

Response Summary:

ALZHEIMER'S DEMENTIA AND OTHER FORMS OF DEMENTIA SPECIAL CARE DISCLOSURE FORM

Disclosure forms are required for any nursing facility, residential care facility, assisted living facility, adult day care center, continuum of care facility, or special care facility that publicly advertises, intentionally markets, or otherwise engages in promotional campaigns for the purpose of communicating that said facility offers care or treatment methods within the facility that distinguish it as being especially applicable to or suitable to persons with Alzheimer's dementia or other forms of dementia. [63:1-879.2c].

Facility Instructions:

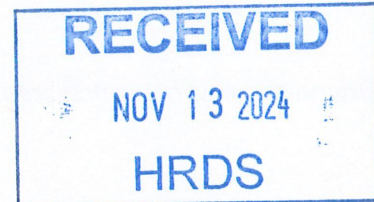
1. This form is to be submitted when:

- A facility begins to meet the statutory definition for "Special Care Facility."
- There are any changes since the last disclosure form submission.

2. The disclosure form shall be:

- Posted to the Department's website.
- Posted to the facility's website.
- Provided to the Oklahoma State Department of Health each time it is required.
- Provided to the State Long-Term Care Ombudsman by the Oklahoma State Department of Health.
- Provided to any representative of a person with Alzheimer's dementia or other form of dementia who is considering placement in a special care unit.

3. This disclosure form is not intended to take the place of visiting the facility, talking with other residents' family members, or meeting one-on-one with facility staff.



Q2. Facility Name

Green Country Village Assisted Living

Q3. License Number

AL7403-7403

Q4. Telephone Number

918-335-2086

Q5. Email Address

kenimersheryl@greencountryvillage.com

Q6. Website URL

www.greencountryvillage.com

Q7. Address

1027 Swan Drive, Bartlesville, OK 74006

Q8. Administrator

Leta Sheryl Kenimer

Q9. Name of Person Completing the Form

Sheryl Kenimer

Q10. Title of Person Completing the Form

Administrator / Executive Director

Q11. Facility Type

Assisted Living

Q12. Dedicated memory care facility?

- Yes

Q13. Total Number of Licensed Beds

65

Q14. Number of Designated Alzheimer's/Dementia Beds

24

Q15. Total Licensed Capacity for Adult Day Care (leave blank if does not apply to your facility)

0

Q16. Maximum Number of Participants for Alzheimer Adult Day Care (leave blank if does not apply to your facility)

0

Q17. Check the appropriate selection

- Change of Information

Q18. Describe the Alzheimer's disease special care unit, program, or facility's overall philosophy and mission as it relates to the needs of the residents with Alzheimer's dementia or other forms of dementia.

LakeView's program is based on an understanding of each person's care needs. For many people, the LakeView program is far superior to receiving care at home by family members. Here's why:

- Our LakeView staff is specially trained to care for persons with memory problems.
- At LakeView, we focus not on the abilities a resident has lost, but on the abilities and interests that remain. We create an environment of support and encouragement.
- The LakeView program enables residents to maintain the highest possible degree of independence, self-reliance, and self-motivation. We offer discreet and unobtrusive oversight, there is no forced compliance.
- LakeView provides an extensive array of one-on-one and small group activities that help residents feel connected, engaged, and entertained.
- We keep abreast of emerging treatments for Alzheimer's disease and other forms of dementia, and look for opportunities for residents to benefit from new therapies.
- We engage in the practice of Validation Therapy, in which we do not deny resident's allusive thoughts; rather, we constructively explore the underlying memories or fears that cause them. Once exposed, we can help residents address them in a positive manner.
- LakeView is secure which helps ensure the ongoing safety of each and every resident.
- Family members are relieved when they see visible improvement in the level of happiness and contentment residents show after moving to LakeView.
- LakeView offers support to family members. We encourage communication between staff and resident's families. Families are welcome at anytime, night or day.
- In many cases, LakeView is the better option in caring for the resident's psycho social and health care needs.
- Our principal purpose is to create resident contentment and happiness. They deserve it.

STATEMENT OF PHILOSOPHY:

It is the philosophy of Green Country Village to acknowledge that each individual, whatever his or her physical and/or mental condition, has the capacity for continued growth; for an enrichment of living experiences; and for personal satisfaction.

It is our practice to provide a support system to allow the individual to live as independently as possible, which means to direct his or her own life, and use one's abilities to their maximum.

We support the rights of the individual to express him or herself, to assist each individual to maintain a sense of dignity and freedom and to make a continuing contribution to one's surroundings.

It is the goal of Green Country Village to assist the elderly in realizing that their lives can be filled with quality experiences.

Q19. What is involved in the pre-admission process? Select all that apply.

- Visit to facility
- Resident assessment
- Medical records assessment
- Family interview

Q20. What is the process for new residents? Select all that apply.

- Doctors' orders
- Residency agreement



Q21. Is there a trial period for new residents?

- No

Q23. The need for the following services could cause permanent discharge from specialized care. Select all that apply.

