

Aging in Place: How to Cope

A Conference for Condo, Co-op, Townhouse & Apartment Residents, Owners and Managers in Hawaii

Conference Report

State Capitol Auditorium, Honolulu, Hawaii

October 25, 2003

Acknowledgements

Conference Planning Committee:

Dr. Cullen Hayashida, Assisted Living Options Hawaii, President
Y. Jane Sugimura, Esq., Hawaii Council of Associations of Apartment Owners
Milton Motooka, Esq., Community Associations Institute – Hawaii Chapter
Betty Lou Larson, Catholic Charities Elderly Services Housing Assistance Program
John Morris Esq., Community Associations Institute – Hawaii Chapter
Caroline Bell – Certified Management Inc.
Velda Chong, Assisted Living Options Hawaii, Staff
Ruth D. Willenborg, Assisted Living Options, Director

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Catholic Charities Elderly Services
Child and Family Services
Hawaii Meals on Wheels
Wilson In-Home Care Services

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Report Prepared By

Andrew Warrick & Asha Rathina Pandi Department of Sociology University of Hawaii Honolulu, Hawaii

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Welcoming Speech

Dr Cullen T. Hayashida, President Assisted Living Options Hawaii

Cullen Hayashida, Ph.D. is a graduate affiliate faculty with University of Hawaii's Nursing, Sociology and Center on Aging Programs and Kapiolani Community College. He has been involved with long-term care service development since 1979 and had developed over 20 long-term care initiatives aimed at finding cost effective solutions to long-term care service delivery. He is President of Assisted Living Options Hawaii which has been advocating for the development of affordable assisted living and other residential options for Hawaii's frail elderly since the early 1990s.



Welcome to the "Aging in Place: How to Cope" Conference! This conference was organized to address the special needs of owner-occupants, resident managers, condo associations and management companies given the growing needs for support services for retirees in Hawaii's high rises.

The people of Hawaii are growing older faster than ever. Those over 65 years of age number over 180,000 and continue to grow at a rate 2 to 3 times faster than the national average. At the federal, state and county levels, resources are thinning and we are asked to do more with less. More efforts are being placed into increasing efficiency, improving access to information about services, improving service coordination and integration, redirecting more money to home and community-care and teaching consumers and caregiver how do assume more responsibility.

What can we accomplish today? Perhaps the message is in our theme, "Aging-in-Place: How to Cope". Aging-in-place is an approach to senior services that suggest that retirees should stay put and more or less services should come in as health conditions get better or worse over time. The alternative would be for services or providers to stay put and that seniors go to them or relocate to where the services are provided as their health conditions change. While we all want to remain at home where we know we recuperate better, condos, co-ops, townhouses and apartments have many barriers to make aging-in-place occur. How then do we facilitate aging in place in condos over the years to come? The following are three (3) goals that we wish to achieve during this conference:

- 1. We will provide an overview of the issues and challenges facing seniors and the disabled living in high rises from three perspectives: the consumer, the manager and public policy.
- 2. We will provide some practical suggestions regarding how to resolve today's problems today. This will occur in our two breakout session.
- 3. This conference will provide some general recommendations for positive social change with our 'Visions for the Future' panel.

We recognize that this process will just start the dialogue. To that extent, we encourage you to consider joining one of our co-sponsoring organizations as we build a coalition of concerned citizens

Seniors' Needs Betty Lou Larson

Betty Lou Larson has been the Housing Assistance Program Director at Catholic Charities Elderly Services for 22 years. The program assists hundreds each year with housing needs and advocates for well-designed, affordable, supportive housing for seniors. She is a Board member for both a State's Housing Corporation which provides and advocates for low-income seniors and a non-profit housing corporation that has initiated supportive services in all of their new senior housing projects.



- Over 90% of seniors want to stay in their homes. "Aging in Place" looks at how seniors can stay where they are and still receive care and support. Many high rises are becoming Naturally Occurring Retirement Communities (NORC).
- Seniors will resist admitting to changes (i.e. potential strokes, health, etc.) for fear of being asked to leave their place of residence. This creates problems for housing management and families.
- The number of people over 85 in Hawaii who are most in need of supportive care will continue to rise and this will greatly affect senior-housing. As people age, their dependency level increases and a greater demand is placed on others. Many of Hawaii's seniors are immigrants that may lack English language skills, so there is the added problem of communication with the staff of various care agencies. Over twenty percent of the seniors do not have support of family or friends.
- People should be allowed to live independently as long as they want and are able, but as they become more fragile and unable to care for themselves and their conduct affects other residents in the building, family members and building management may seek or recommend home-care services to assist these residents, so that they can age-in-place.
- Problems faced by seniors:
- Feelings of helplessness and inability to care for themselves
- Insufficient finances due to fixed income and insufficient assets
- Financial abuse They may end up co-signing a loan for a grandchild or having their homes foreclosed by unscrupulous lenders.
- Neglected health and physical appearance
- Transportation issues Inability to visit friends or make appointments readily
- Language and communication barriers
- Mental limitations financial concern (how to handle investment), maintenance issues, health, safety
- Anxieties
- Lack of family support
- Issue on confidentiality

Seniors' Needs Perspective Ralph S. Matsuda

Ralph S. Matsuda is a condo owner-occupant, a former resident of an assisted living facility and a caregiver. Mr. Matsuda is also a retired Certified Financial Planner who conducts financial awareness seminars and workshops for senior citizen groups, government agencies and non-profit organizations. The seminars are educational in nature, with no products sold or endorsed. He is currently conducting 60 to 70 seminars and workshops per year and is a member of the Honolulu Committee on Aging.



