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HAND DELIVERED

April 4, 2019

RECEIVED

APR 9 2019

**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 West Jefferson Street, Second Floor
Springfield, Illinois 62761

Re: Project #: 19-004 Smith Village

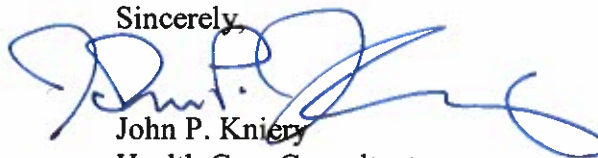
Dear Ms. Avery:

Our office represents the Applicant on the above referenced project. Enclosed please find additional information that is relevant to the consideration of the Applicant's ability to be considered "fit, willing and able" to be a long-term health care provider in good standing. Appended herein is a copy of the Applicant's recent approval from CARF International's accreditation Report approving the Applicant's five-year accreditation.

CARF International stands for the Commission on Accreditation of Rehabilitation Facilities and is an independent, nonprofit accreditor of health and human services in Aging among other areas. A summary of findings is found on page 4 and the organizations strengths are listed on pages 6-8. Specifically, CARF International found that: "Smith Village demonstrated substantial conformance to the standards. The organization is providing quality and culturally sensitive programs to the persons served. The organization is complimented on its approach to center its residents at the core of its care, concentrating on the individuality of each residents. Cherished as a place of integrity and exceptional service among the local community, generations of neighborhood residents have made their home at Smith Village."

The additional information contained herein is not new information but rather supplemental to the criteria previously addressed. It should not be considered substantial nor does should it change any State findings. If you have any questions, please do not hesitate to contact me.

Sincerely,



John P. Kniery
Health Care Consultant

ENCLOSURE
JPK

c: Kevin McGee, Executive Director
Juan Morado, Jr., Legal Council





CARF Accreditation Report

for

Smith Village

Five-Year Accreditation



CARF International Headquarters
6951 E. Southpoint Road
Tucson, AZ 85756-9407, USA

www.carf.org

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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 an on-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

Smith Village
2320 West 113th Place
Chicago, IL 60643

Organizational Leadership

Marti Jatis, Executive Director

Survey Date(s)

February 27, 2019–March 1, 2019

Surveyor(s)

Kathleen E. Bowman Estrada, Administrative
Gale Knox, Program
Kevin McLeod, CPA, Virtual Finance

Program(s)/Service(s) Surveyed

Continuing Care Retirement Community

Accreditation Decision**Five-Year Accreditation**

Expiration: March 31, 2024

Executive Summary

This report contains the findings of CARF's on-site survey of Smith Village conducted February 27, 2019–March 1, 2019. 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, Smith Village demonstrated substantial conformance to the standards. The organization is providing quality and culturally sensitive programs to the persons served. The organization is complimented on its approach to center its residents at the core of its care, concentrating on the individuality of each resident. Cherished as a place of integrity and exceptional service among the local community, generations of neighborhood residents have made their home at Smith Village. It is apparent the organization is designed and operated in a manner that benefits the persons served, staff members, family members, and other stakeholders and results in consistent improvement of services and processes. Smith Village is encouraged to continue to use the CARF standards to further enhance the provision of services and expand its performance improvement program by addressing the areas for improvement in this report.

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

Smith Village 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 Smith Village was conducted by the following CARF surveyor(s):

- Kathleen E. Bowman Estrada, Administrative
- Gale Knox, Program
- Kevin McLeod, CPA, 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 Smith Village 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 on-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 Smith Village demonstrated the following strengths:

- The organization has a robust budget process that is inclusive of resident, staff, board, and other stakeholder input and is supplemented by a five-year capital plan and a forward-looking three-year financial forecast. In addition, the organization submits to frequent actuarial evaluations that place it in the top tier of organizations for long-term financial solvency.
- The organization has detailed and extensive financial policies and procedures as well as multiple layers of internal control to safeguard the assets of the organization.
- Smith Village has an active and effective Resident Council with a leadership team that partners with it to listen to the residents, affect change where needed, and communicate upcoming events and programs. The Resident Council has a dining services committee that partners with the contracted leadership of the dining services management company to deliver high-quality service to its residents and guests.

