as a team. They embrace resident-centered care and a staff-centered environment, which is very evident in their management approach.
- AFRH-G has an extensive and comprehensive cultural competency and diversity plan. It incorporates CARF’s phases of organizational cultural competency and emphasizes two of AFRH-G’s strategic plan goals: person-centered care and staff-centered environment.
- Performance improvement is a key program for the organization. There is a multilevel structure approach, with component performance improvement teams that focus on operations (including facilities, safety, and security), resident services/business office, healthcare, and staff development. These teams report to the campus performance improvement team. This ensures that performance improvement is occurring at every level of the organization. The process is continual and ongoing, with detailed analysis and reporting.
- AFRH-G provides qualified veterans with a continuum of services that allow these residents to age with dignity and respect as their healthcare needs change. Included in the campus are independent living, assisted living, long-term care, and memory support residences. There is also an Independent Living Plus option that offers support to residents living independently. These options are affordable to residents as the fee structure is based on a percentage of income, with a discount for residents at a lower income level.
- Throughout the continuum, residents are treated with dignity and respect by the dedicated staff. There is a concerted effort by all staff to assist residents in maintaining as much independence as possible. Many staff members list their desire to serve the veteran community as a key driver in their decision to join the organization.
- Many residents throughout the community are involved in meaningful activities. Examples include the computer support group and service as a sponsor to new residents.
- Management is very proactive about communicating with residents and responding to their concerns. The elected Resident Advisory Committee regularly interacts with both management and residents. The Plan of the Week and monthly newsletter, *The Communicator*, are examples of forums used to both give and receive information. Residents and staff are surveyed regularly in order to contribute to the continuous quality improvement practices at the organization. There is an ombudsman who assists residents in problem solving.
- The volunteer program is well organized. A large percentage of residents provide volunteer services to the community that enhance both the lives of the volunteer as well as individuals and the organization. Examples of volunteer services include the resident sponsors for new residents, work in the wood shop and crafts room, and work in the Wellness Center.
- Care is provided to residents in the assisted living, long-term care, and memory support units in a person-centered manner that supports residents and their families. The piano room in the assisted living unit and the country kitchen in long-term care were both areas that appeared to be well used and appreciated by residents.
- Consistent staff members are associated with environments that strive to be homelike and accessible to residents who require a wide variety of physical and cognitive adaptations. Staff members were especially complimentary of the substantial orientation process.
- The number of professionals, including direct care providers and medical staff that attend the quarterly care conferences, are especially appreciated by families and residents. Family members commented on the superior exchange of information during these meetings as well as at other times when issues arise.

- Care to residents with a diagnosis of dementia is provided in the secure memory support unit. Staff members from all departments are committed to education and training in order to provide the best possible services to these residents. The unit contains areas for socialization and activities. Families are welcome to visit and share meals with residents.
- The Wellness Center provides on-site medical care to residents. There are also dental, mental health, and rehabilitative services. The medical staff members are very committed to providing top-notch care and services to residents, including interacting with the multiple outside providers that residents might see. The availability of medical transportation allows residents easy access to the VA hospital in Biloxi and other specialists in the area.
- Residents, staff, and family members are especially complimentary of the work that was done by everyone to ensure their safety during the COVID-19 pandemic. The staff reacted early on to ensure that there were adequate supplies and practices appropriate to the threat of significant illness.
- Nutritious meals and snacks are provided to all residents on campus. Residents are able to give input about menu items and have multiple choices for entrees and side dishes at every meal. The dining department provides enhanced meals throughout the year for special occasions, including a monthly birthday dinner and a variety of holiday celebrations.
- Residents and families are able to use the kitchen and meeting room facilities in the chapel for special occasions and celebrations. The chapel hosts faith-based programs on a regular basis. There are resident volunteers who take residents who may need extra help to services using golf carts.
- The recreation department provides a range of person-centered and stimulating activities to residents at all levels of care. During the pandemic and ongoing, staff utilized technology to continue to interact with residents. Weekly ice cream and other treats sent with packaged meals, a comedy program and travel shows on the in-house TV station, and indoor and outdoor scavenger hunts are examples of some offerings that residents had a very positive response to.
- At end of life, residents are able to access hospice services if they choose. Even during the COVID-19 shutdown, there was a memorial service held monthly. An honor guard blanket is used to cover the resident as the resident leaves the campus for the last time, and there are opportunities for resident volunteers to provide comfort and companionship to residents at end of life. The posting of pictures of deceased residents and service information is a visual reminder of these individuals and the relationships that they might have had with other residents and staff throughout their stay at AFRH-G. This is especially poignant, as many residents are on the campus for decades and form lasting relationships with each other and the staff.