- Eight-five percent of long term care services in homes are provided by family caregivers and friends. Often middle-income families' older adults depend on children for support. Middle income families do not have the wealth to afford many services but at the same time, they are not eligible for low-income Medicaid insurance coverage.
- The number of people over 85 years old will triple in the next ten years. Ten thousand seniors in Hawaii are at-risk of needing nursing homes while the number of available nursing home beds state-wide is far less than that and beds per capita is about the lowest in the nation.
- The monthly cost for the average nursing home is \$7,500. Having to pay between \$7,000 and \$8000 a month for nursing home care can wipe out a family's savings quickly and will eventually impoverish our seniors to become wards of the state.
- Assisted living costs between \$2000 and \$5000 a month in a licensed facility
 which includes meals, limited health maintenance, chores and housekeeping
 services. Assisted living facilities usually accommodate more than 200 residents.
- Presently, there is a large number and/or percentage of seniors in need of home
 care services in condominiums. There is a need to consider establishing adult day
 care centers in or near condominium buildings or projects (social activities, health
 care, and other home care needs). Assisted living-type services will also reduce
 the cost to seniors needing services because the cost would be shared.

Seniors' Needs Perspective Richard Port

Richard Port has been an advocate for condominium owners for more than 20 years. As a condominium owner, a former Board President at Yacht Harbor Tower and a former member of the Hawaii Civil Rights Commission, he brings an understanding and appreciation of the importance of ensuring that the rights of condominium owners are respected. He has collaborated with others at Yacht Harbor Tower to identify creative ways to help seniors who reside there.



- Some of the problems faced by seniors include, but is not limited to, failing eye sight, difficulty in maintaining a clean environment, physical constraints from disabilities and memory loss.
- In many instances, the problems faced by seniors are not recognized as significant problems or they are simply unaware that there is a problem. Some suffer from dementia and have little awareness of what is happening around them. Others suffer from strokes and may not be able to reach an elevator in time to get help.
- Frail seniors in condominiums are challenged with: changing bulbs, plumbing, home repairs, cleaning and maintenance of unit, etc.
- The Yacht Harbor Tower does provide some services for a fee for retirees such as changing light bulbs and help with groceries from car to apartment, etc). Seniors are charged a fee in 15 minute segments. More suggestions and ideas will be provided during the breakout session.

Managers and Condo Associations' Perspective

Milton Motooka, Esq

Milton Motooka, Esq. is an attorney with Motooka, Yamamoto and Revere and has been representing condominium associations exclusively as his legal practice. He is also associated with the Community Association Institute – Hawaii Chapter.



- Individual apartments are the responsibility of owners to maintain, while common areas in such buildings fall under the jurisdiction of the board of directors.
- Some boards run multi-million dollar operations, but also use unpaid volunteers. These boards must govern the use of the common elements in apartment complexes, such as the exercise room, pools, the hallways, etc. They receive their guidelines from the rules set forth for the apartment that was pre-established and stated in the project document declaration.
- If something is not provided for in the bylaws, the Board of Directors of an apartment must seek an amendment in cases where a particular senior-needs issue would be addressed. Ultimately, if a certain senior care service is not provided for in the regulations of the apartment, the amendment must be passed for it to become a mandate of that particular apartment to provide the given service.
- This raises the question: Is it fair to place onus of care solely on apartment management? In most cases, it was not their original intent to have to cater to the elderly specifically by providing special care services.

Managers and Condo Associations' Perspective

Richard Emery

Richard Emery is the President of Hawaii First Inc., a local condominium management company. Richard Emery has direct experience with managing a senior-living condominium and advising other condominiums on senior issues. Richard Emery is a certified manager of community associations and a professional reserve specialist. He is also an appointed federal bankruptcy trustee.



- Condos are more than a matter of sharing common elements and seniors have the right to live in homes or condos without harming their own health or that of others. Management should take care of seniors, but cost and liability are two major things that limit the development of new programs for seniors in condos.
- <u>Problems</u>: The most common senior related problem experienced by those in a condo is noise. Television sets often have their volume turned up really high which disrupts other tenants, particularly in smaller apartment buildings. In one instance, cork insulation was installed around designated senior rooms to deafen the noise. There has also been a dementia case where seniors believed that the outdoor sprinklers were video cameras that were spying on them.
- <u>Solutions</u>: To overcome such issues, the condo board should work with seniors to establish guidelines, and also consult health care providers for their input in providing assisted living type services for their elderly tenants. Even simple things like key checks can be a big help to seniors. Since this will eliminate the need to remember if they have their keys every time they leave, and will no longer have to worry about losing them.
- It is important to remember that all condominiums are not created equal, and in many cases some have considerably more financial resources at their disposal than others.
- It is also important to remember that in the case of most condos, it was not part of their original plan to address the specific needs of seniors, so they may lack the special services, as well as the means of obtaining those services, that some seniors need.
- Ultimately, it is important to keep a positive spirit with regards to this issue, and to work with condo boards in devising some sort of plan to address the specific needs of their senior residents.

Managers and Condo Associations' Perspective

Surita Savio

Surita Savio is the President of Insurance Associates, an insurance agency founded in 1969. She has served as president of the Hawaii Independent Insurance Agents Association. Sue Salvio also belongs to the Insurance Women of Honolulu and the National Association of Insurance Women. Ms. Savio has specialized in providing insurance services for condominiums, cooperatives, homeowners' associations and similar developments.



- Condominium and Co-operative Housing Corporation Bylaws require the purchase of insurance. In buildings that have more seniors residents, the risks of injury increase and the cost of insurance also increases. Having seniors as residents is a liability to a building because they could easily get into simple accidents (such as falling) that have dire consequences. To avoid lawsuits and other legal repercussions, insurance is necessary, but it becomes much more costly for buildings that have many senior residents.
- The average cost of annual insurance for a condo is \$60,000. Converting a condo into an assisted living facility will double the cost of insurance. Therefore, it is important for all apartment owners to consider how insurance costs will affect their financial situations. Just like all common expenses, the additional cost of insurance is paid by all owners. This means that non-seniors owners will be paying for the additional risk of having older residents in the building. Is this fair to them?
- Insurance companies will look at project documents (i.e., the Declaration and by-laws in a condo and the articles of incorporation and by-laws in a co-op) in determining insurance rates. If a project amends its documents to change the primary use of the building to an assisted living facility. Its insurance rates will increase to address the additional risks associated with that use

