## HEALTH CARE ADVISORY BOARD

Meeting Summary November 5, 2018

#### **MEMBERS PRESENT**

Marlene Blum, Chairman Bill Finerfrock, Vice Chairman Rose Chu, Vice Chairman Ellyn Crawford Phil Beauchene Tim Yarboro, MD Rosanne Rodilosso Dr. Michael Trahos, DO **STAFF** Sherryn Craig

## **MEMBERS ABSENT**

Carol Washington Mizoguchi Ann Zuvekas Mary Porter

### **GUESTS**

Andrew Teeters, Senior Vice President, Brightview Senior Living Steve Marker, Development Associate, Brightview Senior Living Shannon Yunn, Executive Director, Brightview Woodburn Lori Greenlief, Land Use Planner, McGuireWoods LLP Dr. Gloria Addo-Ayensu, MD, MPH, Health Director, Health Department Rosalyn Foroobar, Deputy Director for Health Services, Health Department Dominic Bonaiuto, Director of Advocacy and Community Outreach, Inova Health System Diana White, League of Women Voters of Northern Virginia George Winters, Executive Director, Tall Oaks Senior Living

### **Call to Order**

The meeting was called to order by Marlene Blum at 7:31 pm.

#### October 9, 2018 Meeting Summary

The meeting summary from October 9, 2018 was approved as submitted.

# Public Hearing on Zoning Application PCA/FDPA 2009-HM-017-2/6848-ZONA-011 to Develop Brightview Senior Living at Innovation Center

Steve Marker, Development Associate, Brightview Senior Living, presented the proposal to develop Brightview Senior Living at Innovation Center. Brightview operates 36 senior living communities in eight states, including Virginia with Brightview Great Falls, a 90-unit assisted living residence, and Brightview Woodburn, a 94-unit assisted living residence, located in Fairfax County. Brightview plans to start construction on its third Fairfax County Community, Brightview Fair Oaks, in 2019.

Brightview Innovation Center will be located two blocks from the Innovation Center South station on the Silver Line. Brightview representatives cited the unique nature of the proposed development which will include, office, multifamily, hotel, grocery, and retail amenities within a walkable transit oriented community as well as 0.8 acre urban public park.

The proposal for Brightview Innovation Center includes approximately 115 independent living units and 81 assisted living and dementia care units. Approximately 26 of the units will be dedicated to the Wellspring Village Program, a separate and secured "neighborhood" on the third floor of the building overlooking the park for those seniors confronting various forms of dementia or memory impairment, including Alzheimer's disease. Residency at Brightview Innovation Center is open to the entire Fairfax community (i.e., not exclusive to Brightview residents).

Brightview shared the results from an internal market study for a five mile service area from the proposed development. The data show that there are 6,600 age 75+ seniors and over 31,000 45-64 year olds (adult children). The projected demographics around Brightview Innovation Center remain higher than other Brightview markets. Moreover, Brightview expects the 75+ senior population to grow 7.2% over the next 5 years, which is double the 3.5% projected growth rate in the United States.

Brightview Innovation Center will offer assisted living rental rates competitive to those offered in similar communities throughout the market area. Rates will vary depending on the particular needs and services of each individual resident. Additionally, Brightview will offer a variety of unit types and sizes to service a broad range of price points. Smaller units will be available for residents who are more price sensitive.

Under the current zoning provisions, Brightview reaffirmed its commitment to participate in the Virginia Department for Aging and Rehabilitative Services (DARS) Auxiliary Grant Program, providing 4% of the community's assisted living beds (n=3) to

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residents who are AG recipients. Brightview stated that the cost structure of the community is higher as there are public components, like the park, that are more expensive to build and operate. However, these features will enhance the quality of life for both the residents and the surrounding community.

