CARF Accreditation Report

for

Armed Forces Retirement Home - Washington

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 - Washington
3700 North Capitol Street NW
Washington, DC 20011-8400

Organizational Leadership

John RisCassi, Chief Operating Officer
Lakesia Campbell, CPHQ, Performance Improvement Officer
Maurice Swinton, Deputy Chief Operating Officer
Robert McAndrews, Facility Administrator
Stephen Rippe, CEO

Survey Number

211052

Survey Date(s)

August 17, 2026–August 19, 2026

Surveyor(s)

Maureen Parrish, Administrative
Donna Taylor, NHA, Program
Ann O'Malley, Virtual Finance

Program(s)/Service(s) Surveyed

Continuing Care Retirement Community

Previous Survey

September 27, 2021–September 29, 2021
Five-Year Accreditation

Accreditation Decision

Five-Year Accreditation

Expiration: August 31, 2031

Executive Summary

This report contains the findings of CARF's site survey of Armed Forces Retirement Home - Washington conducted August 17, 2026–August 19, 2026. 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 - Washington demonstrated substantial conformance to the standards. The organization is committed to creating a welcoming, service-oriented community through its engaging, warm, and professional staff and the presence of strong, visible leadership that is focused on continuous improvement. The preservation of its historic campus buildings, coupled with well-maintained interior common spaces and attractive exterior vistas, provides persons served with an environment that supports comfort, dignity, and a meaningful quality of life. The organization's proactive approach to care and wraparound services further contributes to a positive onboarding experience and supports residents as they transition through the continuum of services or pursue the opportunity to age gracefully in place. Opportunities for improvement include the development and implementation of artificial or augmented intelligence (AI) policies and continued attention to identified elements related to health and safety, rights of persons served, and program/service structure.

Armed Forces Retirement Home - Washington appears likely to maintain and/or improve its current method of operation and demonstrates a commitment to ongoing quality improvement. Armed Forces Retirement Home - Washington 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 - Washington 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 - Washington was conducted by the following CARF surveyor(s):

- Maureen Parrish, Administrative
- Donna Taylor, NHA, Program
- Ann O'Malley, 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 - Washington 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 - Washington demonstrated the following strengths:

- Armed Forces Retirement Home - Washington boasts an immersive and historically significant campus. This expansive and well-manicured environment provides a distinctive and meaningful connection for residents to their previous military service while offering a comfortable transition into senior living.
- The organization's spacious, thoughtfully designed buildings are tailored to the needs and preferences of the residents, featuring open architecture, expansive windows, high ceilings, and generously sized common areas. These inviting environments promote natural light, connection, accessibility, and opportunities for residents to comfortably engage with one another and their surroundings.
- The organization benefits from a cohesive and dynamic leadership team that maintains a visible and meaningful presence with residents. Leaders demonstrate genuine engagement with the resident population and consistently translate their commitment into responsive, resident-centered practices, where residents feel not just cared for but also cared about.