Public Policy Perspective Jane Sugimura

Jane Sugimura is an attorney since 1978. She is a partner in the firm of Bendet, Fidell, Sakai & Lee and her main concentration is commercial litigation. She has been a member of the Hawaii Council of Associations of Apartment Owners (HCAAO) since 1988 and is its current president and chair of HCAAO's legislative committee. HCAAO is active in supporting laws that affect condominium and co-op apartment owners. Ms. Sugimura is currently serving as a member of the City and County's Leasehold Task Group and is a member of the State of Hawaii Real Estate Commission's Advisory Committee on the re-codification of HRS 514A



- Everyone, i.e., owners, residents, Board members and management needs to become more sensitive to the issues regarding the aging population in condominiums and co-ops. Public policy related to condominiums is often driven by owners and managers, who then bring the issues to the board's attention.
- Condominiums were first built 35-40 years ago and many original owners are still residents. These residents should be able to live independently as long as possible in their apartments and they need to communicate with the Board and management as to their needs and to the extent there is no conflict with the condominium documents (Declaration and by-laws), those needs should be accommodated.
- If issues are not brought to the Board's attention, nothing will be done about even simple things that affect seniors (i.e. how fast elevator door closes, doorknobs on access doors). It is important that seniors talk to each other, express concerns, and work with boards.
- Examples of Potential Projects: (1) Management should update resident registration cards and devise a way for management to contact family members or friends, if needed, i.e. for health or emergency reasons. (2) Legislation is needed to limit the liability to management, the Board and employees, who try to assist the elderly residents in their buildings. This will motivate condo associations to initiate supportive services. (3) Legislation is needed to establish Special Purpose Bonds for encourage the implementation of "assistance in living" centers for a condo or group of condos. This would benefit not only the seniors in condos and co-ops but the general public since it will allow them to age-in-place and have the services delivered to them in their homes, (4) Residents need to raise the awareness level of State and local agencies and legislators to the need for providing home-based care services to allow them to age in place.

Public Policy Perspective Dr Cullen T. Hayashida

Cullen Hayashida, Ph.D., President, Assisted Living Options Hawaii

- There are three public policy issues related to aging-in-place in condominiums and high rise apartments that I'd like to discuss:
- First, government funding for health and human services are being cut back at the federal, state, and county levels. This means that older condo residents cannot assume government assistance without political advocacy work. Organizing helps. Even if funds are limited, it is important to raise the issues related to aging in place in condos as an important policy issue that requires more attention. Government agencies for example can be requested to redirect its staff to evaluate what other states are doing regarding Naturally Occurring Retirement Communities (NORCs). In addition, condo associations need to proactively organize and collaborate with other condos, community associations and government agencies to seek solutions collaboratively.
- Secondly, keep in mind that the tragic cases that we from time to time hear about just represent the tip of the iceberg. For every one frail elderly that needs a lot of long-term care services, there are probably 10 others who could use some supervision or standby assistance. Thus, while we are focused on long-term care services for the very frail, we need to keep in mind that there are many more that also need help as their health conditions deteriorate over time. It is therefore important to begin sensitizing managers of condominiums and condo association residents to the needs of seniors. This unmet needs that must be addressed will persist and grow and therefore will require a long-term commitment at many levels.
- Third, it is important to "build community" as a social resource to help solve some of the challenges that we are anticipating. The Community Association Institute is a national organization that represents all condo associations. While it continues to do important work, little attention has been placed on "building community" or relationships. Robert Putnam's book, *Bowling Alone*, addresses how discontentment and social problems emerges out of the breakdown of relationships and community. We need to ask whether there are little things that condominium associations can do to support community building and an ethic of people looking out for each other. Building communities can help reduce social problems and bring in necessary services faster through better organization.

Public Policy Perspective Senator Carol Fukunaga

State Senator Carol Fukunaga represents the 11th Senatorial District. She was a State Representative from 1978 to 1991 and a State Senator since 1992. Senator Fukunaga has been involved with numerous issues related to high-rise apartments and condominiums including most recently with converting condominiums into assisted living facilities. Her Senate district probably has one of the highest concentrations of condos, co-ops and apartments in the state and the aging-in-place that is occurring.



- People living in condominiums will face issues not typical to other places. Over 9000 the 11th Senatorial District (McCully, Tantalus, Makiki, Punchbowl) live in condominiums or co-ops. High density residential areas in urban Honolulu has seen an increased demand in emergency medical service and areas where there are a lot of seniors may see ambulances come by 2-3 times a week. There is also higher incident of crime in surrounding areas of condominiums and co-ops.
- In urban Honolulu, most condominiums and co-ops were built in the 1960s and 1970s (almost half) before one-to-one parking was required. With an older resident base, there is a need for more parking as the need for supportive services to the owner-occupants become important.
- Sen. Fukunaga has been active in legislation to better control liquor establishments in areas of high condominium density, since it is believed that they lead to high incidences of crime and increases the risk of building security.
- There is a need to determine how we can encourage the aging-in-place of seniors in condominiums and in high-density areas to effectively permit residents the ability to remain where they have been all of their lives.

Questions and Answers

Q1. Are security guards and management staff aware of the problems or needs of the elderly?

The staff is generally not aware; there is a need to make them aware. Management is often overwhelmed and there is a need to educate them. In the meantime, seniors need to speak up and make their complaints known through the appropriate channels.

Q2. How many condos have been converted to assisted living facility?

By definition assisted living facility means 24-hours professional care, meals, as well as other services as required by public licensure law. Assisted living facilities must be properly licensed. Based on the state's definition, only one facility (i.e. One Kalakaua) is both a condominium and an assisted living facility. This conversion began when the building was being sold.

Q3. There is a 2 or 3 year waiting period to get into a nursing home, how can we shorten it?

