

Department of Health and Human Services
Division of Public Health
Licensure Unit
301 Centennial Mall South
Lincoln, NE 68509-4986

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
LICENSURE UNIT
CERTIFIES THAT

Stone Hearth Estates

MEETS STATUTORY REQUIREMENTS AS AN
Assisted Living Facility
LIC #ALF302

Services:

Alzheimer's Memory Care Endorsement
Aged/Disabled Med Wvr

EXPIRES:

April 30, 2017



Thomas L. Williams, MD - Chief Medical Officer
Director, Division of Public Health
Department of Health and Human Services

Cut on heavy line and place on license

FACILITY NAME: Stone Hearth Estates
ADDRESS: 110 W 20th Street, Suite 400, Gothenburg, NE 69138

This is to verify that your Assisted Living Facility is licensed through the date indicated on the above renewal card. Place the renewal card in the lower left hand corner of your original license.

Please notify this office at the address listed above of any change in name, address or ownership.

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

January 25, 2017

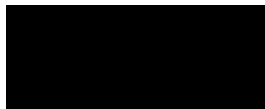
Barbara Nuxoll, Administrator
Stone Hearth Estates
110 W 20th Street, Suite 400
Gothenburg, NE 69138

Dear Ms. Nuxoll:

This is to acknowledge that Stone Hearth Estates, Assisted-Living Facility License #ALF302, has been approved for the Memory Care Endorsement. Enclosed is a licensure card which shows Memory Care Endorsement and the expiration date of the license. This document replaces the previous renewal license.

Please contact this office for any questions.

Sincerely,



Eve Lewis, RNC, Program Manager
Office of Long Term Care Facilities
Licensure Unit, Division of Public Health
Department of Health and Human Services
(402) 471-3324

EL/dj

For Office of LTC use only	
Approval date:	<u>1-20-17</u>
License number:	<u>ALF 302</u>
License expiration date:	<u>4-30-17</u>

Alzheimer's Special Care Unit Disclosure and Memory Care Endorsement Application

1. License type (Select one)

Alzheimer Special Care Unit Disclosure only

Alzheimer Special Care Unit Disclosure and Memory Care Endorsement

2. Type of application (Select one)

Initial Projected Opening Date: _____

Renewal License # ALF302

Change of ownership

3. Facility information

Name of facility: Stone Hearth Estates
Gothenburg Senior Living LLC
(Doing Business As (DBA) name registered with Secretary of State)

Stone Hearth Estates 308-537-7771 Facility
 Phone: 308-537-7771 FAX: 7787 E-mail: admin@stonehearthestates.com

Street address: 110 20th Street

City, State, ZIP: Gothenburg, NE 69138 County: Dawson

Mailing address: Suite 400

Administrator: Barb Nuxoll

Maximum endorsed capacity: 65

4. Applicant information

Owner (licensee) Management

Name of legal owning entity: Gothenburg Senior Living LLC
(Exactly as registered with the Secretary of State)

Contact name: Barbara Nuxoll

Phone: 308-537-7771 FAX: 7787 E-mail: admin@stonehearthestates.com

Street address: 110 20th Street

City, State, ZIP: Gothenburg, NE 69138

5. Disclosure information

Please attach additional page if needed.

A) Overall philosophy and mission: Stone Hearth Estates will provide services to individuals coping with Alzheimer's Disease or dementia. All services will be provided in a homelike environment by a compassionate, professional team of trained staff members.

B) Criteria for placement in, transfer to: Stone Hearth Estates is licenses as an Assisted Living Facility by the State of Nebraska and as such it cannot accept or allow any resident to remain whose care or needs cannot be met within the requirements of Stone Hearth's license or

beyond Stone Hearth's ability to meet. No resident may be admitted without a resident evaluation (Health Admission document included). Each resident must agree to other reevaluations as necessary in the opinion of the attending physician, nurse, or administrator. A Resident whose condition is medically complex, unstable or unpredictable may be admitted or may remain at Stone Hearth only if the resident or responsible party assumes responsibility for arranging for the resident's care by an appropriately licensed agency or appropriately licensed personnel. Resident and responsible party will be requested to negotiate a risk agreement with Stone Hearth. A resident may be admitted and may remain only if his/her presence or care does not compromise Stone Hearth operations or create a danger to residents, staff or others. Residents must be independently mobile, must have manageable incontinence. Stone Hearth will provide minimal assistance with ambulation if the assistance does not require more than one staff member and does not require lifting the resident. All of the following persons must agree that these conditions are met before a person may be admitted or remain; the resident; the responsible party; the attending physician; the nurse employed by Stone Hearth; and the administrator. The administrator has final authority regarding admission or retention of the resident. (Resident's Rental Service Agreement pages 6 & 7 Health Admission)

C) Criteria for discharge: If the administrator determines the resident is incapable of living at Stone Hearth, the administrator may discharge the resident. Should the resident develop physical, mental or social conditions that Stone Hearth is not licensed to provide Stone Hearth will notify resident or responsible party to make arrangements for the move. Stone Hearth cannot set forth all matters or instances that would, in its judgment, indicate a discharge or termination, however, the instances may include, but not be limited to, uncooperative behavior, endangering self, other residents or staff, inappropriate behavior, unstable medical conditions, interfering with the peaceful environment of other residents or failure to pay fees when due. (Resident's Rental Service Agreement pages 7 & 8)

D) Process for assessment and establishing the plan of care: Health Admissions, Resident Service Agreement Addendum, Resident Service Plan pages 7&8)

E) Staffing numbers/pattern: Scheduling consists of three to four staff members from 7 AM to 9 PM. One staff member is scheduled exclusively to memory community from 9 PM to 6 AM. (schedule example is included).

