

CREATING AFFORDABLE RURAL HOUSING WITH SERVICES: OPTIONS AND STRATEGIES

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April 2000

APPENDIX A – Facility Descriptions

MAINE

The four sites we visited in Maine included an assisted living demonstration project in a small coastal community, an adult family care home located on an island in Casco Bay, a residential care facility designed to serve a specific ethnic group, and a traditional subsidized housing project with a supportive services program.

Merry Gardens, Camden

Merry Gardens is a Type III Congregate Housing Program licensed under Maine's assisted living regulations and was developed in 1997 as one of the three assisted living demonstration projects under the MSHA and BEAS cooperative venture described above. Realty Resources of Rockport, and the Eastern Area Agency on Aging based in Bangor responded jointly to the state's request for proposal and received the award in mid-1996. Realty Resources is a for-profit company that created a non-profit subsidiary to take advantage of the financing available from MSHA, which included the Rental Loan Program, low income housing tax credits, and HOME program funds. The facility is managed by Realty Management.

Merry Gardens is located in a residential neighborhood in Camden, a mid-coast community with about 5,000 residents. The home is a two-story structure with 30 single units with approximately 350 square feet of living space. Each unit has its own bathroom, a kitchenette with a stove, and a door that locks. All units are wheelchair accessible and are furnished by the tenants. Common areas include a living room, sun room, dining room, sitting areas, and outdoor gardens. The base market rental rate is \$395, with lower rents for income qualified tenants subsidized by the Bureau of Elder and Adult Services. All of the tenants have low to middle incomes, and about 21 of the 28 tenants receive rental subsidies.

About half of the tenants at Merry Gardens need medications, more than half need assistance with bathing and/or mobility, and about forty percent of them are memory impaired. Services for tenants are provided by the Eastern Area Agency on Aging and may include

service coordination and care planning, personal care (most often bathing assistance), apartment cleaning, transportation, medication administration, meals, emergency call system, 24 hour staffing, activities, and pharmacy consultation. A key feature of the services program is that it must meet residents' scheduled and unscheduled needs around the clock.

Ten full time equivalent staff are employed by Merry Gardens. Hiring qualified staff has been difficult because Camden is the home of a large credit card service center and telemarketing site, which offers substantial signing bonuses to new employees, as well as competitive wages and benefits.

A "basic" service package provides seven hours of service a week for \$1,023 a month, and an "enhanced" package provides an average of fourteen hours of services a week for \$1,526 a month. The state subsidizes the cost of services based on the tenant's income, with residents responsible for paying either 30 or 40 percent of their income, depending on which service package they choose, as a co-payment. In contrast with Medicaid programs, however, residents are not subject to asset limits. Residents may also receive services they would be eligible to receive in the community through Medicaid, Medicaid waiver, Medicare home health services, or state-funded care programs, provided they do not duplicate services the facility is paid to provide.

Island Commons, Chebeague Island

Island Commons is an Adult Family Care Home located on Chebeague Island in Casco Bay, part of the town of Cumberland. There are 300 year round residents on the island, though the population swells to more than 1,800 during the summer. Island Commons is owned by the non-profit Chebeague Care Resource and had been in operation for six months at the time of this study. Located in a residential area in the middle of the island, it has four single rooms with 126 square feet each and one double room with 170 square feet. Common areas include a living room, a large vestibule with chairs, a sitting room, outside deck, kitchen and dining room, all of which were decorated and furnished as gifts or with family donations. Twenty-four hour staffing is provided by the Resident Care Managers, a couple with a child who live upstairs, and two full-time equivalent personal care aides. The multi-generation environment is very home-like.

Island Commons was conceived by Chebeague Care Resource, a non-profit corporation concerned with home health and long term care for the island's older residents. Chebeague Care Resource (CCR) began pre-development planning for an adult family care home in 1996, receiving financial support for planning activities from the town of Cumberland and The Island

Institute. In 1997, a donor deeded a home to CCR and renovations began with financing from the Maine State Housing Authority and a Community Development Block Grant. Other state agencies and many private individuals and organizations provided financial or in-kind support for the project. Island Commons clearly represents a community effort.

Because the building is completely debt free, the rent is only \$312 per month for a single room, and double that for a two-person room. Services include three meals a day, housekeeping, transportation, service coordination, medication monitoring and assistance with activities of daily living, for a monthly cost of \$2,400. One tenant is currently receiving Medicaid reimbursement for services. Public assistance for room and board is available for some residents through the SSI state supplement at a rate of \$659 per month.