In comparison to national averages, Hawaii is has considerably fewer nursing home beds. There is at present 56 nursing home beds per 1000 elderly in the U.S. and only 26 nursing home beds per 1000 elderly homes in Hawaii. Hawaii's nursing home bed supply has remained relatively constant while its older population has been increasing rapidly. The bed supply has not increased due to limited reimbursements principally from Medicaid. To improve their financial situation, nursing home try to focus on rehabilitation service for the elderly and bill Medicare. However, this means that services can only be for about 3 months or less. Those needing just custodial or maintenance level care are not insurable under Medicare

To improve the availability of "nursing home level" services under Medicaid, the state has encouraged the development of extended care homes that are licensed to care for nursing home level residents in care homes and adult foster homes.

Q4. What are services available to seniors?

- 1. <u>Hospital care</u> for people suffering from acute care needs such as a heart attack, broken bones.
- 2. <u>Skilled Nursing Facility (SNF) services</u> are Nursing homes for patients that require the services of an RN for at least for 8 hours per day due to a "skilled nursing need" that have (eg. Rehabilitation, dressing changes, IV medications, etc).

- 3. <u>Intermediate Care Facility (ICF) nursing home services</u> provide maintenance and custodial care and is not covered by Medicare. Generally, this entails services for those who are incontinent, confused or unable to walk.
- 4. <u>Residential Care Home services</u> are provided by licensed Adult Residential Care Homes in either small family homes or larger institutional facilities for those who are even less disabled than ICF level nursing home patients as a rule. Medicare and Medicaid will not reimburse for this level of care but supplemental security income (SSI) will.
- 5. <u>Assisted Living Facility services</u> provides housing, medication management, health services, meals, private apartments, chore and housekeeping services and a variety of recreational activities. The services are paid privately.
- 6. <u>Adult day care services</u> are for those who live at home but require day time supervision, socialization and rehabilitation services.
- 7. <u>Home Care services</u> include a variety of both health related (e.g. Home health Care) as well as non-health related services (e.g. Personal care, meals on wheels, chore services, etc.) for the disabled in the home setting.
- 8. <u>Senior housing</u> represent another resource in the community with some senior services, such as emergency call services, transportation, and assisted shopping.

Q5 What is the difference between Medicare and Medicaid?

Medicaid is a medical welfare insurance plan for anyone below the federally specified poverty level (eg. About \$700/month) and with assets less than about \$2000. Medicaid covers one's medical expenses for physician, hospital, therapies, medication, nursing home and for home and community based services under several demonstration projects.

Medicare on the other hand is a entitlement-based health insurance program for seniors over age 65. It covers hospital, physician services and a very limited amount of skilled nursing home care services. It generally does not cover long-term care services.

Q6. As a service provider, how to reach condo management to offer services?

There is a list of condominiums that is available. Vendors and/or service providers should contact the property management companies and the condominium associations' Board of Directors for access. The management offices should be approached to introduce the services that service providers can offer. Residents in Condos do meet on occasions and it is possible to arrange for opportunities to share your services.

Breakout Workshop Sessions: Practical Applications

Information and Access to Private and Publicly Financed Support Services:

Moderator: Lot Lau

- 1. Lot Lau, Senior Information and Assistance Service and Senior Hotline, City and County of Honolulu's Elderly Affairs Division
 - Elderly Americans Act of 1965 led to the creation of the Elderly Affairs Division to ensure that the rights of seniors are protected. Lot Lau is the Coordinator for the Elderly Affairs Division's Information and Assistance Service and assures that the public has access to information about senior services on a timely basis.
 - The Elderly Affairs Division (EAD) is responsible for distributing funds for Americans 60 and over, and these funds come from both state and federal sources. EAD gets reports of seniors living in poor conditions.
 - In one instance, there was a report of a frail elderly person in a high rise taking care of invalid husband by the Fire Department. The Fire Department wanted solution to problem, as it is a safety risk to those individuals concerned. In this instance, a lot of 911 calls were made simply because the husband fell and the wife could not pick him up on her own. In this specific case, the Apartment was messy and smelly (health and fire hazard) and too much for the couple to manage. It is often denial that lets things get this way as well as limited fixed incomes. Many seniors are also unaware of supportive services available to them.
 - The role of the Elderly Affairs Division is to provide services, but there is often a problem of first getting people to accept help from outside sources.
 - There are a variety of programs (meals on wheels, counselling services, etc) that can provide essential services to elderly, so they should be utilized. EAD's Senior Hotline services can get the process started. Refer to the EAD Senior Information and Assistance Handbook.
- 2. **James H. Pietsch,** Professor of Law, University of Hawaii, William Richardson School of Law and Director of the Elder Law Program
 - The University of Hawaii's Elderly Law Program provides legal services (e.g. advanced directives, legal service referrals, issues related to wills, trusts, etc.) in conjunction with the City's Elderly Affairs Division. There are plans to



expand the program with law students, but currently it is very small.

- Some General Suggestions:
- Be aware of the limitations of Medicare and Medicaid.
- Be aware of the legal aspects of hiring a caregiver.
- Remember the Motto "Plan for the worse, but expect the best". Those that plan usually do not encounter problems.
- Contact the Elderly Affairs Division so that help and counselling services can be given as needed.

3. Stella Wong, Executive Director, Catholic Charities Elderly Services

• There once was an elderly person that had problems sorting through her mail. This lead to the implementation of a community assistance program at Catholic Charities that began providing assistance with simple daily tasks, such as help opening and sorting mail. The program also helps the elderly to pay their bills on time without having the elderly client relinquish control over their money. Instead, the agency simply reminds them and helps them go through their required payments. This program also found ways to help when grandchildren or other family members were financially abusing them.



