

HILLCREST

<i>Policy Title:</i> Admission Guidelines	
<i>Manual Name:</i>	<i>Policy #:</i> BD-004
<i>Approved By:</i> Board of Directors	<i>Approved:</i> May 14, 2014
<i>Source or Citation:</i>	Revised: November 18, 2020; Revised: May 6, 2026

POLICY:

Hillcrest accepts applications for residency from persons age 62 years or older, or in the case of a couple, one of the two persons age 62 years or older. Eligible applicants will be considered without regard to race, ethnic identity, national origin, color, faith tradition (or absence thereof), sexual orientation, gender identity or expression, political beliefs, disability or ancestry. Eligible applicants must submit all required documentation and will be evaluated upon admission and throughout their stay to determine their appropriate level of living.

ATTACHMENTS:

None

PROCEDURE:

1. Future prospective residents complete the Priority Date Agreement and pay the non-refundable processing fee. Their name is placed on the Active Registrant List in chronological order of the Priority Date Agreement.
2. To select a specific unit a future prospective resident completes a Reservation Agreement and pays a refundable deposit, which holds the home for 60 days.
3. After meeting with a member of the Hillcrest Marketing Team each prospective applicant is requested to submit a completed Confidential Application for Admission, Medical Assessment for Residential Care Facilities for the Elderly LIC602A, and the Resident Appraisal form LIC603.
4. Applicants will be scheduled for an assessment by a member of Hillcrest's clinical staff to determine the appropriate level of living.
5. Once on the Active Registrant List, Active Registrant(s) will be notified of the availability of the type of accommodation they desire. Current Hillcrest residents receive priority in reserving available accommodations based on prior written selection or medical/physical needs. Accommodations are offered to active registrants and residents in accordance with their individual Priority Date. Active registrants may refuse an accommodation without changing the standing of their Priority Date Agreement.
6. Hillcrest will only be able to retain a resident in a specific level of care whose needs are best met within the definition of that level of care.

7. A resident may transfer to another home within the same level of care. Transfer fees will be waived when the transfer is required by Hillcrest.
8. All residents must be established with a local Licensed Professional (including physicians, physician assistants, and nurse practitioners) to provide ongoing healthcare within 60 days of admission.

APPLICATION DOCUMENTS:

- Priority Date Agreement: A standard form completed for all registrants. It includes a non-refundable processing fee that designates a priority date and adds registrants to the active wait list.
- Reservation Agreement: A standard form completed for all registrants. It includes a refundable fee that reserves a selected unit for up to sixty (60) days or upon completion.
- Confidential Application for Admission: A standard form that provides Hillcrest with basic personal and health information along with a comprehensive financial statement completed by the registrant.
- Medical Assessment for Residential Care for the Elderly (LIC602A): A State-required form completed by the registrant's personal physician complete to help determine the appropriate level of living.
- Resident Preplacement Appraisal Form (LIC603): A State-required form completed by the registrant that provides Hillcrest with information about the registrant's interests, current physical and mental health, abilities, and needs.
- Resident Privacy Preferences: A standard form completed by the registrant that informs Hillcrest of the registrant's preferences related to privacy.
- Resident Information and Preference Form: A standard form completed by the registrant that provides important contact information and personal history.
- Biography Form: A standard form completed by the registrant that provides Hillcrest with information about the registrant's background and special interests.

DEFINITIONS:

ADMISSION GUIDELINES FOR RESIDENTIAL LIVING (Independent Living)

Hillcrest accepts applications from persons age 62 years or older, or in the case of a couple or co-occupant, one of the two persons age 62 years or older. Eligible applicants will be considered without regard to race, ethnic identity, national origin, color, faith tradition (or absence thereof), sexual orientation, gender identity or expression, political beliefs, disability or ancestry. Residential Living applicants may choose the residency contract which best meets their needs.

Eligible applicants must demonstrate that they are able to care for themselves. This includes, but is not limited to, the following. Independent Living residents are

1. Oriented to time, place and person.
2. Capable of understanding and following community living rules, especially those relating to emergency procedures and safety.
3. Able to communicate reliably and effectively with others, particularly with respect to meeting one's own needs of living and following emergency procedures.
4. Demonstrate socially appropriate behavior in common areas.