A Licensed Nurse (LPN or RN) will be onsite 12-16 hours a day, 7 days a week. The number of direct care associates will vary based on the acuity of the residents at any given time. Based on typical acuity levels, Brightview projects the following ratio of care associates to residents in general assisted living:

1.	7am – 3 pm	1-10
2.	3pm – 11pm	1-10
3.	11pm – 7am	1-25

Brightview also corrected its staffing ratios for its Wellspring Village, which were incorrect in its written materials. The revised ratio of care associates to residents in memory care:

1.	7am – 3 pm	1-6
2.	3pm – 11pm	1-6
3.	11pm – 7am	2-20

The Wellspring Village is equipped with a lockable door that requires a key code to access entry and exit. Additionally, the Wellspring wing is equipped with a signaling system that alerts associates to individuals entering or leaving the secured wing. The neighborhood also provides a separate secured outdoor garden area for its residents. For safety reasons, the Wellspring apartments will not have kitchenettes.

George Winters, Executive Director, Tall Oaks Senior Living, appeared before the HCAB and expressed concern about overdevelopment and under-occupancy of senior living communities in the surrounding area. He highlighted the challenges of retaining qualified caregivers and stated that overdevelopment would only compound employee turnover. Mr. Winters also explained that when a facility's census goes down, many operators will rely on less expensive, but also less qualified/experienced staff to provide direct care. Moreover, he questioned the ability of seniors to not only afford these new developments, but to sustain their residency as retail rates increase but incomes stay fixed. HCAB members suggested that the board have additional discussion with its partners around staffing and personnel. Rosalyn Foroobar shared that the Long Term Care Coordinating Council's (LTCCC) Workforce or Caregivers Subcommittees may be working on this issue. It was also noted that many direct care providers are immigrants or people of color and ensuring a path to citizenship is equally important.

The HCAB received a written statement from the LTCCC recommending that 15%, rather than 4% of Brightview's units be dedicated as affordable. While the HCAB agrees that more affordable senior living options are needed in Fairfax, requiring Brightview to bear a disproportionate share, relative to other providers, is not appropriate. A change to this policy would require further research and additional discussion.

In response to questions about medication administration, Brightview representatives stated that all medications will be administered according to physicians or other prescribers' instructions and consistent with Virginia Board of nursing medication management practices. Residents are also permitted to maintain their relationships with their physicians and outside providers (e.g., physical therapy), but if it is not practical or desired, Brightview will help residents establish new relationships and the development of individualized care plans.

With respect to Brightview's inspection summaries, representatives indicated that new leadership and additional personnel training addressed one facility's initial/post-opening inspection deficiencies. Brightview communities also share best practices and lessons learned with each other through regional meetings.

Dr. Michael Trahos, DO moved that the HCAB recommend the Board of Supervisors approve the applicant's proposal to develop Brightview Innovation Center. Bill Finerfrock seconded. The motion carried 6-Y, 0-N, and 1 abstention.

# **Older Adult Accommodations and Services Amendments to the Zoning Ordinance and Comprehensive Plan – Continuing Care Facilities**

Marlene Blum testified before the Planning Commission on the proposed amendments to the Zoning Ordinance on Continuing Care Facilities (CCFs). A written statement on the proposed amendments to the Comprehensive Plan regarding affordable senior housing accommodations was also submitted to the Planning Commission on November 1.

The Board of Supervisors hearing on the ZO and Comp Plan Amendments is scheduled for December 4. Phil Beauchene moved that the HCAB's testimony and written

statements to the Planning Commission be amended as needed by the Chairman and presented to the BOS on December 4. Dr. Trahos, DO, Ellyn Crawford, and Bill Finerfrock seconded. The motion passed unanimously.

# **Other Business**

Dr. Trahos, DO circulated CMS' Final Policy, Payment, and Quality Provisions Changes to the Medicare Physician Fee Schedule with a delayed implementation date of January 1, 2021.

He also circulated insurance rates under the Affordable Care Act's Health Insurance Exchange, which showed large price differentials over the prior year's offerings.

There being no further business, the meeting adjourned at 9:03 pm.