- Catholic Charities Elderly Services provides a variety of senior services such as
 case management, housing assistance, assistance with chores, escort service for
 medical appointments, shopping assistance, translation assistance or respite to
 caregivers. It also manages the Lanakila Senior Center. The overall goal is to keep
 people safe.
- 4. **Janette Hammel,** Honolulu Gerontology Program and Case Manager for Project Reach
 - The Child and Family Services' Honolulu Gerontology
 Program focuses on home and community-based services
 rather than institutional care. Service is provided based on
 the clients' need for services and not income. The agency
 gets referrals from family, case managers, and a variety of
 other sources.
 - The Honolulu Gerontology Program provides services such as case management, care planning, education, counselling, support and exercise programs.
 - The Reach Program is a special program that focuses on issues related to preventing abuse financial, emotional, physical, etc.



5. **Diane Terada**, Director, Hawaii Meals on Wheels

The Hawaii Meals on Wheels Program is one of two home delivered meal programs on Oahu. The other is called the Lanakila Meals on Wheels Program. The Hawaii Meals on Wheels program provides hot meals Monday through Friday and on holidays and also provides important personal contact with those that live alone. About 90% of the program's clients are over 60 years old and the average age is between 70 and 80 years old of age. The program attempts to provide 1/3 of daily dietary requirements for each older person served when they are delivered lunch.



- The actual cost of each meal is about \$4.80. Clients are asked to contribute to the cost but are not required to pay anything. Some people use Food Stamps to pay.
- The program currently has a long waitlist. Even if there were no waitlist, it still takes about 2 days before an applicant can be processed before the first meal can be delivered.
- Presently, the program does <u>not</u> deliver to condos or retirement communities.

6. Shelly Wilson, Executive Director, Wilson In-Home Care

- Wilson In-Home Care is a Private duty home care service that only accepts out-of-pocket payments from the clients.
 Medicare will not pay for its services but long term care insurance usually pays for its services.
- Three Types of Home Care Services:
 - a) Companionship and other simple tasks.
 - a) Home assistance with housekeeping, driving, etc.
 - b) Personal Care provided by a certified nursing assistant that helps with bathing, dressing, meal preparation, medication, medical needs, etc.
- The costs of these services range from \$12 to \$25 an hour depending on the service and the home care company that provides it. Look for agencies that are state registered, properly insured, and that conduct background checks on all their service workers.
- The service hours range from 1 hour a week to 24 hours a day, 7 days a week, 365 days a year.
- Check the Yellow Pages in the Telephone Directory under <u>Home Health Services</u> or Nurses & Nurse Registries for a listing of other agencies.



Management Options in Dealing with Elderly Frailty, Fair Housing and ADA Regulations

Moderator John Morris

John Morris, Esq. has been a local attorney since 1984 and joined Ashford & Wriston in 2001. Mr. Morris focuses on representing condominiums, cooperatives and other types of homeowner associations. He served as the State's first condominium specialist from 1988-1991 and drafted a number of bills affecting condominiums which were subsequently enacted into law. He continues to be active in testifying and writing on condo-related legislation and legal issues.



Licensing is important for any plans to develop senior related services. For further information, contact the State Department of Health. The following are some legal issues that might need to be considered:

- American's with Disability Act covers all commercial building requirements. Who pays for the modification depends on the business. Minimally, it is necessary to meet the building code requirements.
- Fair Housing Law is only for residential housing. Owners must be able to reasonably accommodate the frail and disabled. This imposes restrictions on what a board can do. It is possible for this law to override Condo Association board policy. Condominium associations should look at reasonable accommodation to allow pets even if the bylaws do not accommodate. Letter from physician is important in having a pet in a "no-pets" building.

1. Surita Savio, President, Insurance Associates

- If 10 condominium residents want a nurse to be a caregiver that will place a liability on the condo association, if the association pays for that service. It is best that everyone makes their own accommodation and do not expect board to be the "baby-sitters". Resident manager should accommodate parking needs of service providers.
- If a nurse hired by a condo association makes a mistake, the condominium association is liable and that will definitely affect the insurance premium of the association.
- The condominium association can assist as facilitators but should not hire the professional caregivers as employees. Examples of facilitation assistance could include help with opening the elevator or slowing down the speed at which the door closes.

2. Richard Port, Resident - Owner

- ResponseLink is an example of an emergency alarm monitoring and reminder service in Hawaii that requires that the client wears a pendant. When the button on the pendant is depressed, almost immediate access is available to responders. In a condo, security guards could be designated as first responders and could be allowed to go up to the unit to check. Arrangements would need to be made to have the security guards have the keys to one's condo unit. It is possible to subscribe to this service for about \$35 per month. It also has the ability to remind an elderly person when to take their medications or to be available to converse with them when they are lonely or depressed. This type of service is very useful for those who are frail and who live alone.
- Yacht Harbor Tower has made arrangements to nominally charge residents for limited services. For example, security guards can assist with bringing down luggage, helping with groceries, hiring taxis and buying anything needed for elderly, etc. The charge is \$3 per 15 minutes of service. Arrangements can also be made to borrow wheelchairs and crutches. Electrical products and appliances such as air conditioners and lights can be inspected quarterly. For postal service, if mail is not picked up, someone will go up to the apartment to check on the unit. This type of arrangement could easily be duplicated at other condos.

3. Caroline Bell, Certified Management Inc.,

• It is not easy for a condominium association to provide services. Commercial service is great. Some elderly people are being "dumped" on to the association and resident mangers are forced to take care of them. Adult children though should be responsible for their parents if parents cannot care for themselves.



- Associations do not have enough staff to help the elderly in every building. In providing services one must get contacts.
- Changing a condominium into an assisted living facility is not easy and must be done in accordance to assisted living licensure law. Association have to abide by the guidelines or work to change the laws.

4. Richard Emery, President of Hawaii First Inc.,

Providing assisted living type services can take on a variety of forms and fill the
different needs elderly persons may have. Think in terms of "assistance in
living", rather than becoming assisted living facilities with its licensure
requirements.

Questions and Answers

Q1. More condos should have assistance in living. Some senior citizens will not get help. How do we get laws passed to help this people?