5. Able to function appropriately in the dining room setting or ability to prepare all meals in the home.
6. Able to care for personal needs including self-management of medications, dressing, bathing, grooming, toileting, etc.

Accommodations in Independent Living are all licensed as nonambulatory. To comply with the Department of Social Services requirements, these guidelines must be met:

- Ambulatory residents must have the ability to: 1) move about safely and adequately throughout the community *without* assistive devices; 2) transfer from bed to chair or toilet without assistance; 3) care for personal needs including dressing, bathing and grooming with minimal assistance; 4) demonstrate the ability to exit a building without the assistance or guidance of any other person or without the use of any mechanical aid in an emergency;

Please Note: A resident is assessed to be 'nonambulatory' as defined by California Health and Safety Code and his/her current residence does not have a State Fire Marshal clearance for nonambulatory use. The definition of nonambulatory residents includes "...persons unable to leave a building unassisted under emergency conditions. It includes any person who is unable, or likely to be unable, to physically and mentally respond to a sensory signal approved by the State Fire Marshal, or an oral instruction relating to fire danger, and persons who depend upon mechanical aids such as crutches, walkers, and wheelchairs." (California Health and Safety Code, Section 13131). A list of homes approved by the Fire Authority as nonambulatory is available at the Administration Offices.

- Nonambulatory residents must have the ability to: 1) move about safely and adequately throughout the community *with or without* assistive devices (cane, walker, wheelchair, crutches, etc.); 2) transfer from bed to chair, on and off commode; 3) attend meals in the dining room, etc. 4) Nonambulatory residents are not required to demonstrate the ability to exit the building in an emergency unassisted.

If a resident's physical, medical, or mental status declines such that he or she no longer meets the above requirements, an interdisciplinary team will review the resident's circumstances to ensure the resident resides in the most appropriate level of care.

The eligibility requirements for Independent Living are reviewed with the applicant prior to completing their initial application.

Upon transfer, residents will be asked to complete a financial update and will sign the appropriate amendment to their contract.

The resident accepts and agrees to comply with Hillcrest's rules and regulations as currently required, or as amended in the future. Management will make every reasonable attempt to communicate changes.

ADMISSION GUIDELINES FOR ASSISTED LIVING

Hillcrest accepts applications from persons age 62 years or older, or in the case of a couple or co-occupant, one of the two persons age 62 years or older. Eligible applicants will be considered without regard to race, ethnic identity, national origin, color, faith tradition (or absence thereof), sexual orientation, gender identity or expression, political beliefs, disability or ancestry. New residents complete the Monthly Care Agreement while existing residents sign an amendment to their Residential Living contract when transferring to this level of care. See the Transfer and Review Procedures for residents moving from one level of care to another.

Eligible applicants must demonstrate that they meet the admissions criteria, which include, but are not limited to, the following Assisted Living residents:

1. Are generally alert and oriented to time, place and person. Short-term memory loss or forgetfulness is acceptable.
2. Display acceptable behavior and interact appropriately with others.
3. Demonstrate safety awareness, be able to respond appropriately, and follow directions from staff during an emergency.
4. Accommodations in Assisted Living are licensed nonambulatory.
 - Nonambulatory residents must have the ability to: 1) move about safely and adequately throughout the community *with or without* assistive devices (cane, walker, wheelchair, crutches, etc.); 2) transfer from bed to chair, on and off commode; 3) attend meals in the dining room, etc. 4) Nonambulatory residents are not required to demonstrate the ability to exit the building in an emergency unassisted.

Meals may be delivered from the dining room, when necessary, upon consent of the Assisted Living Nurse. Residents are encouraged to participate in the meal program provided in the dining room.

If a resident's physical, medical, or mental status declines such that he or she no longer meets the above requirements, an interdisciplinary team will review the resident's circumstances to assure the resident resides in the most appropriate level of care.

The eligibility requirements for Assisted Living are reviewed with the applicant prior to completing their initial application.

Upon transfer, residents will be asked to complete a financial update and will sign the appropriate amendment to their contract.

The resident accepts and agrees to comply with Hillcrest's rules and regulations as currently required, or as amended in the future.