- Medical care requiring 24 hour nursing care
- Behavior management for verbal aggression
- Intravenous
- Feeding by staff
- Special diets
- Other (explain):
Behavior management for verbal and/or physical aggression. Danger to self or others. Two person assist.

Q24. Who would make this discharge decision?

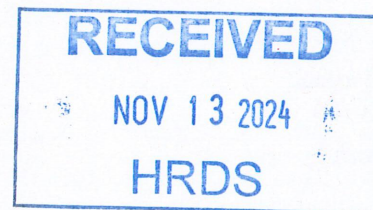
- Other (explain):
Director and/or RN Nursing Coordinator in coordination with the Administrator.

Q25. How much notice is given for a discharge?

Minimum of 10 days unless emergency circumstances.

Q26. Do families have input into discharge decisions?

- Yes



Q27. What would cause temporary transfer from specialized care? Select all that apply.

- Medication condition requiring 24 hours nursing care
- Unacceptable physical or verbal behavior
- Significant change in medical condition
- Other (explain):
Danger to self or others. Drug Stabilization.

Q28. Do you assist families in coordinating discharge plans?

- Yes

Q29. What is the policy for how assessment of change in condition is determined and how does it relate to the care plan?

If there is a significant change in condition the Director and/or RN Nursing Coordinator are notified. RN Nursing Coordinator completes the assessment and updates the care plan as required

Q30. What is the frequency of assessment and change to care plan? Select all that apply.

- Annually
- As Needed
- Other (explain):
Within 14 days of Admission

Q31. Who is involved in the care plan process? Select all that apply.

- Nursing assistants
- Family members
- Resident
- Licensed nurses
- Other (explain):
Director and RN Nursing Coordinator

Q32. Do you have a family council?

- No

Q33. Select any of the following options that are allowed in the facility:

- Approved sitters
- Additional services agreement
- Hearing

Q34. Is the selected service affiliated with your facility?

- No

Q35. What are the qualifications in terms of education and experience of the person in charge of Alzheimer's disease or related disorders care?

LPN Director with 25 years experience overseeing memory care and has extensive training regarding Alzheimer's disease or related disorders.

Q36#1. Specify the ratio of direct care staff to residents for the specialized care unit for the following: -
Day/Morning Ratio

Licensed Practical Nurse, LPN	1-3/24
Registered Nurse, RN	1/24
Certified Nursing Assistant, CNA	3-4/24
Activity Director/Staff	1/24
Certified Medical Assistant, CMA	0-1/24
Other (specify)	N/A

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Q36#2. Specify the ratio of direct care staff to residents for the specialized care unit for the following: -
Afternoon/Evening Ratio

Licensed Practical Nurse, LPN	1/24
Registered Nurse, RN	1/24
Certified Nursing Assistant, CNA	2-3/24
Activity Director/Staff	1/24
Certified Medical Assistant, CMA	0-1/24
Other (specify)	N/A

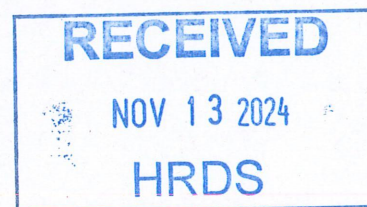
Q36#3. Specify the ratio of direct care staff to residents for the specialized care unit for the following: -
Night Ratio

Licensed Practical Nurse, LPN	0-1/24
Registered Nurse, RN	ON Call 1/24
Certified Nursing Assistant, CNA	2-3/24
Activity Director/Staff	0
Certified Medical Assistant, CMA	0
Other (specify)	N/A

Q37#1. Specify what type of training new employees receive before working in Alzheimer's disease or related disorders care. - All Staff

Required hours of training

<i>Alzheimer's dementia, other forms of dementia, stages of disease</i>	1-4
<i>Physical, cognitive, and behavioral manifestations</i>	Included
<i>Creating an appropriate and safe environment</i>	Included
<i>Techniques for dealing with behavioral management</i>	Included
<i>Techniques for communicating</i>	Included
<i>Using activities to improve quality of life</i>	Included
<i>Assisting with personal care and daily living</i>	Included
<i>Nutrition and eating/feeding issues</i>	Included
<i>Techniques for supporting family members</i>	Included
<i>Managing stress and avoiding burnout</i>	Included
<i>Techniques for dealing with problem behaviors</i>	Included
<i>Other (specify below)</i>	Varies



Q37#2. Specify what type of training new employees receive before working in Alzheimer's disease or related disorders care. - Direct Care Staff

Required hours of training

<i>Alzheimer's dementia, other forms of dementia, stages of disease</i>	6+
<i>Physical, cognitive, and behavioral manifestations</i>	Included
<i>Creating an appropriate and safe environment</i>	Included
<i>Techniques for dealing with behavioral management</i>	Included
<i>Techniques for communicating</i>	Included
<i>Using activities to improve quality of life</i>	Included
<i>Assisting with personal care and daily living</i>	Included
<i>Nutrition and eating/feeding issues</i>	Included
<i>Techniques for supporting family members</i>	Included
<i>Managing stress and avoiding burnout</i>	Included
<i>Techniques for dealing with problem behaviors</i>	Included
<i>Other (specify below)</i>	Varies