Provide family members with emergency contacts. Legislations have to be changed to limit the liability of condominium associations wishing to assist. Regarding elderly abuse and neglect, it may be necessary to call the state's adult protective services office for assistance. Action may be able to be taken against adult children.

Visions for the Future- Rapid Fire Recommendations

1. Lot Lau, City and County of Honolulu's Elderly Affairs Division

- The Kupuna Care Program requests financial payments for elderly services.
 However, the cost to individuals for Elderly Services from the City and County of
 Honolulu is less than what it actually costs because of subsidies from state and
 federal and local funds. In the meantime, the Baby boomers should strongly
 consider long-term care insurance.
- Consult the Elderly Affairs Division's Senior Information and Assistance Handbook
- Condo Management should help organize and facilitate better services for elderly, give discounts, contract with private clinics, learn about meals on wheels, transportation, assisted shopping among other services that are available.
- People should work to be good neighbors-take interest in frail people in the unit, look at them, ask them how they are doing, and organize friendly neighbors programs.
- Condominium associations should consider contracting to help with needs of the elderly.

2. Richard Port, *Condominium Resident – Owner*

- Call for a neighbourhood volunteer program such as telephone reassurance calls
 to the elderly once a day just to check up on them. Managers should work with
 board members to create neighbourhood watch programs
- Board should be facilitators
- Condominiums should have list of services like plumbers, restaurants, companies cleaning apartments, agencies to provide assistance

3. Betty Lou Larson, Catholic Charities Elderly Services

- Communities must enhance the aloha spirit; know the elderly who live close by. This must be done on a consistent basis.
- Build partnership between management, board of directors and managers of senior services like meals of wheels and transportation for the elderly
- Evaluate the need for additional lighting
- Managers must have skills to cope. Consider educational opportunities for management companies, board members, and staff regarding senior services and the aging process. Many agencies are willing to provide this at no cost.
- Onsite services services could be useful.

- 4. Caroline Bell, Certified Management, Inc.
 - Provide affordable service for seniors
- 5. Richard Emery, Hawaii First Inc.
 - Accept responsibilities and be clear and concise in whatever we do.
- **6. Jane Sugimura,** *Hawaii Council of Associations of Apartment Owners (HCAAO)*
 - Change the law to protect condo owner and managements companies
 - Condominium resident-owner registration forms should be revised to include more information about the disabled and frail elderly and their emergency contacts. Associations should also consider a short form that requests health related information of elderly resident
 - Arrangements should be made to approach home care agencies and other nonprofit organizations that serve the elderly. They provide a variety of services and may be possible to assist.

EVALUATION

There were approximately 200 attendees this half-day Saturday event at the State Capitol. The event was free to the public. A large percentage of them were senior owner-occupants of condominiums. About 63 or 31.5 percent of them filled out the Evaluation Form.

Questions	Yes	Maybe	No	No response	Percent Yes*
1. Were the goals of the conference clear?	61	1	3	6	92,4%
2. Were the goals of the conference achieved?	56	1	2	12	94.9%
3. Was the conference beneficial to you?	63	2	2	4	94.0%
4. Overall, were you satisfied with the conference?	60	1	4	6	92.3%
5. Did the conference leave you with ideas and tools that you can begin using today?	62	3	2	4	92.5%

^{*} Non-responses not included to calculate percentages

6. What did you like most about the conference?

- Breakout workshops.
- The variety of speakers and subjects.
- Opportunity to present services and information to an audience that needs information.
- Great information.
- Clear, concise, professional, intelligent organization and presentation plus care in
- staying with the time limits. Good information and ideas for the future.
- Presenting many issues regarding aging populations here in Hawaii.
- Getting contact names and phone numbers and e-mail addresses, great ideas on organizing condo owners into communities.
- Learning of the various services available to the aging.
- The broad range of information presented.
- That it occurred
- To learn about the efforts to address the needs of the elderly (of homeowners)
- Milton conducted questions and answers very well.
- Long overdue

- Brochures on available aging services and specific info from speakers on elderly services that are available.
- Last panel: visions. Ideas for vision of future.
- Senator Carol Fukunaga.
- Handouts
- Central location, easy access information on resources, excellent resource speakers, thank you for the coffee break, delicious coffee and snacks.
- Glad to hear that aging in place concerns in private buildings are being addressed. I'm a gap group person! I like the vision prospect and ideas!
- It made people aware of situation and hopefully started thinking to take action.
- The panelists. All panel speakers very excellent. Variation of expertise and experts. Different viewpoints. Excellent speakers
- Breakout session and question and answer period.
- Basic information available to seniors.
- The overall participation by sponsoring groups should be broadcasted via on Olelo Cable public television.
- There were options out there. Learned something that I wasn't aware of.
- Variety of speakers, resources in community and state/local/private perspective.
 Favorite tool: Senior Handbook and Legal handbook. Thank you! And other resources for education and awareness.
- Glad written report to go to legislation but unsure if recommendations are clear enough; all depends on who writes it.
- Vast information re: preparation for "incapacity" and about the different agencies for seniors from the resourceful speakers.
- The opening session with brief overviews by different panellists.
- Breakout session in room 2.
- Thank you for a wonderful, informative first conference.
- Thank you! I'm 96 and heartened.

7. What did you like least about the conference?

- No advance information about parking in flyer.
- Seems to assume role of elders is only as passive recipients of services.
- Too short. Not broad enough.
- Nothing. Thoroughly enjoyed the morning: very informative.
- Lack of presentation of nursing case managers in assisted living to present their views regarding service needs and demands.
- Unable to hear some speakers Podium mike did not work well.
- Not knowing parking was for free on Saturday. It should be posted on the wall. IRRITATING!!
- Refreshments were good but please provide healthy refreshments. You ran out of coffee. No tea.
- Splitting into 2 breakout groups. What did I miss in the group I didn't attend?
- Lack of restriction to specific subject matter, moderation should not allow going off on tangents.

