

LONG TERM CARE COMMUNITY COALITION

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Assisted Living Fact Sheet: Dementia Care

About 70 percent of assisted living residents live with Alzheimer's Disease or some form of dementia.¹ While nursing homes have federal requirements related to dementia care and staff proficiency, there are no federal safety standards for assisted living. As a result, meaningful policies and practices to address the needs of individuals suffering from dementia are, too often, lacking. In fact, a recent study found that, while two-thirds of sampled assisted living facility (ALF) residents had dementia, staff only identified 40 percent of these residents.²

To better address the needs of this large and growing population in assisted living, it is essential that ALFs that accept and/or retain individuals with dementia ensure that their staff have appropriate training, that physical environments are safe, and that social and other programs are tailored to meet the psycho-social needs of these individuals.

LTCCC has conducted a nationwide analysis of best practices in assisted living and has published a report with recommendations for improving resident health, safety, and well-being. The following are some key recommendations for assisted living dementia care and safety from our report, [*Assisted Living: Promising Policies and Practices for Improving Resident Health, Quality of Life, and Safety*](#). Following the recommendations is a map charting which states have dementia care standards for their ALFs.

Recommendations

1. Provide dementia safe and friendly physical environment

- Ensure that areas of the facility to which residents with dementia (or other cognitive impairment) have access have secured entrances and exit ways, appropriate pathways, and lighting suitable for individuals with dementia.
- Room doors and interiors should be individualized to help residents recognize their own rooms.
- Room furnishings should be personalized, to the extent possible, to provide a familiar and comfortable environment.
- ALFs that accept and/or retain individuals with dementia should be expected to provide "aging-in-place" within their facilities for residents, by enabling residents with dementia to safely remain in their apartment or room. In particular, appropriate services should be brought to the resident in his/her home, rather than forcing residents with dementia to undergo a potentially confusing and stressful move to a special floor or unit.

¹ Kaskie, Brian P., Nattinger, Matthew, & Potter, Andrew, *Policies to Protect Persons With Dementia in Assisted Living: Déjà Vu All Over Again?* 55 *The Gerontologist* 199-209 (2015), <http://doi.org/10.1093/geront/gnu179>.

² *Id.*

2. Staffing

- ACFs that provide care to residents with dementia should provide at least three hours of direct care staff time per resident per day.
- Staff should be present in the facility and awake, with the ability to monitor residents, 24-hours per day.
- A registered nurse (RN) must be employed and in the building at least one shift a day, 7-days a week, with access to an RN available at all other times.

3. Staff training

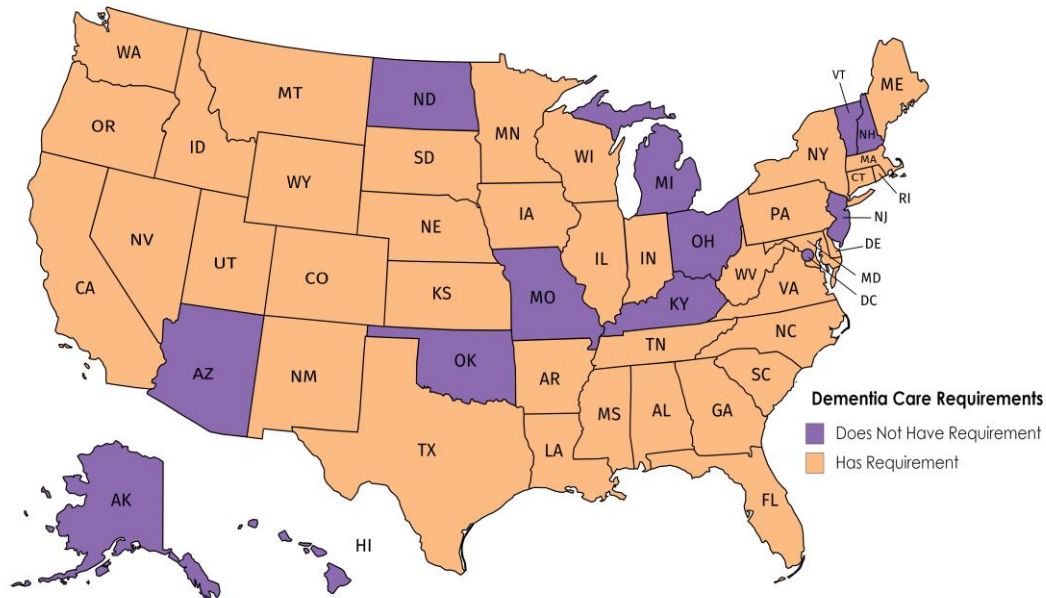
- Administrators and direct care workers (DCWs) should undergo, respectively, a minimum of 12 and four hours of initial training (within 30 days of employment) in dementia care.
- DCWs should undertake a minimum of eight hours of in-service training on dementia care annually.
- Administrators and other staff in the facility that are in contact with residents with dementia (including laundry, food service, social work, and janitorial staff) should undertake a minimum of four hours of dementia care training annually.
- Training should include: understanding cognitive impairment, behavioral and psychological symptoms of dementia, communication with individuals who have dementia, identifying and addressing incidents of abuse and neglect towards residents with dementia, and non-pharmacological approaches and other standards of dementia care.

4. Public disclosures

- All marketing materials and residency agreements should clearly articulate the scope of dementia care services provided, the licensure or certification of those providing these services, and designate any services for which an additional fee might be incurred.

Map of State Requirements

- 38 states have regulations on providing care for residents with dementia. 12 states and the District of Columbia do not have any regulation listed. Note: The type of training (i.e., initial or annual), content, and hours required differ between states.
- States may specifically require that the direct care workers (DCWs) who would provide services to residents with dementia have a license.



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Further Reading

1. LTCCC's 2018 report, *Assisted Living: Promising Policies and Practices*, provides a more comprehensive review of state policies, recommendations, and example language for use in future policy making. See <https://nursinghome411.org/ltccc-report-assisted-living-promising-policies-and-practices/>.
2. A corresponding Excel document compares the states by their regulation policies. See <https://nursinghome411.org/assisted-living-state-requirements-chart/>.
3. *Policies to Protect Persons With Dementia in Assisted Living: Déjà Vu All Over Again?* provides an overview of the state of dementia care in assisted living facilities. See <http://doi.org/10.1093/geront/gnu179>.

Note: This document is the work of LTCCC. It does not necessarily reflect the views of the Department of Health, nor has the Department verified the accuracy of its content.

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