- Resident-centered living is the resonant philosophy at Smith Village in all levels of care. It is embraced throughout the organization and appears to be simply a way of life for the residents. The residents are impressed that everyone makes the effort to know and use their names, their likes and dislikes, and how quickly they are made to feel part of the community. The same feeling of belonging is expressed by many stakeholders at Smith Village.
- The residents are offered an innovative, creative, and adventurous life enrichment program. The residents speak highly of the many opportunities they have for wellness, social events, and overall engagement. The residents often join with the greater local community and are proud to give of their time and talent to various missions. Some examples include making fleece blankets for the hospitals, sending meals to the Ronald McDonald House, making fleece coats for greyhound dogs awaiting adoption, and working in a local bakery to support Misericordia University during the holidays. The residents especially enjoy beanbag tournaments with their sister community and with students at a local high school.
- Smith Village uses pets and animals in a variety of ways to enhance the lives of the residents. Most notably, there is "Smitty," the resident rabbit, and fish and birds. There are also frequent visits from animals such as ponies and other petting zoo favorites. Smith Village holds a pet parade and awards prizes to the top three, but all participants receive a gift. It also partners with PetSmart® to serve as a clinical site for therapy dogs in training.
- Employees express overall satisfaction and appreciation for their roles at Smith Village. Employees believe the organization continually invests in them and are pleased that such efforts are being made. Employees express gratitude for receiving orientation, not only at the time of hiring, but annually. The most valued employee benefit appears to be the grand celebration and dinner that is given to honor employees who reach a milestone of service (five years, ten years, etc.). The effort on the part of Smith Village seems to be paying off in the employees' attitudes. They feel valued and a part of the team and, as a result, employees are putting the residents' interests above their own. They engage with the residents at every opportunity and continually strive to find a way to honor each resident's request, when possible.
- Smith Village offers a bright, spacious, clean, and beautiful environment that is well maintained by diligent staff and utilized abundantly by the residents and their guests. This includes both indoor and outdoor spaces. Smith Village continually updates the environment to be attractive to current as well as future residents. Adding a much-anticipated pub is another example of how Smith Village stays current and listens to its residents' requests.
- Smith Village provides many valued end-of-life accommodations for its residents and their families. Most notably is a bereavement support group offered by the social workers. This group is open to and attended by not only Smith Village stakeholders but also individuals in the greater community of Beverly/Morgan Park.
- Smith Village diligently manages risk. One example is through the insurance broker's attorney review of all contracts to ensure sufficiency in insurance language and compliance.
- Smith Village is an institution within the Beverly/Morgan Park Community and valued as an exceptional neighbor with an impeccable reputation for service to its residents and communities. One such example of Smith Village's community engagement is the partnership with the Beverly Area Planning Association that provides services to the residents. An example is a worthwhile program called Tech Tuesday. This program offers Smith Village and surrounding neighborhood residents a well-received series of educational sessions on the use of cell phones and other technology. It is so popular the residents noted that hardly a parking space can be found on Tech Tuesdays.

Smith Village 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 and the total excess margin ratios are above the 75th percentile when compared with other accredited CCRCs around the country. This is considered an exemplary rating.
(1.F.13.a.(1), 1.F.13.a. (3))

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

1.A.3.k.

1.A.3.m.

Although many of the organization's policies are reviewed annually, a comprehensive action to review all of the policies is not in place. Also, the organization has discussed succession planning, but has not established a plan. It is recommended that the identified leadership of the organization guide the review of the organization's policies at least annually and guide succession planning.

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

1.B.2.g.(1)(b)

Although governance policies address financial matters, they do not address loans. It is known within the organization's members that loans are not allowed, but this is not specifically addressed in policy. It is recommended that the organization's governance policies address board performance, including financial matters, if any, between the organization and individual board members, including loans.

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
- 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
- Safeguarding funds of persons served, if applicable
- Review/audit of financial statements

Recommendations

1.F.13.b.

1.F.13.c.(1)

1.F.13.c.(2)

Conformance to 1.F.13.b. is based on the organization's days cash on hand (DCOH) ratio calculation as compared to CARF's benchmark. The DCOH ratio measures the number of days of cash operating expenses a provider could cover with its unrestricted cash, cash equivalents, and marketable securities on hand. Conformance to 1.F.13.c.(1) is based on the organization's cash to debt ratio calculation as compared to CARF's benchmark. The unrestricted cash and investments to long-term debt (CD) ratio measures a provider's position in available cash and marketable securities in relation to its long-term debt, less the current portion of debt. Conformance to 1.F.13.c.(2) is based on the organization's debt service coverage (DSC) ratio calculation as compared to CARF's benchmark. The DSC ratio reflects a provider's ability to fund annual debt service with cash flow from net cash revenues and net entrance fees. The organization's values for these ratios are below the conformance range to this standard.

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

- Competency-based training on safety procedures and practices
- Emergency procedures
- Access to first aid and emergency information
- Critical incidents
- Infection control
- Health and safety inspections

Recommendations

1.H.7.a.(1)

1.H.7.a.(2)

1.H.7.b.

1.H.7.c.(1)

1.H.7.c.(2)

1.H.7.c.(3)

1.H.7.c.(4)

1.H.7.d.

