



CONSUMER SUMMARY STATEMENT

Welcome to our community. Thank you for taking the time to consider Brookside Place for your next move. We are a tight knit community that cares and respects the uniqueness of those we serve.

1. Summary of the care and services we provide.

Brookside Place provides all state required services, as negotiated with our residents and/or their legal representative. Services may include general assistance with activities of daily living (bathing, dressing, grooming, ambulation, eating, toileting etc), health monitoring, food service which includes select modified special diets (reduced sugar, simple modified texture, small frequent meals), medication assistance, housekeeping services and social and recreational activities. We also coordinate needed medical appointments and transportation for medical appointments. Our staff will coordinate the ordering of medications, durable medical equipment, and medical supplies if needed and requested. We may also coordinate the provision of health services from outside providers such as Therapy, Home Health, Podiatry, Hospice etc., and provide or arrange intermittent or temporary nursing services for residents.

2. Summary explanation of the types of care and services we do not provide.

Brookside Place staff will work closely with our residents to support their choice to remain in their apartment recognizing that some residents may no longer be appropriate for community-based care setting due to safety and medical limitations. Brookside Place does not routinely provide the following services: two-person transfer, full assistance with activities of daily living, full assistance with eating, medically complex diets, tube feeding, non-routine ostomy care, routine administration of injections other than insulin, care for those aggressively wandering/exit seeking, care for medical or nursing condition that is complex, unstable, or unpredictable and exceeds level of health service / personal care service our community provides, care for a resident who requires nursing tasks which can't be delegated or require a nurse to assess before and/or after the treatment, care for residents who are bed bound, or unable to evacuate per fire & life safety requirements, exhibiting aggressive or unsafe behavior which poses danger to self or others, or exhibiting behavior which repeatedly and substantially interferes with rights, health, safety of the resident or others, or whom engages in illegal drug use or commits a criminal act that causes potential harm to resident/others.

3. If your needs exceed the care and services we provide, we may ask you to move-out.

When your needs exceed the care and services we provide, we will meet with you to discuss the circumstances, attempting to determine the most appropriate care plan and setting to

meet your care and service needs. If we cannot properly care for you at our community due to your increased needs, we may work with you to identify a more appropriate setting. If an agreement is not reached despite our best efforts, and attempts to resolve the issue are not successful, we may issue an involuntary move-out notice.

4. If you leave our community to receive acute medical, psychiatric, nursing facility or other care, we will conduct an evaluation before you can return to our community.

Before you can return to our community, a qualified staff person will re-evaluate your condition and determine if our community can continue to adequately meet your needs. If we determine that we can no longer successfully meet your needs, we may need to discuss and help you identify a more appropriate setting and issue an involuntary move out notice. We will notify you of this determination as soon as possible and before you leave the acute care or other setting.

5. You have the right to ask for an administrative hearing if you disagree with our decision to issue you an involuntary move out notice. The requirements for requesting a hearing can be found on the Administrative Hearing Request form MSC 0443. You may also contact the Oregon Long Term Care Ombudsman for assistance in requesting a hearing. The phone number for that office is: 800-522-2602 or 503-378-6533.

This document shall be provided to all prospective residents and is listed in Section 26. Acknowledgement of Provisions, in the Residency Agreement which shall be reviewed and signed by the Resident prior to move-in.