Q37#3. Specify what type of training new employees receive before working in Alzheimer's disease or related disorders care. - Activity Director

Required hours of training

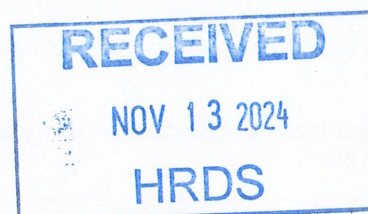
<i>Alzheimer's dementia, other forms of dementia, stages of disease</i>	16
<i>Physical, cognitive, and behavioral manifestations</i>	Included
<i>Creating an appropriate and safe environment</i>	Included
<i>Techniques for dealing with behavioral management</i>	Included
<i>Techniques for communicating</i>	Included
<i>Using activities to improve quality of life</i>	Included
<i>Assisting with personal care and daily living</i>	Included
<i>Nutrition and eating/feeding issues</i>	Included
<i>Techniques for supporting family members</i>	Included
<i>Managing stress and avoiding burnout</i>	Included
<i>Techniques for dealing with problem behaviors</i>	Included
<i>Other (specify below)</i>	Varies

Q38. List the name of any other trainings.

Video series on Alzheimer's disease, Ongoing CEU's, Conferences, 2 day Heartfelt Connections training

Q39. Who provides the training?

LPN, Administrator, RN Consultant, Guest Speakers



Q40. List the trainer's qualifications:

LPN, RN, Certified Trainor for Heartfelt Connections, Varies with subjects

Q41. What safety features are provided in your building? Select all that apply.

- Emergency pull cords
- Opening windows restricted
- Locked doors on exit
- Monitoring/security
- Cameras
- Family/visitor access to secured areas
- Built according to NFPA Life Safety Code, Chapter 12 Health
- Built according to NFPA Life Safety Code, Chapter 21, Board and Care

Q42. What special features are provided in your building? Select all that apply.

- Wandering paths
- Rummaging areas
- Other (explain):
Memory Boxes

Q42. If yes, what is your policy on the use of outdoor space?

With Supervised Access

Q43. What types and frequencies of therapeutic activities are offered specific for specialized dementia individuals to address cognitive function and engage residents with varying stages of dementia?

Our activities showcase eight dimensions of wellness: Emotional, Environmental, Health Services, Intellectual, Physical, Social, Spiritual, and Vocational. Our 4-6 staff-led activities are designed to incorporate one or more of these core dimensions. Our resident-centered programming prioritizes their interests and needs, and we also provide tailored opportunities for residents with higher stages of dementia through one-on-one direct care.

An example of our therapeutic activities is our use of music to help stimulate the limbic system which impacts emotion and memory. We apply physical movement throughout various activities to maintain mobility. We facilitate a range of engaging and interactive social activities that are specifically designed to encourage residents to interact, connect, and form meaningful relationships with each other. These activities are carefully curated to promote a sense of camaraderie and community within our living environment. We approach the redirection of behavioral issues with a keen sensitivity to discern the individual needs of each resident. Our dedicated focus is on uncovering and understanding the unique requirements of each resident, ensuring that we maintain their dignity and respect their individuality throughout the process.

Q44. How many hours of structured activities are scheduled per day?

- 4-6 hours

Q45. Are the structured activities offered at the following times? (Select all that apply.)

- Evenings
- Weekends
- Holidays

Q46. Are residents taken off the premises for activities?

- Yes

Q47. What techniques are used for redirection?

Validation, Distraction, 1:1 Visits

Q48. What activities are offered during overnight hours for those that need them?

Nursing staff leads/participates in a variety of activities that relate to residents interests.

Q49. What techniques are used to address wandering? (Select all that apply.)

- Outdoor System
- Electro-magnetic locking system

Q51. Do you have an orientation program for families?

- No

Q52. Do families have input into discharge decisions?

- Yes

Q53. How is your fee schedule based?

- Flat rate

Q54. Please attach a fee schedule.

[\[Click here\]](#)



Q55#1. Select all memory care services that apply. When answer is yes, provide whether the price is included in the base rate or at an additional cost. - Is it offered?

Assistance in transferring to and from a Wheelchair	Yes
Intravenous (IV) Therapy	No
Bladder Incontinence Care	Yes
Bowel Incontinence Care	Yes
Medication Injections	Yes
Feeding Residents	No
Oxygen Administration	Yes
Behavior Management for Verbal Aggression	Yes
Behavior Management for Physical Aggression	Yes
Special Diet	No
Housekeeping (number of days per week) Weekly and as needed	Yes
Activities Program	Yes
Select Menus	Yes
Incontinence Care	Yes
Home Health Services	Yes
Temporary Use of Wheelchair/Walker	Yes
Injections	Yes
Minor Nursing Services Provided by Facility Staff	Yes

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