Island Commons serves a frail population, including some residents who are nursing home eligible.

Three North Pleasant Street, Richmond

Three North Pleasant Street is a licensed Residential Care Facility located in Richmond, a town of about 3,000 people in central Maine that is widely known for its large concentration of older Russian immigrants. Three North Pleasant Street is a newly constructed building attached to a rehabilitated older house in a residential neighborhood. The facility is owned and operated by Richmond Eldercare, which is a non-profit community organization created specifically to develop programs and services for older Russian residents and other eligible individuals in Richmond and surrounding communities. In 1994 the organization began exploring housing options to meet the needs of this population, and submitted a proposal in response to a Department of Human Services announcement of the availability of Medicaid funds for residential care. Construction and renovations were funded primarily through Maine State Housing Authority programs, with technical assistance from the Genesis Foundation, some additional funds provided by the Maine Community Loan Fund and the Maine Homestead Land Owners Alliance, and on-going operating funds from the Johnson and Johnson Foundation to pay for community outreach and an activities director.

Three North Pleasant Street has twelve beds in total, half of which are in single rooms, and the other half in three double rooms. One single room and two double rooms have private baths, while the remaining rooms have shared baths. Residents furnish the rooms with their own belongings. Tenants range in age from 66 to 92 years old. Ten of the twelve current residents are supported by the Medicaid program and two pay \$90 a day from personal funds for their room, board and services. The facility has eight full-time equivalent staff positions,

including part-time RN consultants, and provides 24-hour on-site staff coverage. Services include three meals a day, daily housekeeping, service coordination, medication reminders/monitoring, assistance with activities of daily living, handling personal finances, care planning, and transportation to medical services, grocery stores and recreational and other social events.

Knox Hotel Apartments, Thomaston

Knox Hotel Apartments is a traditional senior housing project with independent living apartments, but which has an unlicensed limited Congregate Housing Services Program for four of its tenants. The housing is owned by a for-profit corporation and managed by a subsidiary of the Methodist Conference Home called ElderServ. Thomaston has a population of about 3,300 persons and is located in the mid-coast area of Maine.

The Hotel is located in the town's business district and has 29 apartments (25 single apartments and four two-bedroom apartments). All units have a private bath, a kitchen with a stove, and a locking door. Residents furnish the apartments with their own belongings. The building has several large common areas including a large dining area, and a very large living room divided into two large sections. Off of the living room, tenants have created a cooking area where meals are prepared for those who choose to participate in the meals program.

Knox Hotel Apartments employs a part-time housing coordinator and a part-time service coordinator, as well as a maintenance person, though staff is not available during the evening or at night. Four residents receive congregate housing services funded by the Bureau of Elder and Adult Services. They hire their own service providers, who are paid for through a contractual relationship valued at about \$9,000 per year between the Methodist Conference Home and the Bureau of Elder and Adult Services.

The meals program is unique in that it is run by a tenant cooperative. Tenants do the meal planning, cooking, shopping, and bookkeeping. The program provides three meals a week to other tenants for a requested \$3.00 donation per meal. Food costs are kept low through participation in the food stamp program, and the Congregate Housing Services Program can buy meals from the cooperative for participants in that program. The meals program has been an empowering experience for tenants and demonstrates a creative way to provide services in a traditional senior housing environment.

Village Care Project, Lincoln County

In addition to the sites already profiled, it is worth noting another project that is still in the developmental stage. The Village Care Project, planned by the non-profit ElderCare Network of Lincoln County, is conceived as a model supported housing program for the rural elderly. It will link together five small family-like eldercare homes (each with six residents for a total of 30). All will be licensed Adult Family Care Homes, eligible for Medicaid reimbursement. These will be scattered around Lincoln County in the villages of Boothbay, Waldoboro, Round Pound, Wiscasset, and Jefferson. By dividing the 30 residents among five villages, Village Care will provide a homelike atmosphere and improved quality of life for frail elders in their own villages, while taking advantage of economies of scale through central management. Economies are anticipated through menu planning, purchasing of food and supplies, financial management, billing and bookkeeping, staff training, and provision of respite care, maintenance and repairs. For example, the same registered nurse will supervise all five homes. It is planned that the homes will be occupied by spring 2001.

