Application Package

Rosealta I | 4318 – 53 St | Camrose | T4V 4G3

Rosealta II | 4221 – 55 St | Camrose | T4V 5J4

Camrose & Area Lodge Authority

Attn: Lodge Manager
4318 – 53 Street
Camrose, AB T4V 4G3

Tel: 780-679-0851
Fax: 780-679-0852
Email: RosealtaLodge@bethanygrp.ca

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About the Camrose & Area Lodge Authority and The Bethany Group

The Camrose and Area Lodge Authority (CALA) has overall responsibility for the operation of the seniors' lodges in Camrose and Bashaw. Our board has representation from the City of Camrose, the County of Camrose, and the Town of Bashaw. CALA has engaged the Bethany Group to provide management services for the lodges. CALA meets several times each year with representatives from the Bethany Group in order to receive financial and operational reports regarding the activity in the lodges.

The lodges provide housing opportunities for one of the fastest growing segments of our population. Our lodge residents are provided with comfortable accommodations, meal service, laundry options, plus a host of additional services which contribute to an enjoyable standard and quality of life.

It is the responsibility of CALA to assess the adequacy of the facilities that we provide for seniors. To that end, we receive regular survey data regarding the opinions of our residents. We also take the initiative to support new construction and renovations as required.

In 1995, The Bethany Group assumed management and operations of the lodges while reporting to the Board.

Originally established in 1922 by the Lutheran Church to operate a home for the aged in Bawlf, Alberta, the organization today operates pursuant to the Bethany Nursing Home and Auxiliary Hospitals Act, as well as a Public Housing Management Body pursuant to the Alberta Housing Act. The Bethany Group is driven by the people who work and volunteer for the organization to make the lives of the people they serve better. It also continues to honour its faith-based roots and provide a wholistic approach to caring for its clients.

LODGE PROGRAM

The mandate of the Seniors Lodge Program is to provide affordable room and board for senior citizens who are functionally independent or functionally independent with the assistance of existing community-based services.

The facilities are audited by and in compliance with the standards set by the Government of Alberta.

The *Lodge Priority Rating System* is a standardized lodge entrance criteria across Alberta. Through an application and interview process, an applicant's eligibility is assessed with consideration given to low-to-moderate income seniors 65 years or older.

Lodges provide the privacy and comfort of home while offering a community environment where an active, carefree life-style is encouraged.

Core services provided by the lodge include:

- basic room furnishings (if required);
- weekly housekeeping services;
- three meals per day, as well as daily snacks;
- building security;
- 24 hour non-medical staffing;
- access to community-based services; and,
- opportunities for life enriching activities to enhance physical, emotional, social, spiritual, and intellectual well-being.

To find out more about the lodge program, please feel free to contact the Lodge Manager.

Lodge Criteria

The following information and conditions are presented to help lodge applicants and their family members make plans for appropriate housing choices. Listed below are areas that need to be considered when choosing the appropriate facility. Where the manager or coordinator feels that the applicant's needs may not be met with confidence and safety, alternate housing options will be discussed.

Please note that Lodges are not a substitute for Continuing Care; however, individuals who receive support and assistance from community supports (e.g., Home Care) may be eligible.

An applicant must meet and maintain the following minimum standard of wellness as an entrance requirement to the Lodge:

- Is able and willing to participate in the activities of the lodge and to benefit from the lodge environment and lifestyle. For example, can:
    - negotiate long hallways;
    - participate in family style dining;
    - manage personal laundry;
    - live with independence and safety in the lodge setting; and,
    - understand and follow instructions for evacuation in case of a fire; etc.).
- Has stable health, and any medical conditions are manageable within a lodge setting (e.g., making use of available community support systems, etc.).
- Is willing and able to maintain personal care and hygiene (e.g., bathe at least once a week or more often, if necessary). They are also able to handle their own toileting without help, and if there is some degree of incontinence, is willing and able to manage that incontinence without help.

- Is able to move about independently or with the use of mechanical aids, and can move from lying down to sitting to standing without help.
- Is not in need of extensive guidance and direction from others to get through the day (i.e., is not suffering from dementia, etc.).
- Is not assessed by Home Care as requiring Designated Supportive Living level 3 (DSL3) or higher (e.g., long term care).
- Has a family member or designate to tend to personal needs beyond the scope of lodge staff (e.g., transportation to appointments, assistance with financial matters).
- Has regular dietary needs. Please note that specialty diets which require close supervision cannot be met in the lodge setting.
- Is willing to live in a lodge and abide by the lodge rules and regulations.
- Agrees to a trial period of six weeks. Within that period, either party has the right to withdraw from the agreement if companionable living arrangements cannot be made. A notice period of one month is required.

