



George G. Glenner Alzheimer's Family Centers, Inc.® (GGG AFC)

Policy and Procedure Manual

CHAPTER 2 - PLAN OF OPERATION

2.1 Program Description

The George G. Glenner Alzheimer's Family Centers, Inc.® was established in 1982 and is a non-profit 501(c)(3) organization affiliated with the Regents of The University of California San Diego, School of Medicine.

The GGG AFC is a community-based organization that provides adult day programs and support services for people struggling with the effects of Alzheimer's disease and other forms of dementia through direct care services, advocacy and education. With an emphasis on direct service, GGG AFC supports the whole family. Our mission is to provide quality adult day care and support services to families and others affected by Alzheimer's and memory impairment diseases. We do this by providing the following quality adult day programs, family support, case management, crisis intervention, family and community education, advocacy, information and referrals.

GGG AFC has successfully operated multiple adult day programs throughout San Diego County for seniors with multiple barriers to healthy independent living. We provide these services to address the escalating population of Alzheimer's and related dementia participants; provide supportive services for their families and share our expertise with professionals and the community.

GGG AFC provides both adult day health care (ADHC) and adult day programs (ADP) to residents of the county of San Diego at the following locations:

- Hillcrest Center - 3686 Fourth Avenue, San Diego, CA 92103 - ADP
- Chula Vista Center - 2765 Main St. Ste A Chula Vista, CA 91911 - ADP/ADHC
- Encinitas Center - 335 Saxony Road, Encinitas, CA 92024 - ADP/ADHC
- Corporate offices are located at 2765 Main St. Ste. A Chula Vista, CA 91911

The ADHC centers are licensed as health facilities by the California Department of Public Health. Our ADP programs are licensed by the State of California, Department of Social Services-Community Care Licensing division.

2.2 Hours of Operation

GGG AFC adult day care programs are open from 8:45 a.m. - 5:15 p.m. Corporate Offices from 8:45 a.m. - 5:15 p.m., Monday through Friday. Our day care programs are closed on New Years Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, the day after Thanksgiving and Christmas Day. If a holiday falls on a weekend, we close our program on either the Friday before or Monday after the holiday.

2.3 Type and Number of Participants

GGG AFC serves adults with memory impairing disabilities and the frail elderly. Our participants may present with diagnoses of Alzheimer's disease, Parkinson's disease, Lewy Body, Vascular dementia, post stroke, traumatic brain injury, cardiovascular disease, diabetes or severe osteoporosis/arthritis. The following are the licensed capacities for each center.

- Hillcrest Center - licensed capacity for ADP is 24
- Chula Vista Center - licensed capacity for ADHC is 75
- Encinitas Center - licensed capacity for ADP/ADHC 30

2.4 Basic Program Services

Our adult day and adult day health care programs offer meaningful adult activities in a stimulating and safe environment allowing individuals to remain socially and physically active, thus delaying premature placement. We offer the community weekly support groups that provide caregivers with an avenue of support and education from their peers as well as a professional facilitator. Additionally, during these support groups we offer free onsite day care to provide the caregiver peace of mind that their loved one is well cared for so they can focus on their needs in the support group. GGG AFC offers the community educational classes to assist family caregivers and professionals in learning about Alzheimer's disease and other dementias, identifying ways to improve the quality of care for the individual and ways to improve the overall well-being of the family caregiver.

Our centers provide the following:

- 1:5 staff to participant ratio
- Full-time registered nurse on duty at all times
- Individualized Plan of Care for each participant
- Full Recreational/Activity Program (Exercise, Arts, Crafts, Music and Pet Therapy, Walks)
- Nutritious breakfast, hot noon meal, and afternoon snack; all approved by a Registered Dietician and to accommodate special dietary needs
- Crisis counseling

For ADHC participants we provide:

- Physical, Occupational and Speech Therapy services; a Registered Dietician; Psychiatric/Psychological services
- Transportation coordination via Paratransit services
- Free weekly caregiver support groups for family caregivers; free adult day care provided during the support groups
- Educational programs for family caregivers and professional health care providers
- Referrals to community resources
- Safe Return + Medic Alert registration at each site

2.5 Administration

GGGAFc has oversight provided by a Board of Directors. Staffing in the Corporate office consists of the: Chief Executive Officer, Director of Programs and Services/Administrator, Corporate Accountant, Marketing and Development Manager, Human Resources Coordinator, Outreach and Marketing Manager, Administrative Assistant and Maintenance. (Agency Organizational Chart located in Appendix A; Job Descriptions are located in Appendix B)

2.5.1 Center Staffing and Volunteers

Adult Day Health Care Program

The multidisciplinary team (MDT) is a professional team composed of a Program Director, Social Worker, Registered Nurse, Physician, Physical and Occupational Therapist and Activity Coordinator. A Speech Therapist, Registered Dietitian and Psychiatric Consultant may be included if needed. The MDT represents the core of the ADHC program with a focus on assessing and reassessing each applicant/participant. The MDT develops the treatment plan with the participant, the staff and/or private physician and family or friends. Additionally, the center is staffed with Program Aides, Housekeeping, Maintenance, and Secretary.