ADMISSION GUIDELINES FOR SOUTHWOODS LODGE

Hillcrest accepts applications from persons age 62 years or older, or in the case of a couple or co-occupant, one of the two persons age 62 years or older. Eligible applicants will be considered without regard to race, ethnic identity, national origin, color, faith tradition (or absence thereof), sexual orientation, gender identity or expression, political beliefs, disability or ancestry. New residents complete the Monthly Care Agreement while existing residents sign an amendment to their residential contract when transferring to this level of care.

Southwoods Lodge is a social model environment, and residents must have the ability to ambulate and to attend activities with some physical and social interaction with other residents. The concept is to create self-esteem and a home-like environment with an opportunity for a good quality of life.

Eligible applicants must demonstrate that they meet the admissions criteria, which includes, but is not limited to, the following:

Southwoods Lodge residents are:

1. Generally alert with some capability for structure and social interaction. Short-term memory loss or forgetfulness is acceptable. A diagnosis of mild cognitive impairment or major neurocognitive disorder, including but not limited to Alzheimer's Disease, vascular dementia, dementia with Lewy body, and frontotemporal lobar degeneration, is appropriate for placement.
2. Able to move about safely and adequately throughout the community, with or without assistive devices such as canes and walkers.
3. Able to transfer from bed to chair, or to toilet without physical assistance.
4. Able to care for personal needs including dressing, bathing, grooming, toileting (incontinence care), etc. with assistance.

If a resident's physical or mental status declines such that he or she no longer meets the above requirements, or no longer benefits from Southwoods Lodge programming, an interdisciplinary team will review the resident's circumstances to assure the resident resides in the most appropriate level of care.

The eligibility requirements for Memory Care in Assisted Living are reviewed with the applicant prior to completing their initial application.

Upon transfer, the resident's representative will be asked to complete a financial update and will sign the appropriate amendment to the resident's contract.

The resident's representative(s) accepts and agrees to comply with Hillcrest's rules and regulations as currently required, or as amended in the future.

ADMISSION GUIDELINES FOR WOODS HEALTH SERVICES

Hillcrest accepts residents into Woods Health Services without regard to race, ethnic identity, national origin, color, faith tradition (or absence thereof), sexual orientation, gender identity or expression, political beliefs, disability or ancestry. All applicants (or their representative) must complete a Woods Health Services Admission Agreement, including all necessary attachments required for admission.

Eligible applicants must demonstrate that they meet the admissions criteria, which includes, but is not limited to, the following:

1. All applicants (or their representative) must provide financial ability to cover expenses when admitted to Woods Health Services (e.g. HMO coverage, Blue Cross, Blue Shield, Medicare, Medi-Cal, long-term care insurance, income, etc.).
2. Each applicant must have a licensed physician who will follow their care throughout their stay at Woods Health Services. Their physician must be available 24 hours a day to call or provide an alternate physician to provide quality care for the resident in the primary care physician's absence. Applicant's physician agrees to see resident no less than once every 30 days.
3. Applicant must require custodial or skilled nursing care. This may include being confused; being unable to ambulate; requiring total care; utilizing adaptive equipment; being incontinent; requiring catheter or colostomy care; requiring oxygen; having special dietary needs; requiring physical, speech, or occupational therapy; and caring for a pacemaker.
4. The following diagnoses will be reviewed depending on available staffing or level of acuity and a decision made by Woods Health Services staff prior to an admission agreement: Hallucinations, nasogastric tube (NG-tube), gastrostomy tube (G-tube), total parenteral nutrition (TPN), and intravenous therapy (IV therapy).
5. The following diagnoses or conditions may or may not be appropriate for admission: Combative behavior, physically abusive, dialysis, decubiti (two or more), ventilator, vancomycin resistant enterococcus (VRE), methicillin resistant staphylococcus aureus (MRSA), or other conditions that may require isolation.