NEW HAMPSHIRE

For New Hampshire, we profile two congregate housing services programs – one federally funded and one state funded. We also discuss a combined independent and assisted living facility recently developed in a smaller community of about 6,000 residents.

The Tavern Project at Stafford House, Laconia

The Tavern Project is an alternative housing program serving 15 residents of the Stafford House, which is a 50-unit public housing complex for people age 62 or older and younger people with disabilities. Stafford House is located on a main street in the downtown section of Laconia, a community of approximately 17,000 year-round residents. Attached to Stafford House is a converted “mini-mall,” where a medical-model adult day center, the local Meals-on-Wheels distribution site, and a senior center are located.

The Tavern Project was modeled after the U.S. Department of Housing and Urban Development’s Congregate Housing Services Programs. Staff from the public housing authority began pre-development planning in 1993 and responded to a Request for Proposals issued by the New Hampshire Health Care Transition program. Other participants in the program’s development were the community action agency and Meals-on Wheels located in the adjacent mini-mall, a regional hospital, the New Hampshire Housing and Finance Authority, and the Bank of New Hampshire.

Stafford House consists of private single apartments of 200 square feet each. Each unit contains a living area, separate bedroom, efficiency kitchen or kitchenette and private bath. All of the units have locking doors. None are fully wheelchair accessible. A common dining area for the Tavern Project participants and a resident lounge are located just outside the manager's office. The building is within walking distance of the library, post office, various stores, churches and restaurants. Public transportation is available and there is a bus stop with benches at the front door.

Approximately twenty of the building's tenants are under age 65, and three-quarters of these have some form of mental illness, four have a physical disability, and one is a wheelchair user. Five tenants have probable Alzheimer's disease or other dementia with mild to moderate cognitive impairment. Twenty of the tenants who are age 65 and older require assistance with instrumental activities of daily living (IADLs), and five also need help with activities of daily living (ADLs).

To be eligible for Tavern Project services, participants must have limitations in at least three ADLs or IADLs. Participants pay 20% of their adjusted gross income for the services package, regardless of the number of services required. The remaining cost for services is subsidized through a grant from the New Hampshire Health Care Transition Program. Other services in the package provided by staff include weekly housekeeping, service coordination, IADL assistance, care planning, and planned activities. A local bank provides assistance on a monthly basis to tenants who need help handling their personal finances. Medication assistance and personal care services are available under contract with a private home health agency. Stafford House employs three and one-half full time equivalent staff, including a full-time resident/program manager, a kitchen aide, a meals coordinator, a housekeeper, and maintenance staff. Although the facility does not have 24-hour staff on site, there is a Lifeline Emergency Response system provided under a contract with New Hampshire Emergency Response.

Sunrise Towers, Laconia

Sunrise Towers is a traditional 98-unit high-rise public housing complex with a federally funded HUD Congregate Housing Services Program (CHSP) that serves 30 tenants. Sunrise Towers is located in downtown Laconia, a town of about 17,000 residents, within walking distance of the library, post office, various stores, churches, restaurants, an adult day program and a senior center.

Most of the units at Sunrise Towers are single units with separate bedrooms, but there are 12 studio apartments and 12 two-bedroom units. All units are wheelchair accessible and 2 are specially designed for individuals with physical disabilities. All have kitchens with stoves, locking doors, and private baths. Tenants decorate their individual units and are required to provide their own furniture. Each floor has a small common area that tenants have customized and use for informal social gatherings.

At the time of our visit Sunrise Towers had 117 tenants. There is a waiting list of 40 and it is estimated that the next tenant will have to wait 8 to 10 months for an available unit. The oldest tenant is 93 years old and the youngest is 42. Tenants include five people with Alzheimer's disease or other dementia and four younger people with physical disabilities. All 30 of the Congregate Housing Services Program participants require some level of ADL and IADL support services. The service package provided to participants is the same as at the Tavern Project. In addition to meals, the CHSP service package includes one hour of weekly housekeeping, transportation to medical appointments, service coordination and care planning, and assistance with ADLs and IADLs. Transportation and ADL/IADL assistance is delivered through contracts with outside agencies. As at Stafford House, there is no 24-hour staff coverage, but there is an emergency response system available. There are sixteen employees at Sunrise Towers, including the housing authority staff who work in the building, as well as housekeepers, kitchen workers, and maintenance workers.