Armed Forces Retirement Home - Gulfport also demonstrated exemplary conformance to the standards as set forth below. Recognition of exemplary conformance indicates a practice that produces outstanding business or clinical results and/or is innovative or creative and beneficial to be shared with the field.

- The organization's values for the net operating margin ratio, total excess margin ratio, operating ratio, and days cash on hand ratio are above the 75th percentile when compared with other accredited CCRCs around the country. This is considered an exemplary rating. (1.F.12.a.(1), 1.F.12.a.(2), 1.F.12.a.(3), 1.F.12.b.)

Opportunities for Quality Improvement

The CARF survey process identifies opportunities for continuous improvement, a core concept of “aspiring to excellence.” This section of the report lists the sections of the CARF standards that were applied on the survey, including a description of the business practice area and/or the specific program(s)/service(s) surveyed and a summary of the key areas addressed in that section of the standards.

In this section of the report, a recommendation identifies any standard for which CARF determined that the organization did not meet the minimum requirements to demonstrate full conformance. All recommendations must be addressed in a QIP submitted to CARF.

In addition, consultation may be provided for areas of or specific standards where the surveyor(s) documented suggestions that the organization may consider to improve its business or service delivery practices. Note that consultation may be offered for areas of specific standards that do not have any recommendations. Such consultation does not indicate nonconformance to the standards; it is intended to offer ideas that the organization might find helpful in its ongoing quality improvement efforts. The organization is not required to address consultation.

When CARF surveyors visit an organization, their role is that of independent peer reviewers, and their goal is not only to gather and assess information to determine conformance to the standards, but also to engage in relevant and meaningful consultative dialogue. Not all consultation or suggestions discussed during the survey are noted in this report. The organization is encouraged to review any notes made during the survey and consider the consultation or suggestions that were discussed.

During the process of preparing for a CARF accreditation survey, an organization may conduct a detailed self-assessment and engage in deliberations and discussions within the organization as well as with external stakeholders as it considers ways to implement and use the standards to guide its quality improvement efforts. The organization is encouraged to review these discussions and deliberations as it considers ways to implement innovative changes and further advance its business and service delivery practices.

Section 1. ASPIRE to Excellence®

1.A. Leadership

Description

CARF-accredited organizations identify leadership that embraces the values of accountability and responsibility to the individual organization's stated mission. The leadership demonstrates corporate social responsibility.

Key Areas Addressed

- Leadership structure and responsibilities
- Person-centered philosophy
- Organizational guidance
- Leadership accessibility
- Cultural competency and diversity
- Corporate responsibility
- Organizational fundraising, if applicable

Recommendations

There are no recommendations in this area.

1.B. Governance

Description

The governing board should provide effective and ethical governance leadership on behalf of its owners'/stakeholders' interest to ensure that the organization focuses on its purpose and outcomes for persons served, resulting in the organization's long-term success and stability. The board is responsible for ensuring that the organization is managed effectively, efficiently, and ethically by the organization's executive leadership through

defined governance accountability mechanisms. These mechanisms include, but are not limited to, an adopted governance framework defined by written governance policies and demonstrated practices; active and timely review of organizational performance and that of the executive leadership; and the demarcation of duties between the board and executive leadership to ensure that organizational strategies, plans, decisions, and actions are delegated to the resource that would best advance the interests and performance of the organization over the long term and manage the organization's inherent risks. The board has additional responsibilities under the domain of public trust, and as such, it understands its corporate responsibility to the organization's employees, providers, suppliers, and the communities it serves.