Application Process

Applications are placed on a waiting list in order of priority and need, based on your responses to the questions.

Your application cannot be reviewed unless all of the questions have been answered and a copy of your latest tax return *Notice of Assessment* has been included with your completed application.

The process for potential admittance is as follows:

1. A completed Application Package, including a copy of a current *Notice of Assessment*, is submitted.

2. Applicants (including Co-Applicants, if applicable) are then rated and placed on a Waiting List in order of need based on a provincial Point Scoring System.

3. When a room in the lodge becomes available, the most appropriate applicants are contacted. The applicant(s) will be invited to a tour and interview at the lodge with the Manager. The applicant(s) may also be required to provide written consent for the exchange of pertinent information between the Manager and the Applicant's Service Provider (e.g., Home Care, Mental Health).

4. Once the interview(s) have been conducted, the room will be offered to the most suitable Applicant. At this time, the Applicant(s) will sign a Tenancy Agreement, as well as any other relevant forms relating to residency at the Lodge.

Please Note: An application for lodge residency does not guarantee that you will be accepted for lodge accommodation.

CHECKLIST

Thank you for your interest in our lodges. This checklist has been provided for your convenience so that you can ensure that you have provided us with all of the information necessary to begin processing your application. Please double-check your application package and ensure that you have:

- ☐ filled out all of the personal information on **page 7** (for both the applicant and the co-applicant, if applying as a couple);
- ☐ completed the *Lodge Application Form Questionnaire* on **pages 9 – 15**;
- ☐ answered all of the questions regarding accommodations on **page 14**;
- ☐ included a copy of a current *Notice of Assessment* for **each** applicant.

Once all portions have been completed, the Lodge Application Package can be sent to:

Rosealta Lodge
Attn: Lodge Manager
4318 – 53 Street
Camrose, AB T4V 4G3
Fax: 780-679-0852
Email: RosealtaLodge@bethanygrp.ca

LODGE APPLICATION FORM

(**Please note** that unless you are applying for accommodation as a couple, you may disregard the "Co-Applicant" information sections)

Applicant's Name: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss _____

Date of Birth: _____ **Phone Number**: _____

Alberta Health Number: _____

Marital Status: ☐ married ☐ divorced/separated ☐ single ☐ widowed

Current Address (including postal code): _____

In case we are not able to contact you, please list an alternate contact person (including their phone number and their relationship to you):

_____

Co-Applicant's Name: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss _____

Date of Birth: _____ **Phone Number**: _____

Alberta Health Number: _____

Marital Status: ☐ married ☐ divorced/separated ☐ single ☐ widowed

Current Address (including postal code): _____

In case we are not able to contact you, please list an alternate contact person (including their phone number and their relationship to you):

_____

Please answer all of the questions in the *Lodge Questionnaire*. This information is required by the Alberta Housing Act and will be used to establish your circumstances and level of need.

Information provided with this application is collected under the authority of the Alberta Housing Act and is protected by the provisions of *Freedom of Information & Protection of Privacy Act*.

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Lodge Questionnaire

If applying as a couple, please make sure you fill out each column as "Applicant" and "Co-Applicant."

If applying as a single person, you do not need to fill out the Co-Applicant column.

Nutrition & Diet

Questions	Applicant		Co-Applicant	
1. Do you (or your partner) cook full-sized, nutritious meals on a regular basis?	Yes	No	Yes	No
2. Do you (or your partner) cook regularly, but often stick to easy foods such as soup & sandwiches or frozen foods?	Yes	No	Yes	No
3. Do you (or your partner) cook one or two of your own meals but get assistance from other individuals for the remainder of your meals?	Yes	No	Yes	No
4. Do you get all of your meals from Meals-On-Wheels, family, and/or other sources?	Yes	No	Yes	No

Life Enrichment & Accessibility

Questions	Applicant		Co-Applicant	
5. Would you like to move to a Lodge at this time because you are lonely and feel a need for activities, recreation, and friends?	Yes	No	Yes	No
6. Have you been limiting your leisure/social activities due to your lack of mobility and/or frailty? (e.g., you don't participate in a recreation group/club, attend church)	Yes	No	Yes	No

7. Have you been limiting your leisure/social activities because you live too far away and/or have transportation problems?	Yes	No	Yes	No

Current Environment

Questions	Applicant		Co-Applicant	
8. Do you have an emergency situation that may be helped by your move to a lodge? (e.g., impending eviction, lack of financial resources)?	Yes	No	Yes	No