The services program is a joint project of the local housing authority, HUD, and the State of New Hampshire. It is a non-licensed program which has been in operation for 6 years, but the HUD grant is ending in 1999 and the program's future is uncertain. Program administrators anticipate that to gain continued funding, the program may need to become licensed under state regulations.

Summercrest Assisted Living, LLC

Summercrest Assisted Living is located in a small, rural community of approximately 6,000 residents and opened in March 1998. It is an unlicensed independent and assisted living

facility, owned by a for-profit limited liability corporation. The corporate partners are a realty company (65% participation) made up of four local businessmen who developed the original concept for the facility, and a regional hospital (35% participation). The hospital also owns and operates a community health center, an adult day program, and a community mental health program for adults. Although Summercrest itself is not licensed, all on-site clinical services are provided by a licensed home health agency.

It was a local businessman who first conceived of developing an assisted living facility for area residents. He recruited three other investors and began pre-development planning in 1997, with construction beginning soon after. A building committee with members from the regional hospital and municipal government assisted in the planning. Financing was obtained from the private investors, a New Hampshire Community Reinvestment Corporation loan, and the federal Department of Housing and Urban Development. The New Hampshire Housing Finance Authority provided assistance to the project as a pilot program and plans to encourage two similar developments in rural New Hampshire.

Summercrest is a two-story structure designed to look like a New England style inn and is located one-half mile from the downtown area and within walking distance of the local medical center. It has 24 studio apartments for individuals using assisted living services, and 10 one-bedroom and 2 two-bedroom independent living units. The assisted living studios are 374 square feet and consist of a living area, bedroom area, kitchenette with refrigerator and microwave oven and a bathroom. The independent living one-bedroom and two-bedroom apartments are somewhat larger but have similar accommodations, with the addition of a complete kitchen.

Individuals in assisted living receive the following services, through various contractors, as part of their monthly fee: Three meals a day, housekeeping, service coordination, care planning, medication monitoring, ADL and IADL assistance, mental health and counseling services, planned activities, preventive health programs, and assistance with nursing home placement, if needed. The local community transportation service makes 4 stops each day at Summercrest. The facility has 24-hour staff on site, and also provides an emergency response system. Technically, Summercrest does not employ any staff. A residence manager, who coordinates activities and services, and maintenance personnel are employed by the partnering regional hospital, and all other services are provided by independent contractors such as a home health agency and food service provider.

Market rates for rent and services at the facility start at \$1,980 per month for a single-occupancy independent living one-bedroom, \$2,440 for a double-occupancy independent living

one-bedroom, \$2,750 for an independent living two-bedroom, and \$2,450 for assisted living studios. All services and amenities are included in the monthly fee. Of the 24 assisted living studios, 12 are set aside for individuals who meet the medical and financial eligibility criteria for New Hampshire's Home and Community-Based Care for the Elderly and Chronically Ill (HCBC-ECI), a Medicaid waiver program run by the Division of Human Services. To be eligible for HCBC-ECI an individual must be a Medicaid recipient, medically eligible for nursing facility level of care, and meet income eligibility requirements.

VERMONT

The following sections contain descriptions of three shared homes in central and southern Vermont, including two of the first shared homes developed in the state and one which opened more recently. The homes range in size from ten to twenty tenants and are located in communities with fewer than 5,000 residents.

Park House, Rochester

Park House is a shared home located in Rochester, a town of about 1,100 people. Built in approximately 1915 as a private home and later operated as an inn, it was renovated in 1990 to provide 17 individual rooms, with private or semi-private bathrooms, and a number of common areas for shared use. The house is adjacent to the town park on a double lot just one block from the town center and has been operating since August 1991.

Park House is owned by a local non-profit corporation, Rochester Community Care Home, Inc., which originally wanted to develop a nursing facility but found the cost prohibitive. Shared housing was an alternative presented by the National Shared Housing Resource Center, predecessor of the SHARE program. Park House is the first example of shared housing developed in Vermont using the financing and operating strategies previously described. Pierce Property Partnership was the project developer, putting together the financing package and overseeing the renovations. Funding sources included a Vermont Housing and Conservation Board grant, a community development block grant, and a mortgage loan from a local bank.

