



# Overview of Assisted Living/Residential Care Facilities for the Elderly (RCFEs)

## What is a Residential Care for the Elderly?

Residential Care Facilities for the Elderly (RCFEs) — sometimes called “Assisted Living” (e.g., 16+ beds) or “Board and Care” (e.g., 4 to 6 beds) — are non-medical facilities that provide room, meals, housekeeping, supervision, storage and distribution of medication, and personal care assistance with basic activities like hygiene, dressing, eating, bathing and transferring. Residential Care Facilities for the Elderly (RCFEs) serve persons 60 years of age and older.

This level of care and supervision is for people who are unable to live by themselves but who do not need 24 hour nursing care. They are considered non-medical facilities and are not required to have nurses, certified nursing assistants or doctors on staff.

## How Does a Residential Care Facility for the Elderly Differ From an Assisted Living Facility?

From a licensing standpoint, there is no difference. In California, facilities describing themselves as assisted living and offering personal care and supervision are licensed as Residential Care Facilities for the Elderly.

Residential Care Facilities for the Elderly are dominated by smaller (i.e., 6 to 15 beds), locally owned facilities with shared rooms. Larger facilities usually offer private apartments and tend to be corporately owned. Many larger facilities have different fee options depending on the type of care needed.

## Are Residential Care Facilities for the Elderly Regulated?

Yes. Residential Care Facilities for the Elderly or Assisted Living Facilities must meet care and safety standards set by the State and are licensed and inspected by the Department of Social Services, Community Care Licensing (CCL).

Senior housing complexes, retirement villages or retirement hotels that provide only housing, housekeeping and meals are not required to be licensed as Residential Care Facilities for the Elderly.

## Are Residential Care Facilities for the Elderly Required to Have Liability Insurance?

Beginning on July 1, 2015, all RCFEs are required to maintain liability insurance in the amount of at least \$1,000,000 per occurrence and \$3,000,000 annually to cover injuries to residents or guests caused by the negligence of the facility owner or employees. (California Health and Safety Code, Section 1569.605.)

## Can A Residential Care Facility for the Elderly Care for Persons with Dementia?

Maybe. Some facilities offer special services to persons with dementia if they meet certain licensing requirements. (California Code of Regulations, Title 22, Sections 87705, 87706.) Make sure that the facility has experience in providing dementia care and meets all of the state licensing standards to provide dementia care.

## Will a Residential Care Facility for the Elderly Accept or Retain Someone Who Needs Medical Care?

Maybe. It will depend on the type and severity of the medical condition(s) and whether the facility

meets the state licensing standards for “restricted” health conditions. Some medical conditions are not allowed in a Residential Care Facility for the Elderly (e.g., tube feeding, or treatment of open bedsores). (California Code of Regulations, Title 22, Section 87615.) The facility must inform residents in writing at or before the time of admission of any resident retention limitations set by the state or facility such as whether the facility can serve persons who need help in leaving the building in case of emergency (i.e., non-ambulatory) or with certain medical conditions (e.g., hospice waiver). (California Health and Safety Code, Section 1569.269.)

### **What if My Medical Needs Increase, Can I Stay?**

Maybe. Since a residential care facility is not licensed as a “medical” facility, persons requiring tube feeding, treatment of open bedsores or 24-hour nursing care are not permitted to reside in RCFEs. (California Code of Regulations, Title 22, Section 87615.) However, some RCFEs have permission to care for persons on hospice. (California Health and Safety Code, Section 1569.73; California Code of Regulations, Title 22, Sections 87632, 87633.)

### **What Are the Qualifications for Staff?**

Minimal Training: *Administrators* must take a 40-hour certification program, pass a simple state exam, and obtain 40 hours of continuing education every two years. *Staff* must receive at least 10 hours of training at the facility within 4 weeks of employment, and at least 4 hours annually thereafter. For facilities advertising dementia care, Staff must have 6 hours of orientation specific to dementia care within the first 4 weeks, and at least 8 hours annually of in-service training.

Beginning January 1, 2016, training requirements for Administrators and Staff will increase significantly. The certification program for Administrators will increase to 80 hours (from 40), and the state-proctored exam will increase to 100 questions (from 40). Staff training requirements will be increased to 40 hours of training in the first year (currently 10 hours in the first 4 weeks), and 20 hours of ongoing training each following year. Dementia care training requirements will be increased, and required for all RCFE Staff (and not just for those RCFEs that advertise dementia care). Training requirements for Staff who assist residents with the self-administration of medication also will be increased. (California Health and Safety Code, Sections 1569.23, 1569.616, 1569.62, 1569.69.)

Minimal Qualifications: *Administrators* must be 21 years of age and possess a high school diploma or equivalent for facilities of 15 beds or less — these comprise over 80% of all RCFEs. For facilities of 16 to 49 beds, the administrator needs 15 college credits; and for facilities of 50+ beds, 2 years of college or 3 years experience, or equivalent education and experience. (California Health and Safety Code, Section 1569.613; California Code of Regulations, Title 22, Section 87405.) *Staff* must only be 18 years of age and pass the criminal background check. (California Code of Regulations, Title 22, Section 87411.) Note: Because RCFEs are non-medical facilities, there is no requirement for RNs, LVNs or CNAs or any medically-trained personnel. Check on the qualifications of the administrator and key staff.