SHORT TERM STAYS AT WOODS HEALTH SERVICES

It is the policy of Woods Health Services to admit only those short-stay residents for which the community can provide the appropriate care and who also have the financial ability to cover their expenses. The community can admit short stay residents that require the following types of 24-hour skilled nursing care:

- IV therapy
- Gastrostomy tube feedings
- Naso-gastric tube feedings
- Catheter care
- Colostomy care
- Dialysis
- Ileostomy care
- Wound Care
- Isolation
- Physical therapy
- Occupational therapy
- Speech therapy
- Range of Motion
- Restorative feeding training
- Family training

The community cannot admit residents that require the following types of care:

- Residents with a history of wandering/elopement prevention
- Residents weighing over 300 pounds/bariatric care
- Residents with unmanaged psychiatric conditions
- Residents with a history of combative behavior
- Residents with a history of physically abusive behavior

STANDARDS FOR INVOLUNTARY RESIDENT TRANSFERS

Legally Required Transfers. Under California Health & Safety Code Section 1788(a)(10)(A), Hillcrest is legally required to transfer a resident to assisted living, to skilled nursing, or to an outside facility, as appropriate, if any of the following four conditions are present:

1. A resident is assessed to be 'nonambulatory' as defined by California Health and Safety Code Section 13131 and his/her current residence does not have a State Fire Marshal clearance for nonambulatory use. The definition of a nonambulatory resident means a person who is unable to leave a building unassisted under emergency conditions. It includes any person who is unable, or likely to be unable, to physically and mentally respond to a sensory signal approved by the State Fire Marshal, or oral instruction relating to fire danger, and persons who depend upon mechanical aids such as crutches, walkers, and wheelchairs.
2. A resident develops a physical or mental condition that endangers the health, safety, or well-being of the resident or another person;
3. A resident's condition or needs require that the resident be transferred to the on-site assisted living or skilled nursing facility or to an outside facility, because the level of care that the resident requires exceeds that which may be lawfully provided in the resident's current unit; or
4. The resident's condition or needs require that the resident be transferred to a hospital or other outside facility and the provider has no facilities available to provide that level of care on its premises.

If a resident requests a review of the transfer decision, the resident agrees to pay for any extra care that Hillcrest determines in writing to be necessary to allow the resident to remain in the unit during the review process.

Other Transfers. In addition to the legally required transfers set forth in the section above, Hillcrest may transfer a resident to another unit or level of care within Hillcrest or outside of Hillcrest for what it deems in its discretion to be reasonable management grounds other than the grounds set forth in the section above.

In all transfer decisions, Hillcrest considers the propriety and necessity of the transfer as well as the goal of promoting resident independence.

Transfer and Review Procedure. Before transferring a resident from one level of care to another:

- 1) The resident or the resident's responsible person will be involved in the assessment process;
- 2) The resident or the resident's responsible person will be provided with an explanation of the assessment process, including assessment tools, scoring and evaluation criteria, etc. Copies of the tool are available, upon request, to the resident or the resident's responsible person.
- 3) A care conference prior to sending a formal notification of transfer will be held. The resident's responsible person or family member or health care physicians are invited, upon request, and will be notified in writing the reasons for the transfer.

Note: If the resident does not have cognitive impairment, he or she may request that the responsible person not be involved in the transfer process.

- 4) A notice of transfer will be sent at least 30 days before the transfer is expected to occur. If the health or safety of the resident is in danger, if the transfer is required by the resident's urgent medical needs, or if the transfer is voluntary, the notice will be sent as soon as practicable before the transfer.
- 5) The written notice will normally contain the following: the reasons for the transfer; the effective date; the designated level of care or location to which the resident will be transferred; a statement of the resident's right to review of the transfer decision by the Continuing Care Contracts Branch; and the name, address and telephone number of the Continuing Care Contracts Branch.
- 6) The resident will receive a copy of the residents' rights.

Appeals of the Transfer Decision. If a resident appeals the transfer decision, Hillcrest will provide an additional care conference. The second care conference will normally include the resident, the resident's responsible person, and the Hillcrest interdisciplinary team. If requested, family members, the resident's physician or other appropriate Licensed Professional may be invited. The local ombudsperson may also be included if requested by the resident, resident's responsible person, or by Hillcrest. In the case of a disputed transfer decision, the resident will be notified of any additional care believed necessary for the resident to remain in his or her unit. The resident will be required to pay for any extra care required to remain in his or her living unit according to the current fee schedule.