Key Areas Addressed

- Ethical, active, and accountable governance
- Board selection, orientation, development, leadership, structure, and performance
- Linkage between governance and executive leadership
- Board meetings and committee work
- Executive leadership development, evaluation, and compensation

Recommendations

There are no recommendations in this area.

1.C. Strategic Planning

Description

CARF-accredited organizations establish a foundation for success through strategic planning focused on taking advantage of strengths and opportunities and addressing weaknesses and threats.

Key Areas Addressed

- Environmental considerations
- Strategic plan development, implementation, and periodic review

Recommendations

There are no recommendations in this area.

1.D. Input from Persons Served and Other Stakeholders

Description

CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in this subsection direct the organization's focus to soliciting, collecting, analyzing, and using input from all stakeholders to create services that meet or exceed the expectations of the persons served, the community, and other stakeholders.

Key Areas Addressed

- Collection of input from persons served, personnel, and other stakeholders
- Integration of input into business practices and planning

Recommendations

There are no recommendations in this area.

1.E. Legal Requirements

Description

CARF-accredited organizations comply with all legal and regulatory requirements.

Key Areas Addressed

- Compliance with obligations
- Response to legal action
- Confidentiality and security of records

Recommendations

There are no recommendations in this area.

1.F. Financial Planning and Management

Description

CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency.

Key Areas Addressed

- Budgets
- Review of financial results and relevant factors
- Fiscal policies and procedures
- Reviews of bills for services and fee structures, if applicable
- Review/audit of financial statements
- Safeguarding funds of persons served, if applicable

Recommendations

There are no recommendations in this area.

1.G. Risk Management

Description

CARF-accredited organizations engage in a coordinated set of activities designed to control threats to their people, property, income, goodwill, and ability to accomplish goals.

Key Areas Addressed

- Risk management plan implementation and periodic review
- Adequate insurance coverage
- Media relations and social media procedures
- Reviews of contract services

Recommendations

There are no recommendations in this area.

1.H. Health and Safety

Description

CARF-accredited organizations maintain healthy, safe, and clean environments that support quality services and minimize risk of harm to persons served, personnel, and other stakeholders.

Key Areas Addressed

- Healthy and safe environment
- Competency-based training on health and safety procedures and practices
- Emergency and evacuation procedures
- Access to first aid and emergency information
- Critical incidents
- Infections and communicable diseases
- Health and safety inspections

Recommendations

There are no recommendations in this area.

Consultation

- Although evacuation routes are accessible and clearly understandable, it is suggested that leadership consider lowering the evacuation maps to allow persons who use a wheelchair better access for viewing.

1.I. Workforce Development and Management

Description

CARF-accredited organizations demonstrate that they value their human resources and focus on aligning and linking human resources processes, procedures, and initiatives with the strategic objectives of the organization. Organizational effectiveness depends on the organization's ability to develop and manage the knowledge, skills, abilities, and behavioral expectations of its workforce. The organization describes its workforce, which is often composed of a diverse blend of human resources. Effective workforce development and management promote engagement and organizational sustainability and foster an environment that promotes the provision of services that center on enhancing the lives of persons served.

Key Areas Addressed

- Composition of workforce
- Ongoing workforce planning
- Verification of backgrounds/credentials/fitness for duty
- Workforce engagement and development
- Performance appraisals
- Succession planning

Recommendations

There are no recommendations in this area.

Consultation

- The leadership team may want to consider more opportunities to offer expressions of appreciation for the work the staff does. These could be simple things such as giving staff members spontaneous treats of donuts or pizza. To help staff members deal with the everyday stress of their responsibilities, leadership may want to consider having a meditation room or a quiet room where staff can go.