- Residents and family members consistently described a strong sense of satisfaction, trust, and confidence in the community and the care provided. Residents reported that staff members know their names, preferences, and routines, contributing to a strong sense of belonging and community.
- The strategic plan identifies campus improvement opportunities that are likely to support future sustainability with a funding plan and the resources necessary to implement those strategies. Additionally, it identifies specific strategic initiatives (such as technology, workforce development, and undeveloped real estate) as strategic assets of the organization and notes how they can be utilized to successfully implement the strategic plan and the various underlying strategic initiatives.
- The goals of the individual campuses and the staff performance goals are in alignment with the overall strategic goals of the organization's strategic plan.
- The Resident Advisory Committee (RAC) provides a structured forum through which residents communicate needs, concerns, and recommendations. Residents shared multiple examples of leadership responding to input from RAC and collaborating on initiatives that enhance daily life and community engagement.
- The organization has a comprehensive capital plan that identifies the significant projects that are necessary to modernize the campus and the infrastructure. The organization has been able to identify the various funding sources that can support the underlying projects, which is a credit to management given the nature of the funding sources and the organization's inability to access the capital markets and take on debt.
- The organization's risk management program incorporates quality measures and reports for all contracted services that are reviewed and evaluated on a consistent monthly basis.
- The organization and its leadership have thoughtfully integrated performance evaluation and appraisal into the beginning of the employee lifecycle. This approach establishes clear expectations from the outset and provides a consistent foundation for an ongoing feedback loop, professional development, accountability, and performance improvement.
- The staff demonstrates a genuine spirit of hospitality and has cultivated deep, meaningful relationships with residents. The staff's evident pride in the work has created a welcoming community in which residents are treated with dignity and respect. Staff members' enthusiastic declaration that they "would never want to work anywhere else" further reflects the strong sense of belonging and commitment to the organization and its resident population.
- The organization has established a well-developed and integrated performance improvement process that extends across departments and promotes shared accountability for outcomes. This collaborative approach has united the staff and leadership in the pursuit of excellence, fostering continuous learning, cross-functional engagement, and a sustained focus on improving the quality of services.
- The Wellness Center provides an integrated and responsive resource for residents and staff through timely clinical assessment, support, and follow-up and a comprehensive continuum of on-site services, including primary care, dental, mental health, optometry, pharmacy, ophthalmology, medication disposal, podiatry, phlebotomy, and rehabilitation services. Medical personnel coordinate care with external providers, and transportation services support resident access to specialty and veteran healthcare resources throughout the region.
- Residents benefit from on-site access to physicians and nurse practitioners while maintaining the freedom to select primary care providers in the community. The chief medical officer facilitates coordination among internal and external healthcare providers to support continuity of care.
- The organization offers an extensive array of recreational, educational, social, and wellness opportunities that support resident engagement and quality of life. Residents have access to diverse amenities, including an indoor pool, a fitness center, an artists' colony, a woodworking center, a theater, a library, a computer lab, chapels, a salon, a golf course, a driving range, and stocked fishing ponds. In addition, the residents have their own amateur radio association.

- Dining services provide residents with a variety of daily meal options designed by two licensed dietitians. Nutritional counseling and individualized meal accommodations are available to support specialized dietary needs, including diabetic, gluten-free, and other medically indicated diets.
- The Scott Building's thoughtfully curated display of resident-donated memorabilia provides a meaningful reflection of residents' service and personal histories. The collection honors their contributions and sacrifices while creating an environment in which residents feel recognized, valued, and appreciated, and visitors are invited to better understand and connect with the community's rich legacy.
- The organization embraces and actively encourages its resident artist colony, creating meaningful opportunities for residents to express their creativity and share their talents. The prominent display of resident artwork throughout the campus celebrates individual accomplishments and reinforces the organization's appreciation for the unique contributions of the residents.
- Residents have access to hospice services, when desired. The Last Roll Call display honors deceased residents through photographs and military service information, reflecting the community's respect for residents' lives, service, and longstanding relationships developed during their time at the organization.

Armed Forces Retirement Home - Washington 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.10.a.(1), 1.F.10.a.(2), 1.F.10.a.(3), 1.F.10.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
- Use of artificial or augmented intelligence
- Corporate responsibility
- Organizational fundraising, if applicable

Recommendations

1.A.5.a.(1)
1.A.5.a.(2)(a)
1.A.5.a.(2)(b)
1.A.5.a.(3)
1.A.5.a.(4)
1.A.5.a.(5)
1.A.5.a.(6)(a)
1.A.5.a.(6)(b)
1.A.5.b.
1.A.5.c.
The organization uses AI within its operations; however, it has not yet implemented policies and written procedures. If the organization uses AI, it should implement policies and written procedures that include how the organization uses AI, disclosure to the persons served regarding the use of AI in service delivery and for health data analysis and processing, privacy of health information, protection of sensitive data, human oversight/accountability, and what constitutes an incident requiring a response within the organization and to the person(s) served. The policies and procedures should be reviewed at least annually and be updated as needed.