- Seating arrangement theatre style may not have been best for the breakout sessions
- Opening session was not useful. Skip intros; go straight to Q and A.
- Everything is on the way out!
- It did not address concerns for apartment owners.
- With so many seniors present, sound amplification was too SOFT.
- Having to sit for 2 hours straight. Difficult for seniors in the audience.
- There was no representation on what caregivers/companions provide.
- I found out about it at the last minute via an notice that was too small.
- The registration table and brochure tables were a little unorganized, people assigned to the brochure tables should be a little more personable.
- A solution to get cooperation of a 'trial home' resident.
- Want to meet and discuss issues with panellists but lack of time.
- Did not mention about any preparation financially for aging populations.

8. How could the conference be improved?

- Breakout workshops a little longer.
- Creative thinking
- Perhaps longer.
- Was quite perfect as given. Thank you so much for organizing it. To "age-in-place" is such an excellent idea. Even with a great deal of money, it makes sense.
- Needed more discussions on financial preparations for the aging populations. Legal protection for condominium boards for their intervention.
- Good as an overview. On going conference to educate public to help testify at legislative hearings/lobbying.
- Suggestions for persons living alone to notify others in an emergency where to find important documents. I.e. A notice on refers door or list of doctor, lawyers, etc.
- Provide more time for each speaker. Agenda should be provided prior to conference.
 Allow for attendance to both breakout sessions.
- Better ads, better feedback for attendees, wireless mikes for audience question and answer sessions after every panel discussion.
- Small group input from answers.
- Please add info on parking: where to enter, which spots to park, and whether the parking meter needs feeding or not. Please tell attendant sitting behind glass window to alert parkers w/out being asked.
- Have objectives printed in flyer. Clearer goals.
- I noticed some seniors at this conference. Need to accommodate them. Sitting for 2 hours for some were pretty hard.
- Use PowerPoint to project key points. Plan to have separate "focus" meetings for condo owner, board and managers.
- More time on solutions/visions.
- More of these conferences which would educate more seniors and our issues.

- Breakdown into more open discussion groups specific to those groups. Care for seniors, one for managers, one for boards.
- Limited liability legislation.
- Sound system in auditorium be improved
- Longer breakout time. Seniors need more time to use rest-rooms.
- Include other resources.
- Put coffee urns on both ends of table so no traffic jam occurs.
- More small group discussion.
- This conference was time well spent for me.
- Should be held again in the future.
- Provide a list of phone numbers and websites of participant organizations.
- Include a more holistic level of presentation.
- Time for questions.
- Announcing the conference in all media frequently. Have the conference more often.
- Better communication to the public of the offerings of the conference.
- Attention to/focus on role of individual to maximize functional capacities.
- Include seniors who have needs and have arranged for them to be attended.

9. If another conference were held in the future, what other topics would you like to see discussed?

- Options for those who cannot stay in place, i.e. Nursing home, assisted living facility, care home, senior housing, etc.
- Further elaboration on areas covered.
- Enhancing self advocacy skills for elders.
- More information on individual home owners problems.
- Employment development, social issues, homeless, drug abuse etc. Different industries: high tech, tourism, etc.
- Have experts from different agencies come talk to the groups.
- More in depth information on those topics mentioned today.
- Have some good models of actual projects to describe graphically and to show pictures of (e.g. Slide show or brief videos)
- Community problems.
- Long term care insurance. Counselling services for seniors to elderly in condos.
- Clearly identify levels of care by stages of function that would qualify for seniors
- Privacy versus names of owners living within the association.
- A representative of long term care insurance. A representative of social security coverage. A representative from handicap services.
- Ongoing dialogue in quality of life.
- Individuals in private home. Non-condos or high density locations.

- Condo that allow animals. How to get rules changed.
- Establishing/supporting mini-outlets of supermarkets in the condo bldg/or very near w/out resident needing to cross the street.
- How can elderly avoid fraud and scams? What to do if we become victims?
- More time devoted to topics specifically directed or of concern to boards (condo).
- End of life issues, legal issues, (estate planning), what the other states do.
- Aging in place in a single family dwelling.
- Condo liabilities. What can be done legally? Aging condos plus aging owners.
- Liability: what can management do and what can't they do?
- Funds.
- Elder law. Fair housing (apartments).
- Would like managers/condo boards go into more depth on issues they face w/ elderly residents and steps they take in solutions to encourage them to adopt "best practices" in the bldg.
- How can private developers with state and federal assistance build lower cost senior housing units to help the increasing elderly population? Present senior housing are too expensive for most middle income people.
- Legal obligations of condo association to take care of elderly.
- The services already available which SRS are not familiar with. The need for assessment for elderly needing help, especially frail elderly.
- Hemlock society presentation w/ pro and con debate. Presentation of organizations serving the homeless, with reactions from the audience (including the homeless) on how to improve.
- More home health care options.
- Cost of nursing home.
- I would like more private agencies involved.
- How to improve the quality of life for individual particularly social issues. How to keep seniors interested in living when they have limitations.
- Help for the middle income level elderly who do not qualify for Medicaid but for limited Medicare can't afford long term health care.
- More of the same and always new advances in aging in place issues.
- Education of managers.
- I am willing to participate in another conference to reach owners and board members who could not be here. (Lot Lau, elderly affairs)

10. In addition to those made by the last panel, do you have any other suggestions or recommendations to improve the lives of frail elderly, retirees, or the disabled in Hawaii's high rise apartments?