If yes, please explain:

Applicant _____

Co-Applicant _____

9. Would a lodge be better for your because of issues such as forgetfulness, your personal safety (e.g., risk of falling, lack of proper household security), or another risk situation?	Yes	No	Yes	No

If yes, please explain:

Applicant _____

Co-Applicant _____

10. Are there any other situations in your life (e.g., abuse) where a move to a lodge would alleviate and/or eradicate the problem?	Yes	No	Yes	No

If yes, please explain:

Applicant _____

Co-Applicant _____

Questions	Applicant		Co-Applicant	
11. Do you handle *all* your own personal care and hygiene without any assistance?	Yes	No	Yes	No
12. Do you handle most of your own bathing and cleaning but get help with some of the more difficult tasks? If yes, please explain:	Yes	No	Yes	No
Applicant _____ Co-Applicant _____				
13. Do you get Home Care or do others do most (or all) of your laundry, cleaning, and personal care?	Yes	No	Yes	No
14. Do you need help getting in and/or out of bed?	Yes	No	Yes	No
15. At this time, do you live in a building with others (e.g., apartment building)?	Yes	No	Yes	No
16. Does the thought of living closely with other seniors appeal to you?	Yes	No	Yes	No
17. Do you like to be left alone and live independently?	Yes	No	Yes	No
18. Do you generally get around your home without much help from others?	Yes	No	Yes	No
19. Do you limit how much you get around (inside & outside your home) due to fear of falling and/or other physical problems? If yes, please explain:	Yes	No	Yes	No
Applicant _____ Co-Applicant _____				
20. Do you need help to get around outside of your home? (e.g., to go shopping, get to appointments)	Yes	No	Yes	No

Family and Community Supports

Questions	Applicant		Co-Applicant	
21. Do you have family nearby who can help and support you when you need?	Yes	No	Yes	No
22. Do you have friends nearby who can help and support you when you need?	Yes	No	Yes	No

Housing Needs

Questions	Applicant		Co-Applicant	
23. Do you want to move to a lodge because you feel that there is no other accommodation that is suitable for you?	Yes	No	Yes	No

If yes, please explain why you feel that lodge accommodations will suit your needs:

Applicant _____

Co-Applicant _____

24. Do you need to leave your present accommodation because the rent is beyond your means or the residence is being sold?	Yes	No	Yes	No
25. Do you wish to move from your current home because the maintenance, gardening, and/or general upkeep is getting to be too much work for you?	Yes	No	Yes	No
26. Is your present home not suitable due to accessibility issues? (e.g., steps difficult to climb)	Yes	No	Yes	No
27. Do you need to move because your present living arrangement is not suitable anymore? (e.g., overcrowding, living with family)	Yes	No	Yes	No

Questions	Applicant		Co-Applicant	
28. Have you been assessed as requiring Designated Supportive Living 3 (DSL3) or higher?	Yes	No	Yes	No
29. Do you suffer from incontinence to such a degree that you are not able and/or willing to manage it yourself?	Yes	No	Yes	No
30. Do you have an activated Personal Directive? If yes, please indicate your Named Agent and his/her telephone number:	Yes	No	Yes	No

Applicant _____

Co-Applicant _____

31. Do you have a Legal Guardian? If yes, please indicate his/her name and telephone number:	Yes	No	Yes	No

Applicant _____

Co-Applicant _____

32. Please indicate if you are currently using (or scheduled to begin using) any of the following:

Walker	Yes	No	Yes	No
Wheelchair	Yes	No	Yes	No
Motorized Scooter *(NOTE: motorized scooters are prohibited in the lodges)*	Yes	No	Yes	No
Electric Wheelchair *(NOTE: electric wheelchairs are prohibited in the lodges)*	Yes	No	Yes	No

33. Are you currently receiving Alberta Seniors' Benefit (ASB)?	Yes	No	Yes	No
34. Are you currently receiving Assured Income for the Severely Handicapped (AISH)?	Yes	No	Yes	No
35. Are you currently receiving Canada Pension Plan/Old Age Security (CPP/OAS)?	Yes	No	Yes	No
36. Are you currently receiving a Guaranteed Income Supplement (GIS)?	Yes	No	Yes	No
37. Are you currently receiving a Veteran's Pension (DVA)?	Yes	No	Yes	No

Please tell us a bit more about yourself and why you would like to move into the lodge. Don't worry about handwriting or spelling. If you require extra space, please attach a separate sheet of paper.