### **Are There Staff Ratios?**

There is not any specific staff to resident ratio for assisted living/residential care facilities. California law requires that facility personnel shall at all times be sufficient in numbers, qualifications, and competency to provide the services necessary to meet resident needs, and to ensure their health, safety, comfort, and supervision. (California Health and Safety Code, Sections 1569.269(a)(6), 1569.618(c); CCR, Title 22, Section 87411.)

There must be at least one administrator or designated substitute with qualifications adequate to be responsible for the management and administration of the facility be on premises 24 hours per day. (California Health and Safety Code, Section 1569.618(b).) The facility must also have at least one staff member trained in CPR and first aid on duty and on the premises at all times. (California Health and Safety Code, Section 1569.618(c).)

In regards to night supervision, for facilities with 15 or fewer residents, there must be one “qualified” person on call and on the premises; in facilities with 16–100 residents, there must be one person awake and on the premises, and another on call and capable of responding within 10 minutes. (CCR, Title 22, Section 87415.)

### **What Does Residential Care for the Elderly or Assisted Living Cost?**

The cost depends on a variety of factors such as the type of accommodations (e.g., apartment, private room, shared room), the range of services needed, and the geographic area. The median monthly cost in California is \$4,250, with costs ranging from a low of around \$1,000 a month for a resident on Supplemental Security Income (SSI) to a high of \$9,000 a month. Specialized services like dementia or hospice care are more costly.

### **Is There a Limit on How Much Facilities Can Raise Private Pay Rates?**

No. Since residential care is a private business, providers will charge what the market will bear. However, facilities must issue 60–day notices to increase rates, but can raise charges for level of care changes immediately and provide notice within 2 working days. (California Health and Safety Code, Sections 1569.655, 1569.657; see also CANHR’s factsheet on Admission Agreements:

[www.canhr.org/factsheets/rcfe\\_fs/html/rcfe\\_admission\\_fs.htm](http://www.canhr.org/factsheets/rcfe_fs/html/rcfe_admission_fs.htm).)

### **Can Facilities Charge a Pre-Admission Fee?**

Yes. Some providers charge nothing or a minimum amount to cover costs of conducting an assessment, obtaining medical records and setting up files. Others charge fees of thousands of dollars. Demand a written description of what the fees cover. Negotiate the amount if too high, or look for another facility. Facilities are prohibited from charging security deposits. (California Health and Safety Code, Section 1569.651; see also CANHR’s factsheet on Admission Agreements:

[www.canhr.org/factsheets/rcfe\\_fs/html/rcfe\\_admission\\_fs.htm](http://www.canhr.org/factsheets/rcfe_fs/html/rcfe_admission_fs.htm).)

### **Who Pays the Bill for Residential Care for the Elderly or Assisted Living?**

Most people must pay privately for care. Long-term care insurance only covers a very small percentage of people. There is very limited public funding through Supplemental Security Income (SSI) for RCFE residents who qualify for this program (see CANHR’s fact sheet on SSI in a RCFE: [www.canhr.org/factsheets/rcfe\\_fs/html/rcfe\\_ssi\\_fs.htm](http://www.canhr.org/factsheets/rcfe_fs/html/rcfe_ssi_fs.htm)). Unfortunately, the SSI rate is so low that fewer and fewer facilities will accept persons on SSI.

Aid and Attendance is a benefit paid by Veterans Affairs (VA) to veterans, veteran spouses or surviving spouses that may help pay for residential care. To learn more about Aid and Attendance benefits, see CANHR’s Fact sheet on Aid and Attendance:

[www.canhr.org/factsheets/misc\\_fs/html/fs\\_aid\\_&\\_attendance.htm](http://www.canhr.org/factsheets/misc_fs/html/fs_aid_&_attendance.htm).

### **Will Medicare or Medi-Cal Pay?**

No. Because these are not medical facilities, neither Medicare nor Medi-Cal pays directly for residential care/assisted living. There is a special program in 14 counties (Alameda, Contra Costa, Fresno, Kern, Los Angeles, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Joaquin, San Mateo, Santa Clara and Sonoma) — the Assisted Living Waiver Program— in which Medi-Cal pays for eligible residents assessed to need nursing home level care to live in an RCFE or public housing. (For more information, see CANHR’s fact sheet on Assisted Living Waiver (ALW):

[www.canhr.org/factsheets/rcfe\\_fs/html/rcfe\\_alw\\_fs.htm](http://www.canhr.org/factsheets/rcfe_fs/html/rcfe_alw_fs.htm).)

### **How Do I Find Out About the Track Record of a Facility?**

Upon request, a facility must show you the most recent copy of its latest inspection report and a copy of any substantiated complaints within the past year. (Note: The frequency of RCFE inspections will be increasing to once every 3 years by January 2017, once every 2 years by 2018, and annually by 2019.) Recent inspection reports (post April 16, 2015) and complaints (post January 11, 2016) also are available online at the website of the state regulatory agency, the Department of Social Services, Community Care Licensing Division (CCL) - <http://www.cdss.ca.gov/inforesources/Community-Care-Licensing/Facility-Search-Welcome>. The only way to view the complete facility record is to go to one of the district offices of CCL and request to see the public record of the facility.

### **How Do I Find Out More About Residential Care for the Elderly?**

You can contact the local District Office of Community Care Licensing to receive a listing of facilities. Additional information and resources are posted online at the CCL website. Some Ombudsman Programs also have listings, offer pre-placement services, and provide access to licensing reports. For additional information, see CANHR's RCFE factsheets: [www.canhr.org/factsheets/index.html](http://www.canhr.org/factsheets/index.html).