1.J. Technology

Description

Guided by leadership and a shared vision, CARF-accredited organizations are committed to exploring and, within their resources, acquiring and implementing technology systems and solutions that will support and enhance:

- Business processes and practices.
- Privacy and security of protected information.
- Service delivery.
- Performance management and improvement.
- Satisfaction of persons served, personnel, and other stakeholders.

Key Areas Addressed

- Ongoing assessment of technology and data use, including input from stakeholders
- Technology and system plan implementation and periodic review
- Technology policies and procedures
- Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
- ICT instruction and training, if applicable
- Provision of information related to ICT, if applicable
- Maintenance of ICT equipment, if applicable
- Emergency procedures that address unique aspects of service delivery via ICT, if applicable

Recommendations

There are no recommendations in this area.

1.K. Rights of Persons Served

Description

CARF-accredited organizations protect and promote the rights of all persons served. This commitment guides the delivery of services and ongoing interactions with the persons served.

Key Areas Addressed

- Policies that promote rights of persons served
- Communication of rights to persons served
- Formal complaints by persons served

Recommendations

There are no recommendations in this area.

1.L. Accessibility

Description

CARF-accredited organizations promote accessibility and the removal of barriers for the persons served and other stakeholders.

Key Areas Addressed

- Assessment of accessibility needs and identification of barriers
- Accessibility plan implementation and periodic review
- Requests for reasonable accommodations

Recommendations

There are no recommendations in this area.

Consultation

- AFRH-G holds a Resident Accessibility Focus Group meeting annually to discuss accessibility issues and concerns with residents. Recently, these meetings have had very low attendance. The organization may want to consider putting this meeting aside and incorporating discussions on accessibility into other meetings such as a resident town hall or small group chats.

1.M. Performance Measurement and Management

Description

CARF-accredited organizations demonstrate a culture of accountability by developing and implementing performance measurement and management plans that produce information an organization can act on to improve results for the persons served, other stakeholders, and the organization itself.

The foundation for successful performance measurement and management includes:

- Leadership accountability and support.
- Mission-driven measurement.
- A focus on results achieved for the persons served.
- Meaningful engagement of stakeholders.
- An understanding of extenuating and influencing factors that may impact performance.
- A workforce that is knowledgeable about and engaged in performance measurement and management.
- An investment in resources to implement performance measurement and management.
- Measurement and management of business functions to sustain and enhance the organization.

Key Areas Addressed

- Leadership accountability for performance measurement and management
- Identification of gaps and opportunities related to performance measurement and management
- Input from stakeholders
- Performance measurement and management plan
- Identification of objectives and performance indicators for service delivery
- Identification of objectives and performance indicators for priority business functions
- Personnel training on performance measurement and management

Recommendations

There are no recommendations in this area.

Consultation

- Although ARFH-G has an effective resident satisfaction survey that gathers information from residents in the independent living, Independent Living Plus, assisted living, and long-term care settings, there is no formal or consistent program in place to gather satisfaction information from the residents in the memory support setting. It is suggested that the organization develop tools to use to accomplish this task. These tools may involve getting feedback from staff or residents' families in addition to the residents themselves, as well as objective measures of satisfaction (e.g., reduction in distressed behavior, quantity of food consumed).

1.N. Performance Improvement

Description

CARF-accredited organizations demonstrate a culture of performance improvement through their commitment to proactive and ongoing review, analysis, reflection on their results in both service delivery and business functions, and transparency. The results of performance analysis are used to identify and implement data-driven actions to improve the quality of programs and services and to inform decision making. Performance information that is accurate and understandable to the target audience is shared with persons served, personnel, and other stakeholders in accordance with their interests and needs.

Key Areas Addressed

- Analysis of service delivery performance
- Analysis of business function performance
- Identification of areas needing performance improvement
- Implementation of action plans
- Use of performance information to improve program/service quality and make decisions
- Communication of performance information

Recommendations

There are no recommendations in this area.