- Condos keep lists of services from the outside that give special rate to owners in each condo and are reputable.
- Provide additional parking spaces for assisting persons.
- Ouestions and Answers Section in a newsletter format & dissemination to all condos.
- Allowing seniors to have adult pets if senior can handle the responsibility of pet ownership. Services avail on short-term basis when an elevator is out of service.
- Habitats for humanity presentation, with amplification and alternatives by other similar organizations from other parts of the world (we need to hear success stories here!)
- More advertising for youth volunteering and its value both for the volunteer and the elderly.
- How to involve families/community in positive ways. Seminars to educate families and community re aging and services. How family/friends could minimize cost for services.
- Set up breakout session in different levels of needs or services provided. Example: private duty, everything you want to learn about nursing homes, other assisted living facilities.
- Encourage citizen to understand and plan ahead before aging takes place, don't just emphasize handouts to seniors as their rights (entitlement).
- Tax credits, affordable services.
- Board of directors should set up meetings to hear problems and concerns of the elderly population that live in their condos and aim for possible solutions. Also attempt to educate all residents of condos on aging issues.
- Some speakers need to be closer to the microphone! Elderly living in apartments owned by the state or city and are managed by private company need to have more say in their accommodations and resident services providers. For instance, if contract calls for independent living and having only a day-time care giver, why? Contract calls for no more than 2 persons in a studio and no more than 3 in one bedroom. Why can't a relative be the additional person. Is there an age limit? Does a resident services provider needs a social workers degree? If not, why? This person will be dealing with senior problems, right?
- Public website sponsored by organization with issues and solutions.
- Needs assessment.
- Need for handyman services or something a man of the house could have done in 5-10 minutes.
- More funding for emergency response! Not enough ambulances.
- We need to improve the lives of elderly living in single-family residence also.
- Elderly Hotline. [City & County of Honolulu's Elderly Hotline is 523-4545; Each County's Office on Aging has a Elderly Hotline]
- Need an informative video geared for condo office staff, security guards, custodians, maintenance, etc. To raise their consciousness regarding the potential problems and issues of elderly and aging.

- Animal pets are very necessary to seniors.
- How about something like a beeper with a button warn around the waist. If a problem occur, press button to alert the manager.
- This conference results and report should be passed on to all board of directors and resident managers.
- Understanding Medicare benefits and how to apply for benefits. Transportation services beyond Handicabs. Liability protection of condo boards for organizing elder services.
- Emergency issues: what to do in medical emergency. Maybe, assign volunteers in each building. Condos should create a plan of action.
- Create a communities support system and have a day care type setting with crafts, exercises, movies, etc.
- Meetings or conferences, workshops to inform and help condo associations needed work together, share various projects or common services.
- More legislative actions made improve the welfare of the elderly and disabled.
- Perhaps involve key community resources: the bus, taxis, emergency medical services.
- Provide training and the proper methods.
- Associations could host an educational session for bldg. Residents about aging, home safety, personal safety.

Resource Organizations

1. Assisted Living Options Hawaii

Cullen T. Hayashida, Ph.D., President

P. O. Box 22597

Honolulu, HI 96823-2597

Phone: 721-1201

Email – cth@hawaii.rr.com

Website: www.assistedlivinghawaii.com

2. Community Association Institute - Hawaii Chapter

Milton Motooka, Esq.

c/o Law Offices of Motooka, Yamamoto & Revere

1000 Bishop Street, Suite 801

Honolulu, Hawaii 96813

Phone: 532-7900 ext. 512 Email: mmotooka@lava.net

3. Hawaii Council of Associations of Apartment Owners

Y. Jane Sugimura, Esq.

c/o Law Offices of Bendet, Fidell, Sakai and Lee

Davis Pacific Center

841 Bishop Street, Suite 1500 (15th Floor)

Honolulu, HI 96813 Phone: 524-0544 x 112

Email: yis@bfsl.com

4. Hawaii Real Estate Commission

335 Merchant Street, Room 333

Honolulu, HI 96813 Phone: 586-2643

Website: http://www.hawaii.gov/hirec/

5. Catholic Charities Elderly Services

Stella Wong, Executive Director

Betty Lou Larson, Elderly Housing Assistance Program

2745 Pali Highway

Honolulu, Hawaii 96817

Phone: 595-0077

Email: swong@catholiccharitieshawaii.org

6. City and County of Honolulu's Elderly Affairs Division

Karen Miyake, Executive Director

Lot Lau, Coordinator, Senior Information and Assistance Services

715 South King Street, Suite 200

Honolulu, Hawaii 96813

Phone: 523-4545 – Elderly Hotline Website: www.elderlyaffairs.com

7. Child and Family Services – Honolulu Gerontology Program

Douglas Kreider, Director Janette Hammel, Program Reach 200 North Vineyard Blvd. Bldg B.

Honolulu, Hawaii 96817

Phone: 543-8497

Website: www.cfs-hawaii.org

8. Elder Law Program

James Pietsch, Professor of Law William Richard School of Law University of Hawaii 2515 Dole Street, Room 225 Honolulu, Hawaii 96822

Phone: 956-6544

Website: www.hawaii.edu/uhelp

9. Hawaii Meals on Wheels, Inc.

Diane Terada, Director P.O. Box 61194 Honolulu, Hawaii 96839-1194

Phone: 988-6747

Email: hmowed@hawaii.rr.com

10. Wilson In-Home Care Services

Shelley Wilson, Business Manager P.O. Box 2058 Honolulu, HI 96805

Phone: 596-4486

Email: shelljw@aol.com

11. Richard Emery, President

Hawaii First, Inc. – a Condominium Management Company

900 Fort Street Mall, Suite 1220

Honolulu, HI 96814 Phone: 531-5566

12. Surita Savio, President

Insurance Associates, Inc. 33 South King Street, Suite 6th Floor Honolulu, HI 96814

Phone: 538-6938

13. State Senator Carol Fukunaga

11th Senatorial District Hawaii State Capitol, Room 216 415 South Beretania Street Honolulu, HI 96813 phone 808-586-6890, 737-2246

e-mail: senfukunaga@Capitol.hawaii.gov

14. John Morris, Esq.

Law Offices of Ashford & Wriston 1099 Alakea Street, Suite 14th floor

Honolulu, HI 96814 Phone: 539-0400

Email: jmorris@awlaw.com

15. Ralph Matsuda

Condo owner Resident – Caregiver

Retired Financial Planner Phone: (808) 521-6412

16. Richard Port

Condo owner Resident Yacht Harbor Tower

Phone: 941-9624

Email: portr001@hawaii.rr.com