Adult Day Program

The Adult Day Program provides non-medical care to elderly persons and other adults with physical and/or cognitive impairments who require personal care services, protective supervision or assistance in activities of daily living on less than a 24-hour basis. These services are provided by a Program Director, Registered Nurse, Activity Coordinator and Program Aides.

Volunteers and Student Interns

Volunteers and student interns are encouraged to participate in the GGG AFC program to assist staff but also provide the volunteer/student and the participants an opportunity of an enriching experience.

2.5.2 Staff Development and Volunteer Training

Staff Initial Training

All day care program staff completes the following initial mandatory training:

- 40 hours of orientation which includes but is not limited to: Health Insurance Portability and Accountability Act (HIPAA) regulations, Elder Abuse Reporting, program acclimation and job duties, shadowing program staff, learning participant interests and dietary concerns, education about Alzheimer's disease and related dementias, program rules and regulations.

Annual Training

- Elder Abuse Reporting procedures
 - Blood Pathogens and Universal Precautions
 - Confidentiality and Privacy (HIPAA standards)
 - Dementia Care Training
 - Food Safety and Sanitation
 - Emergency Procedures
 - Additional regular training is scheduled to include professional conduct, body mechanics, behavior management, calming techniques, and positive interaction.
- All staff completes the following per individual renewal dates:
 - Cardiopulmonary Resuscitation (CPR)
 - First Aid

Volunteer Training

All volunteers receive a volunteer packet of information that explains our programs and services and includes several articles of information on Alzheimer's disease. In addition, the volunteer receives orientation and training from the Activity Director and training on HIPAA regulations and Elder Abuse Reporting. Volunteers have an opportunity to shadow program staff, learn participant interests, program rules and regulations. Depending on the time commitment the volunteer is willing to make we also encourage all volunteers to attend all staff in-service trainings.

2.6 Admission

2.6.1 Assessment Process

The initial assessment provides background descriptive information on each participant, measures the individual's basic skills and attitudes, determines the individual's level of functional independence, and specifies the individual's service needs and plan of care. The assessment process includes:

- Completion of Physician's Report (ADP/ADHC)
- Clearance of negative TB screening (ADP/ADHC)
- Mini- Mental Status Exam (ADP/ADHC)
- Appraisal/Needs and Services Plan (ADP only)
- Psychosocial Assessment (/ADHC only)
- Social History (ADP only)
- Activity Needs and Interests Assessment (ADHC)
- Nursing Assessment (ADP/ADHC)
- Physical Therapy Assessment (ADHC only)
- Occupational Therapy Assessment (ADHC only)
- Nutrition Assessment (ADHC only)
- Speech Therapy Assessment (ADHC only)
- Home Environment Assessment (ADHC only)
- Zarit Burden Instrument (Caregiver Only)
- Beck Depression Instrument (Caregiver Only)

(All of the above forms are located in Appendix C)

2.6.2 Multidisciplinary Team Review

Upon completion of assessment day(s) the Program Director conducts a meeting with the multidisciplinary team to review enrollment documentation and discuss individual assessments. The team determines acceptance or denial into the ADP or ADHC program.

2.7 Discharge

Participation in the ADP/ADHC program is voluntary. The participant or participant's caregiver may terminate services at any time.

The GGAFC will provide a minimum of two weeks written notice prior to discharge with the exception of those individuals who are deemed harmful to self or others, which may require an immediate discharge to protect the safety of the other center participants and staff. All licensing agencies (Community Care Licensing (CCL), California Department of Aging (CDA) and Department of Health Services (DHS) will be notified in writing of all discharges. Additionally, all participants and their caregivers will receive assistance with referrals to community agencies to assist (i.e., Hospice, In-Home providers, placement alternatives, etc.)

A plan for discharge for each ADHC participant, based on the initial assessments, is completed at the time of enrollment and signed by the Social Worker. The discharge plan includes specific program referrals for the participant should he/she be discharged from the ADHC program. This plan is placed in the participant's health record and is reviewed at each subsequent reassessment (every 6 months).

2.8 Mandatory Discharge

Discharge shall be mandatory from the ADP/ADHC program when:

- The participant or caregiver notifies the center either orally or in writing of the intent to discontinue participation in the program.
- The participant moves out of the service area permanently.
- The participant dies.
- The multidisciplinary team finds that the maximum benefit for the participant has been achieved and there is no further need for services.
- The participant is unable or unwilling to use the prescribed services and staff have made every effort to remove possible obstacles.
- The participant is deemed a harm to others and/or self.
- Participant's account is more than 30 days past due and is not compliant with payment arrangements.

2.9 Referrals to Community

All participants in the ADP and ADHC programs are provided with ongoing resources to community agencies who can provide additional assistance in their caregiving role. The center maintains a large resource library to provide caregivers and the community access to other services.