

## **Facility Overview:**

The proposed use is an assisted living facility licensed under the District of Columbia Health Care and Community Residence Facility, Hospice and Home Care Licensure Act of 1983. The facility is designed to provide a home-like environment for up to 14 residents who require assistance with daily living while preserving independence and dignity.

The facility is categorized under the zoning umbrella of "Healthcare Facility," but specifically operates as a licensed Assisted Living Residence (ALR). It includes private or semi-private residential units, depending on patient budgets, communal dining and lounge areas, a rear yard with a deck for outdoor activities, a secure medication storage room, and dedicated trash/recycling enclosures. A privacy fence encloses the property for added security and resident comfort.

## **Operations and Resident Services**

*Staffing and Care:* The facility employs a team of trained professionals including registered nurses (RNs), certified nursing assistants (CNAs), and care coordinators. Staff training includes onboarding, annual refreshers, and policy updates. Emergency preparedness training and CPR certification are mandatory. See Policies and Procedures Manual, Exhibit 17F, p. 10. The staff-to-resident ratio supports personalized care and supervision 24/7.

*Individualized Services:* Upon admission, each resident receives an Individualized Service Plan (ISP) developed by a licensed nurse. This plan includes assessments of physical, mental, and cognitive health; medication needs; mobility status; and dietary preferences. Services offered include assistance with bathing, dressing, toileting, medication management, and meals. See Policies and Procedures Manual, Exhibit 17F, p. 105.

*Programming and Activities:* Daily and weekly programming includes physical wellness activities (stretching, walking groups), cognitive games, music therapy, gardening, seasonal arts and crafts, and outdoor lunches on the deck. Activities are designed to foster community, engagement, and a sense of purpose.

## **Logistics and Support Services**

*Deliveries and Maintenance:* Meal delivery and housekeeping services occur in the early morning (6 AM to 9 AM). Trash is collected from a rear alley location between 6 AM and 8 AM, stored in screened containers (four 96-gallon trash bins and two recycling bins). No medical waste is generated on site.

*Security and Monitoring:* Non-private common areas are monitored via audiovisual systems for safety. Recordings are retained for 90 days and reviewed as needed. Residents' private areas are excluded from surveillance in accordance with privacy policies. See Policies and Procedures Manual, Exhibit 17F, p. 28.

## **Emergency and Regulatory Compliance**

*Emergency Preparedness:* the facility maintains protocols for fires, severe weather, power outages, and missing residents. Fire drills are conducted regularly. A communication plan with designated emergency contacts and healthcare providers ensures timely medical response. EMS will be contacted in emergencies per established triage protocol. See Policies and Procedures Manual, Exhibit 17F, pp. 136-143).

*Regulatory Oversight:* The facility is overseen by the DC Department of Health (DOH), Department of Buildings (DOB), and Department of Health Care Finance (DHCF). Documentation and resident records are maintained securely and in compliance with HIPAA. Licensing, incident reporting, and inspection follow DC regulatory timelines and standards.

## **Conclusion**

The proposed facility offers a stable, secure, and compassionate environment for medically vulnerable adults. The facility's design, policies, and staffing reflect a commitment to quality care, resident dignity, and community integration. Conditions such as visitor scheduling, parking management, and activity timing help mitigate neighborhood concerns while supporting resident well-being.