Section 2. Care Process for the Persons Served

2.A. Program/Service Structure

Key Areas Addressed

- Scope of the program
- Entry, transition, exit criteria of the program
- Composition of the service delivery team
- Service delivery team communication
- Person-centered planning
- Provision of services to persons served
- Partnering with families/support systems

Recommendations

2.A.27.a.

2.A.27.b.

2.A.27.c.(1)

2.A.27.c.(2)

2.A.27.c.(3)

2.A.27.c.(4)

2.A.27.c.(5)

2.A.27.c.(6)

2.A.27.c.(7)

2.A.27.c.(8)

While there is a policy in place addressing the use of physical restraints, there is no corresponding policy for the use of chemical restraints. It is recommended that the organization develop such a policy that includes prevention of unsafe behaviors and alternative interventions used in an effort to avoid the use of chemical restraints. If AFRH-G uses chemical restraints, the policy should address the use of chemical restraints only after nonpharmacological approaches have been exhausted, the use of chemical restraints only temporarily in an emergency to protect the resident or others from injury or serious harm, who is responsible to authorize use of chemical restraints, time-limited use, disclosure when used, strategies for discontinuation, reviews for discontinuation, and documentation in the records of the resident.

Consultation

- While weekly menu information is posted for residents living independently and in assisted living, information about food choices for residents in memory support and long-term care are provided on a daily basis. It is suggested that these residents and visiting family members have access to weekly menu information on these units.

2.B. Residential Communities

Key Areas Addressed

- Service delivery planning in a congregate residential program
- Medication management/assistance
- Contracting for outside services
- Safety and security of the living environment
- Procedures for medications and controlled substances

Recommendations

There are no recommendations in this area.

2.C. Care Process for Specific Diagnostic Categories

Key Areas Addressed

- Adequately addressing the complex needs of individuals with dementia
- Person-centered approach to service delivery
- Positive, therapeutic approach to behavior
- Primary areas of education and support needed for personnel, families and support systems, and all stakeholders to meet the needs of individuals with dementia

Recommendations

There are no recommendations in this area.

Consultation

- While there is some education provided to staff, residents, families, and volunteers on the required elements, the organization relies heavily on online content in Medline. It is suggested that management staff responsible for dementia education incorporate other virtual and, when available, live inservice options.

2.D. Skin Integrity and Wound Care Standards

Key Areas Addressed

- Written procedures to address skin integrity and wound care
- Written protocols for wound care needs that are within the scope of the program
- Referrals to appropriate healthcare professionals to address wound care needs that are outside the scope of the program
- Initial and ongoing assessments of persons served
- Documented competency-based training for personnel related to skin integrity and wound management
- Data collection and analysis

Recommendations

2.D.1.e.

Although there are extensive policies and procedures on wound care management, referrals to an outside wound care program are not included. It is recommended that the program implement written procedures to address skin integrity and wound care, including procedures for referral if assessment or management is outside the scope of the program.

Section 3. Program Specific Standards

3.H. Continuing Care Retirement Community

Description

Continuing Care Retirement Communities (CCRCs) foster a culture of independence, safety, and community. These types of communities might also be known as Life Plan Communities. They include a tiered approach to services that are offered in multiple levels of care including independent living and assisted living and/or skilled nursing care. Persons served reside in residential living settings that may include single family homes, cottages, apartments, and/or condominiums, usually on one campus.

Entry to the CCRC and the provision of services and amenities are addressed in accordance with a written agreement between the CCRC and the person served. In addition to housing, communal services may include dining, transportation, wellness activities, health services, and a range of other supportive services. The CCRC strives for seamless transitions between levels of care, balancing the preferences with the needs of the persons served. A spirit of community with a focus on wellness combine to enhance the quality of life for the persons served.

Key Areas Addressed

- Identifying how the CCRC's continuum is structured
- Access to levels of care
- Implementing seamless service delivery

Recommendations

There are no recommendations in this area.

Program(s)/Service(s) by Location

Armed Forces Retirement Home - Gulfport

1800 Beach Drive
Gulfport, MS 39507-1508

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