Bedrooms are located on all three floors of the building. Although an elevator is available, tenants living on the upper floors must be able to use the stairs in an emergency, a requirement of the applicable fire regulations. All the rooms have locking doors. None have in-room kitchen facilities, but tenants are allowed full access to the central kitchen. Seven rooms have private baths, two of which are wheelchair accessible; the remaining ten rooms share five

bathrooms. Rooms are rented unfurnished and tenants furnish them with their own belongings. Most rooms have space enough for a bed and for a sitting area.

Tenants pay \$400 per month for a room with shared bath, or \$425 for a room with private bath. For an additional \$300 per month, tenants are provided with three meals a day, monthly housekeeping, weekly bathroom cleaning, and some service coordination and planned activities. These services are provided by in-house staff, including an executive director, food services director, a live-in resident manager couple, and part-time kitchen and housekeeping staff. Additional services, such as personal care and medical services, must be obtained from outside providers or from family members. Some tenants receive state housing assistance and may receive home health care paid for Medicaid or Medicare, but there are no specific state subsidies for the services fee.

Tenants at Park House range in age from 75 to 91 years. One resident is a wheelchair user, some need the assistance of home health aides for personal care and medication monitoring, and several have mild or moderate cognitive impairment. All tenants are able to transfer without assistance from bed and toilet, which is a condition of continued residence.

Joslyn House, Randolph

Joslyn House is a twenty-bedroom shared home in Randolph, a town of about 4,800 people in central Vermont. It is located in a residential area one block away from the local hospital and several blocks from the town center. Joslyn House is owned by a non-profit community reinvestment organization, Randolph Neighborhood Housing Services. The house is run by a house manager couple who live and work full time at the house and has a staff of several part-time cooks and housekeepers; altogether, there are four and one-half full time equivalent staff positions.

Joslyn House resulted from the combined efforts of Randolph Neighborhood Housing, which wanted to develop housing for older adults in the community, and Arlene Wright, now one of the house managers, who was retiring and interested in developing a day program or other service program to meet the needs of older adults. Other individuals and organizations became involved in the planning and development process, including the SHARE program's predecessor agency. Primary sources of financing for the project were a mortgage from the seller (a charitable organization), a community development block grant, funds from the Vermont Housing and Conservation Board, and HUD funds from the local housing authority.

Joslyn House has twenty bedrooms and nine bathrooms (three rooms originally designed as space to lease as offices were later converted to bedrooms). Sixteen tenants

share semi-private bathrooms; half of these are adjoining bathrooms and half are in the hall. Four tenants share a single bathroom. Tenants' rooms are of modest size, averaging about 170 square feet, and have locking doors. Tenants furnish the rooms with their own furniture and other belongings. Common areas include a kitchen, dining room, two living rooms, alcoves and sitting areas, sun porch, activities room, workshop, laundry room, outside porch and yard.

Joslyn House tenants are generally able-bodied and range in age from 77 to 94 years old. Two or three tenants have mild cognitive impairment and ten to twelve tenants have non-Alzheimer's dementia. Nine need assistance with instrumental activities of daily living and seven need assistance with activities of daily living.

All tenants at Joslyn House pay the same base rent of \$500 per month, although some tenants are eligible for state housing assistance vouchers. Tenants also pay a monthly service fee of \$225, which purchases three meals a day served family-style in the dining room, monthly room cleaning and weekly bathroom cleaning. Joslyn House staff also provide service coordination and planned activities. Transportation services are provided through a contract with the local rural transportation service, for which Joslyn House pays. There are no state or federal subsidies for other services.

Evarts House, Windsor

Evarts House is a former private home of some historical significance, recently renovated to provide shared living for ten tenants. It is one of three restored buildings owned by Stoughton House Inc., a private non-profit organization which also owns and operates a licensed residential care facility in one of the buildings and is developing independent living apartments in the other. Stoughton House Inc. is formally affiliated with the Mount Ascutney Hospital and Health Center, which operates a hospital, nursing facility and rehabilitation center in Windsor.

Evarts House was conceived following a community housing needs evaluation in 1994, when the SHARE program proposed the idea of shared housing to the Mount Ascutney Hospital and Health Center and Stoughton House. The project was financed through a package of ten major funding sources, which included a mortgage loan from the Hitchcock Alliance, a HUD special purpose grant, a community development block grant, the town's revolving loan fund, Vermont Housing and Conservation Board funds, state and local historical preservation and land trust grants, and contributions from the principal partners in the development.

