A community’s animosity toward bearers of bad tidings is a societal characteristic that has been with us since the ancient cultures. It is said that long ago it was common practice for a citizenry to stone or spear to death any messenger who brought news threatening to their community, as might be occasioned by word that their home forces had lost a battle, or of a raging epidemic in a nearby settlement.

Although punishments for bringing unwanted bad news today are much more subtle than physically painful, repeated occurrences of worrisome news serve to remind us that this archaic and ignoble tradition is still with us. Witness how skepticism or outright scorn typically first greets the whistle-blower who dares to inform of corrosive incompetence or corruption in a universally admired and blindly trusted institution. Presumably we react this way because our instinctive yearning to hear only good news remains so ingrained that we are repelled by anyone speaking critically of individuals or objects we want to respect.

CCRC residents who are visibly offended by any discussion of their community’s financial condition or its various services evidence a down-to-earth example of how difficult it can be to communicate on genuinely worrisome subjects. An unsuspecting resident might try to raise the issue regarding a CCRC’s less than encouraging year-end financial results only to hear, “I came here to be free of worry, please don’t disturb me with anything that is so negative!” Or perhaps a plaintive, “We always hope everything will work out for the best, even though we know financial problems are never resolved by miracles.”

This “wanting to feel good” human tendency is easily exploited by individuals skilled at camouflaging a subject’s negative effects. So our spin masters tell us that a CCRS’s treasury is loaded with millions of dollars in cash and investments, though neglecting to add that virtually every penny is tied up by offsetting loan obligations. Or residents are informed that their CCRC is paying little more than 1% on expansion project funds, without also telling them this is a short-term construction loan that must be refinanced simultaneously on completion with a much more costly term loan—problematical in a tight credit market particularly if that CCRC is one with barely any net worth.

Yes, we do have much to be grateful for in our communities, but none of the pleasures we enjoy should ever distract us from correcting a severely weakened financial condition or the troubling shortcomings in a Health Services department that has been cited by both regulatory authorities and dissatisfied patient testimonies.

Surely, it is more than timely to face up to such long-standing problems and the reality they will never be corrected except by first frankly acknowledging they exist. Such issues are not insurmountable if management and residents can work in concert to resolve them. The success of any CCRC’s future rests on that kind of a collaborative approach.
Updates

The Carlisle In our Fall 2018 issue, we reviewed the situation at The Carlisle, a condominium CCRC in San Francisco. After several years of neglect, their highrise building suffered extensive exterior damage due to wind action and water penetration of the building's exterior surfaces. In response to their management company's decision to have residents bear the full cost of repairs (estimated at $14 million), the residents filed a class action suit in San Francisco Superior Court. They also filed a formal complaint with the Department of Social Services.

While the court action is still in process, the DSS complaint has been addressed. The Complaint Investigation Report can be accessed online as follows. The link to the DSS transparency site is: https://secure.dss.ca.gov/CareFacilitySearch/. Click on the table titled Elderly Assisted Living then click on the Facility Type drop down menu and click Residential Care for the Elderly Continuing Care Contracts option. The Carlisle facility number is 385600359. If looking up by the name of the facility enter Carlisle (not The Carlisle). Under the All Visits tab, click on the date 12/07/18 (the date of the Complaint Investigation Report). In summary, the complaint alleging possible violation(s) of the Admissions Agreement was found to be unsubstantiated. However the remaining complaints that the licensee (the provider, Sunrise Senior Living) failed to maintain the building resulting in extensive damage; that there was a lack of air flow and deprivation of light and sunshine within resident units; and that the licensee failed to exercise general supervision over the affairs of the facility were all substantiated. Sunrise Senior Living did submit to DSS a required Plan of Correction, which was approved by the department.

Legislation As reported in the Winter 2018 issue, the Legislation Committee presented a list of legislative goals to the Board at its October meeting. That list was approved and printed as our legislative “Wish List” in that same issue. Those legislative goals have been reviewed with our lobbyist, and discussed with potentially interested legislators. As of the date of this writing (late February) those contacts have yet to result in a bill package. However, we are in discussion with an assemblymember with a goal of developing a spot bill within the coming weeks.

Finance Forum

Last year, the Spring 2018 issue of this newsletter announced an invitation to members of local CCRC finance committees to collaborate on issues of mutual concern. Over a dozen local members responded, and a group we are calling the Finance Forum emerged.

During the Forum’s initial conference call, it was decided to move forward with a combination of quarterly conference calls and the establishment of an online chat room. CALCRA’s website manager created a workspace using the Slack platform, on which we’ve established several channels to organize discussion and comments: agreements/contracts, budget setting (including monthly fees), disclosure/reporting, legislation, and resident resources.