Unannounced tests of all emergency procedures take place but not on each shift nor is there a written analysis for all tests of the procedures. The organization should conduct unannounced tests of all emergency procedures at least annually on each shift at each location that include complete actual or simulated physical evacuation drills. Tests of emergency procedures should be analyzed for performance that addresses areas needing improvement, actions to be taken, results of performance improvement plans, and necessary education and training of personnel. The unannounced tests of all emergency procedures should be evidenced in writing, including the analysis.

1.H.12.e.

1.H.12.h.

1.H.12.j.

Although the organization includes safety equipment and first aid supplies in its bus, they were not evident in its passenger vehicle or in a van temporarily rented during downtime of the bus. The organization also had written emergency procedures of which the driver was knowledgeable, but they were not evident in the vehicles. It is recommended that, because transportation is provided for the persons served, there be evidence of safety equipment, written emergency procedures available in the vehicle(s), and first aid supplies available in the vehicle(s). Smith Village may want to consider providing drivers with a checklist for use in case of a vehicular accident.

1.H.14.a.

1.H.14.b.(1)

1.H.14.b.(2)

1.H.14.b.(3)

The organization has an outside entity conduct an annual safety inspection, but it is not conducting comprehensive self-inspections. The organization should conduct comprehensive health and safety self-inspections at least semiannually on each shift that result in a written report that identifies the areas inspected, recommendations for areas needing improvement, and actions taken to respond to the recommendations.

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 background/credentials/fitness for duty

- Workforce engagement and development
- Performance appraisals
- Succession planning

Recommendations

There are no recommendations in this area.

1.J. Technology

Description

CARF-accredited organizations plan for the use of technology to support and advance effective and efficient service and business practices.

Key Areas Addressed

- Technology and system plan implementation and periodic review
- Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
- ICT instruction and training, if applicable
- Access to ICT information and assistance, 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.

Consultation

- The residents' rights are communicated to the residents in the council meeting quarterly. However, this practice is not part of the written policy. It is suggested that the policy be modified to reflect this practice.

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.

1.M. Performance Measurement and Management

Description

CARF-accredited organizations are committed to continually improving their organizations and service delivery to the persons served. Data are collected and analyzed, and information is used to manage and improve service delivery.

Key Areas Addressed

- Data collection
- Establishment and measurement of performance indicators

Recommendations

There are no recommendations in this area.

1.N. Performance Improvement

Description

The dynamic nature of continuous improvement in a CARF-accredited organization sets it apart from other organizations providing similar services. CARF-accredited organizations share and provide the persons served and other interested stakeholders with ongoing information about their actual performance as a business entity and their ability to achieve optimal outcomes for the persons served through their programs and services.

Key Areas Addressed

- Analysis of performance indicators in relation to performance targets
- Use of performance analysis for quality improvement and organizational decision making
- 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
- Practices for serving individuals with dementia
- Skin integrity and wound care

Recommendations

2.A.32.c.(1)

2.A.32.c.(2)

2.A.32.c.(3)

Although the organization has a written wellness philosophy, it is not being shared with stakeholders such as the persons served, their families, and personnel. It is recommended that, based on its scope of services, the program have a written philosophy of health and wellness for the persons served that is shared with the persons served, families/support systems, and personnel. The organization may want to consider converting its current policy-formatted written philosophy of health and wellness into to a narrative and include it in both the resident handbook and the employee handbook. It might also be posted in key locations throughout the campus.

2.A.52.a.(1)

2.A.52.a.(2)

2.A.52.b.(3)

2.A.52.b.(4)

Although the organization provides training on many topics, it is not currently providing competency-based training related to depression, suicide risk assessment, and prevention strategies. Smith Village should provide documented competency-based training for personnel, as appropriate to their roles, at orientation and regular intervals that includes depression and suicide risk assessment and prevention strategies.

2.A.53.b.

Although volunteers are given the opportunity to attend person-centered care classes, it is recommended that, because the program utilizes volunteers, it provide documented competency-based training to volunteers that addresses dementia.

2.B. Congregate Residential Program

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

2.B.10.

The visitation policy of the organization is that visitation takes place between 8 a.m. and 8 p.m.; however, exceptions may be made. It is recommended that the organization's policies and written procedures allow the opportunity for the persons served to receive visitors 24 hours a day, if desired and the visit does not infringe upon the health, safety, or rights of any persons served.

Section 3. Program Specific Standards

3.G. Continuing Care Retirement Community

Description

Continuing Care Retirement Communities (CCRCs) foster a culture of independence, safety, and community. 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 congregate 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

Smith Village

2320 West 113th Place
Chicago, IL 60643

Continuing Care Retirement Community