Evarts House is located one block from the center of Windsor, a town in southern Vermont with a population of about 3,700 people. It opened in August 1998 and is fully

occupied with ten tenants. Tenant rooms range in size from 200 to 400 square feet, and all are large enough to include a bed as well as a sitting area. Each bedroom has a private in-room bathroom. Eight rooms are fully wheelchair accessible. Rooms are rented unfurnished and tenants provide their own furniture and personal items. Common areas include a dining room, wheelchair accessible kitchen, and several other sitting areas.

Tenants range in age from 75 to 92 years old. Two tenants have mild cognitive impairment and two have moderate cognitive impairment. No tenants at present are wheelchair users, incontinent, or confined to bed, and none need help transferring or eating. Tenants must also meet income eligibility requirements and rents are set according to formulas based on the area's median income. State and federal development funding programs require a specified number of rooms to be allocated for tenants at or below 30 percent, 50 percent, 60 percent and 80 percent of median income, and rents are calculated as a percentage of income. Tenants may also be eligible for Section 8 subsidies, which are paid directly to the tenant.

Services at Evarts House are provided "cafeteria style" and priced the same for all tenants, regardless of income. The meals package of three meals a day costs \$250 per month and the housekeeping service, consisting of daily bath linen service and weekly cleaning, costs an additional \$100 per month. Staff provide some assistance with medication reminders and personal finances, and organize activities and transportation to recreational or social events. These in-house services are provided by staff that are shared with the residential care facility next door. Tenants may also arrange for personal care and medication monitoring through the local visiting nurses association.

MASSACHUSETTS

Because Massachusetts policies and programs are geared toward the development of relatively large facilities, we were not able to find any new housing with services models in the state that are serving an entirely rural population. We selected three facilities for this study, however, which taken together allowed us to suggest some models that might work in rural areas, though none of them taken alone fully met our criteria. One is a traditional congregate housing facility located in a town that is unquestionably rural, with a population of 8,300. The second is a new assisted living residence located in a town which, though relatively small (population 13,800), is located 35 miles west of Boston and within a short distance of several metropolitan areas. The last is a housing project in Gardner (population 20,000) which is one of the three pilot locations for the state's new Supportive Housing program.

Winslow-Wentworth House, Turners Falls

The Winslow-Wentworth House is a small congregate residence originally built in 1990 with Funding from HUD obtained through the state's Department of Housing and Community Development. Turners Falls (township of Montague) is an old mill town on the Connecticut River in western Massachusetts with a 1990 population of about 8,300. The house is located in a residential area one block off the main street with a small shopping plaza and super market within a block and several churches and a library within easy walking distance. The Winslow-Wentworth House was built and is owned by the Franklin County Regional Housing Authority. The project was financed with federal Housing and Urban Development funds administered through the Massachusetts Department of Housing and Community Development and the Executive Office of Elder Affairs. The planning process took several years and involved a citizens' advisory group, the housing authority, the Franklin County Home Care Corporation (which services as the local Aging Services Access Point), and the local council on aging.

The house is a two-story building with eleven units on the first level and six on the second. Of the 17 units, 16 are singles with an average of 390 square feet each and one is a double. All units have a bedroom, kitchenette, and a half bath that is shared in a mirror configuration between each pair of units. Several larger public bathrooms with showers or bathtubs are accessible from the hallways and shared by all residents. There are thirteen current residents ranging in age from 47 to 86, of whom nine are 65 or over, two are younger adults with physical disabilities, and two are younger adults with mental illness. None of the older group are seriously impaired or require intensive support services, although one of the younger physically-disabled adults is only partly ambulatory and requires help with transfers and eating, which is provided by a personal care attendant. Residents pay 30 percent of their income as rent and the difference between this amount and fair market rent (about \$450 a month for studio apartments) is paid from state funds.

There is no state licensing for congregate housing, and Winslow-Wentworth House operates under guidelines and regulations from EOE, DHCD, HUD, and state and local boards of health. Services are delivered by vendor agencies under contract with the home care corporation, and are paid for in the same way as services for individuals living in their own homes, using a sliding fee scale. Residents receive three congregate meals a day, housekeeping services as needed, and assistance with ADLs and IADLs. Medication monitoring and other skilled nursing services can be provided by certified home health agencies for individuals who qualify for skilled management through Medicare or Medicaid. Mental health

services are available through referral to a local counseling agency and paid for by Medicare, Medicaid, or private insurance.