The second conference call focused on monthly fees and resident participation in the budgeting processes of our communities. The next conference call will be scheduled during March.

We'd like to reiterate the invitation to all those who toil on our local Finance Committees to participate in this Forum. Contact Margaret Griffin at info@calcra.org or (916) 573-1247 for more information.
Planning for the End of Life

Who wants to plan for the end of their life? Apparently, not many of us do. A 2014 American Journal of Preventive Medicine study found that 74 percent of adults have no healthcare proxy, living will or advance directives; and only 42 percent have a will, according to a 2017 survey by Caring.com.

While it can be overwhelming to be asked to make healthcare decisions for someone who is dying and is no longer able to make his or her own decisions, it is even more difficult if you do not have written or verbal guidance. How do you decide what type of care is right for someone? Even when you have written documents, some decisions still might not be clear since the documents may not address every situation you could face.

Two approaches to this situation might be useful. One is to put yourself in the place of the person who is dying and try to choose as you believe he or she would. This is called substituted judgment. Some experts believe that decisions should be based on substituted judgment whenever possible.

Another approach, known as best interests, is to decide what would be best for the dying person. This is sometimes combined with substituted judgment.

If you are interested in having a say in what happens, there are many forms and processes to consider in determining what options you want at the end of your life, and how to communicate your wishes to others. In addition to your last will and testament, you might consider: a living will (identifies what medical treatments you do and don't want in different circumstances); physician orders for life-sustaining treatment (POLST, in California the primary resource for information and how to use this document is the Coalition for Compassionate Care of California, info@capolst.org, 915-489-2222); power of attorney for healthcare/healthcare proxy (select an individual and at least one alternate to act on your behalf); durable power of attorney (a person to make sure that bills are paid and other financial matters are attended to should you become incapacitated); do not resuscitate/do not intubate orders; organ donor designation; digital assets memorandum (specify who will own or have access to your digital assets and accounts like social media and email, see California Probate Code §870); and, what are your preferences for hospice and/or palliative care?

All this can seem rather daunting – just the amount of paperwork, let alone the conversations and discussions with those you designate to act on your behalf.

In response to resident concerns, some CCRCs are offering group discussions and information on end of life planning. At University Retirement Community, residents are using the Consumer's Tool Kit for Health Care Advance Planning, published by the ABA Commission on Law and Aging, www.abanet.org/aging, in resident-led group sessions. The Sequoias of San Francisco has distributed “My End-of-Life Decisions: An Advance Planning Guide and Toolkit” available from Compassion and Choices, www.compassionandchoices.org. There are other tools available on the internet as well.

Planning for end-of-life care can bring you peace of mind knowing your wishes have been expressed and will be honored; and for those who will act on your behalf, they won't have to guess about what you would have wanted.

Dues Are Due

The CALCRA membership year runs from January – December. To see the year for which you've paid, look at your address label on this newsletter. Following your name is a 4-digit number which is the year for which you've paid. If it says 2018, we have not yet received your payment for 2019.

Payments ($25 for an individual, $35 for a couple) may be sent to Al Hale, 1515 Shasta Dr., #4104, Davis, CA 95616. Contributions in addition to dues are always welcome!
Volunteer for a Board Committee

The CALCRA Board of Directors has established three standing committees. Local CALCRA members are encouraged to volunteer for any of them. The committees are:

Governance: This committee continually reviews CALCRA's governance processes and procedures, including review of the bylaws, and proposes necessary changes. The committee also receives and screens nominations to the Board and is responsible for the education and orientation of newly-elected Directors. It also drafts and organizes operational policies and arranges for periodic self-evaluations of Board operations.

Legislation: This committee develops and maintains the list of the Association's legislative goals and objectives, which is submitted to the full Board for approval each year. In coordination with our lobbyist, the committee facilitates contacts and actions of local members in support of, or opposition to, bills of interest to CALCRA.

Membership: This committee is responsible for developing a plan of action which will maintain and increase membership in the Association. The plan includes initiating contacts in those communities where we have yet to recruit members, and offering support to those CCRCs with an established membership base.

Most committee work is conducted via email and conference calls. Please contact Margaret Griffin at info@calcra.org, or (916) 573-1247 for further information.

Member Questions

Previous issues have included responses to questions from members. We want to encourage all members to share questions or concerns of interest to CCRC residents. Is there an issue at your community or an experience of your residents (positive or otherwise) that other CCRCs would benefit from knowing about?

Questions or items of interest related to CCRC resident matters may be sent to: Margaret Griffin, info@calcra.org, or 1515 Shasta Dr., #1401, Davis, CA 95616.

WWW.CALCRA.ORG

We're on the Web!!!