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

Recommendations

There are no recommendations in this area.

Consultation

- Although the organization reports that fiscal policies and written procedures are reviewed on an annual basis, it may be helpful to document the dates of review for consistent tracking.

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

1.H.5.a.(5)
1.H.5.c.(9)
The organization does maintain written emergency procedures for medical emergencies. However, it does not have procedures for events occurring on the resident transportation vehicles, and it does not have updated contact numbers for emergencies. It is recommended that there be comprehensive written emergency procedures for medical emergencies and that address emergency phone numbers.

1.H.13.b.
1.H.13.e.
1.H.13.h.
1.H.13.j.
The organization's drivers are put through an intensive onboarding and orientation process, including an initial review of their driving record; however, the organization does not conduct a review of driving records for all drivers after the initial one. There is also evidence of safety equipment, but a fire extinguisher in a vehicle was noted to be leaking, which could compromise safety. The organization's vehicles have a roadside assistance number attached to the dashboard, but there was no evidence of written emergency procedures in the vehicles. Also, first aid supplies were noted to be expired and dated from 2023. It is recommended that, when transportation is provided for persons served, there be evidence of regular review of driving records of all drivers, safety equipment, written emergency procedures available in the vehicle(s), and first aid supplies available in the vehicle(s). The organization may wish to conduct a more frequent inspection of fire extinguishers specifically and mount them in an overt and easy-to-access area of each vehicle.

Consultation

- The organization demonstrates a strong commitment to emergency preparedness by conducting unannounced testing of each emergency procedure across all shifts throughout the year. To further strengthen the effectiveness and authenticity of these exercises, the organization might consider varying the timing of drills to avoid predictable patterns which, in turn, could create an environment with more realistic assessment of staff readiness as the team responds under different circumstances.

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

1.I.8.b.
The organization has a process to include documented assessment of competencies; however, there was no evidence that personnel records had any completed documentation for required competencies. It is recommended that workforce development activities include documented assessment of competencies.

1.J. 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

1.J.1.c.(4)
1.J.1.c.(6)
The organization has policies promoting the rights of the residents, and it has a residents' bill of rights. However, there is no mention of freedom from humiliation and discrimination included in the current polices. The organization should implement policies promoting the right of the residents to freedom from humiliation and discrimination.

1.K. 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.

1.L. 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.

1.M. 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

Description

For an organization to achieve quality services, the persons served are active participants in the planning, implementation, and ongoing review and revision of the services offered. The organization's commitment to quality and the involvement of the persons served spans the entire time that the persons served are involved with services. Persons served are treated with dignity and respect, have access to needed services that achieve optimum outcomes, and are empowered to exercise informed choice.

2.A. Program/Service Structure

Description

A fundamental responsibility of the organization is to provide a comprehensive program structure. The staffing is designed to maximize opportunities for the persons served to obtain and participate in the services provided.

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.1.a.(9)
The organization provides some services with contract staff members, such as transportation, dining, facilities, and housekeeping. This information is not consistently provided in the resident guide or other resources for residents and other stakeholders. It is recommended that each program/service document, regarding its scope of services, the specific services offered, including whether the services are provided directly, by contract, or by referral. The organization may wish to review the current resident guide for accuracy.

Consultation

- The organization is encouraged to evaluate opportunities to strengthen communication with families about upcoming activities and special events. Potential approaches could include direct email communications or increased education regarding existing communication resources. Discussions with families indicated that they are aware of some community activities; however, advance notice and more direct communications regarding specific events may help families encourage their loved ones to participate or even attend special events.

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.

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

There are no recommendations in this area.

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 - Washington

3700 North Capitol Street NW
Washington, DC 20011-8400

Continuing Care Retirement Community