The home care corporation employs a part-time congregate coordinator for the facility, but contracts with a homemaker service agency for cooking and housekeeping services. The housing authority provides property management and maintenance services. Winslow-Wentworth House does not offer round-the-clock staff coverage.

Corcoran House, Clinton

The Corcoran House is a newly established, forty-two unit “assisted living community” housed in a renovated 1890 brick school house. Clinton, an old mill and manufacturing town with a growing population of about 13,800, is located in central Massachusetts. Corcoran House is one block from the revitalized center of town, close to a drug store, banks, a café, and numerous other small shops and businesses. The primary entrance of the Corcoran House is now at the basement level on the side of the building, since the impressive granite staircase leading to the old front door is not wheelchair accessible. The basement is considered the first floor and has three floors above it. A new elevator connects all floors, but the main staircase has been left in place and creates a focal point for the entire building.

Corcoran House was developed and is owned and operated by a private for-profit corporation which responded to an RFP from the town of Clinton for alternative uses for the old school building. The financing package for the project included a private mortgage, low income housing tax credits, historic rehabilitation tax credits, HUD’s HOME program, tax increment financing, and a community block development grant.

Corcoran House has been certified as an Assisted Living Residence under the EOEIA assisted living regulations and has also been approved for Medicaid GAFC funding. More than half of the current residents come from Clinton and the rest from neighboring towns, confirming the developer’s belief that the market for assisted living facilities is basically local. Residents range in age from 67 to 98 with most being in their middle 70s. A few residents have mild cognitive impairment.

Individual units in Corcoran House are all studio apartments ranging in size from 325 to 450 square feet. Each unit has a kitchenette containing a sink, counter, microwave oven, small refrigerator, and a few cabinets, but no oven or range top. There is a living/sleeping room with a closet and private bathroom. Residents bring their own furnishings and may have family and guests in for meals and gatherings.

Rent and services are included in a single monthly fee. The service package includes a personalized health needs assessment and service plan, three meals a day, laundry and housekeeping services, medication monitoring, and limited transportation. Residents can choose from three service levels and are charged from \$1,950 to \$2,850 per month. The monthly fee is paid from some mixture of residents' personal funds, family contributions, and state SSI supplements and GAFC payments for those who are eligible. Staff consist of twenty to twenty-five full and part-time employees, including an executive director, an administrative assistant, an activities director, a registered nurse, a social worker, an on-call dietitian, a security guard, housekeepers, and personal care attendants. Corcoran House provides 24-hour on-site staffing and has a universal worker philosophy, so that most workers are able to do multiple jobs.

Church Street Housing Project, Gardner

The Church Street Housing Project is a traditional senior housing project in a high-rise building originally constructed in 1972, with a congregate housing section attached to the main building which was completed in 1996. Gardner is a town of about 20,000 located in the rural north-central part of the state. The project is owned and managed by the Gardner-Westminster Housing Authority, and is one of three pilot sites for the state's new Supportive Senior Housing Program. Initiative for the project came from the Executive Office of Elder Affairs, which has provided funding for services, and the Department of Housing Community Development.

The Church Street Housing Project has a total of 177 units. The average size of a unit is 470 square feet, and except in the congregate section, all units have kitchens and full private baths. The congregate section is essentially a congregate residence located within the larger housing project. It occupies three floors and appears newer, more nicely finished, and much more home-like than the older building. Common areas include a sitting area on the first floor and a kitchen-dining room on the second. Individual units have a half-bath, with no tub or shower and a kitchenette with a sink, stove top, and refrigerator but no oven.

State home care clients (tenants who qualify to receive regular state-funded home care services) at the Church Street Housing Project receive an array of supportive services, including service coordination, a daily meal, and scheduled personal care or homemaker services provided by the local home care corporation. A full-time service coordinator (who was previously the coordinator for the congregate section) is funded through the Supportive Senior Housing Program, which is also providing demonstration funds for 24-hour staffing to meet unscheduled needs of home care clients. Regularly scheduled services for tenants are

provided by the home care corporation on the same basis as services delivered in the community. The home care corporation receives fixed monthly payment per client and contracts the services out to local vendor agencies, billing Medicaid and EOEPA for services covered by those programs and clients for their share of costs. Home care clients, and other project residents who wish to participate, receive a congregate meal at noon five days a week (the project is a congregate meal site and serves some meals to non-residents), a continental breakfast on weekdays, and a breakfast cooked on-site Saturday and Sunday.