F) Staff training and continuing education including four (4) hours related to dementia care and additional training for cultural competencies: Orientation training and ongoing training includes all OSHA requirements and regulation requirements including cultural competency and four hours of dementia training. (New Hire Checklist & Yearly Training documents included)

G) Physical environment and features, including security features: Stone Hearth Estates operates its memory community with a key pad security feature. Stone Hearth Estates also has camera systems available for security. Stone Hearth Estates memory community provides many special design features.

- Dining area is small and homelike with an open residential kitchen that is used as a kitchen activities area. Residents can see into the kitchen. It is divided by the cabinet counter top. The stove has safety glass to protect residents from reaching. Knives are locked away in drawers. Chemicals are locked in cabinets. Dining chairs are specifically designed for elder use. They have soft seats yet are cleanable and easy to get in and out of.
- Hallways are large enough to offer residents room to walk inside the unit during inclement weather. Seating areas are throughout the community.

- A beauty station is available for residents to have their hair and makeup done daily. All equipment is locked when not in use in appropriate styling containers.
- An enclosed porch provides sunlight and light gardening opportunities. The porch is keypad locked for staff oversight.
- Lighting is indirect to lessen glare as well as provide the appropriate light for each area. Flat surface flooring is attractive, easy to keep clean, and non-glare. Wall coverings provide a warm and homelike atmosphere while being durable and easy to clean.

H) Resident activities related to dementia care: Activities are organized per each person's skills and abilities, what they enjoy doing; if they can begin without direction, and if the person has physical problems. Activities will be part of the daily routine and will focus on enjoyment, not achievement. Staff will determine what time of day is best for each activity and provide support and supervision. Staff will help each person remain as independent as possible. The following are guidelines for music, art and pet therapy. These therapies and other help enrich the lives of people with dementia.

- **Pet Guidelines:**
Not everyone will react positively to animals. Those who previously owned pets will be more responsive
Match the animal's activity and energy with that of the individual. For example, a lively dog might be appropriate for the person who can go out for a walk; a cat may be more appropriate for a person who is less mobile.
- **Art guidelines:**
Keep the project on an adult level
Build conversation into the project when appropriate. Provide encouragement; discuss what the person is creating, and try to initiate a bit of creative storytelling or reminiscence. Help the person begin the activity. If the person is painting, you may need to start the brush movement
Use safe materials
Allow plenty of time to complete project
The individual does not have to finish, the artwork is complete when the individual say it is
- **Music guidelines:**
Identify music that's familiar and enjoyable to the listener
Use live music to create the mood you want
Link music with other reminiscence activities; use questions or photographs to help stir memories
Encourage movement (clapping, dancing) to add to the enjoyment
Avoid sensory overload; eliminate competing noises by shutting windows and doors

The following list is a guideline to assure meaningful activities.

- **Morning Activities:**
Wash up, brush teeth, and get dressed
Prepare and eat breakfast
Discuss the newspaper or reminisce
Church devotions and sing along
Exercise
- **Afternoon Activities**
Lunch, clear and wash dishes, clean floor
Music, puzzles, art
Exercise, walking, Nu-Step, bat-a-balloon
R2D2 (Computer games and activities)
MIM (Memories in the Making)
- **Evening Activities**
Dinner, clear dishes

- Movies
 - Chapel
 - Board Games
 - Wash, brush teeth, PM Cares
 - Environment
 - Activities are safe
 - Arrange surroundings to encourage activities
 - Minimize distraction that can frighten or confuse
- (document included Activity Calendar)

I) Family support program: Families will be encouraged to attend Support Groups in Gothenburg as well as North Platte. Stone Hearth Estates support program includes a monthly "Lunch & Learn" invitation for families with loved ones living at Stone Hearth as well as community members. In 2016, HBO's Alzheimer's Project was divided into numerous parts and viewed by family members, discussions followed. Virtual Dementia tours conducted by Stone Hearth Estates facilitators was one "Lunch & Learn" program. Stone Hearth Estates sponsored "Glen Campbell, I have to be me" at the local community owned theatre as another "Lunch & Learn" project. This format was highly praised and well received. In 2017 Stone Hearth Estates, will continue to hold "Lunch & Learn" programs monthly with similar events.

J) Cost/Fees of care: The current cost for Stone Hearth Estates memory community is \$5983 per month with additional charges for ambulation assistance. There is also additional \$50 per day cost for palliative care. Ala Carte services are also additional, specifically traveling and guest meals. (document enclosed Service Agreement and Ala Carte Charges).

Applicant Signature

I, the undersigned, an authorized representative of the applicant declare to the best of my knowledge this information is true, correct and complete. By knowingly and willfully failing to fully disclose the information requested may result in denial of application.

Barbara Nuxoll

01-09-2017

(Print Name of authorized representative)

(Date)


 (Signature)

01-09-2017

(Date)

Send completed application to:

Office of Long Term Care Facilities
 PO Box 94986
 301 Centennial Mall South
 Lincoln NE 68509-4986

Or to dhhs.healthcarefacilities@ncbraska.gov

If you have questions, email dhhs.healthcarefacilities@nebraska.gov

Or call (402) 471-3324

Note: A Memory Care Endorsement will not be approved until all requirements for the facility's license and endorsement have been met.

19. Refusal of Treatment. Stone Hearth acknowledges that the Resident may have the right to refuse treatment. If, for any reason, the Resident refuses or fails to follow the physician's treatment program, the Resident and Responsible Person, hereby release Stone Hearth from any liability associated therewith. In some instances, failure to follow the treatment program may result in the Administrator's decision to transfer a Resident pursuant to the terms and conditions set forth herein.

20. Medical Tests/Admission Exam. To determine the level of services needed, Stone Hearth will perform an evaluation on Resident prior to admission. If requested by Administrator, Resident agrees to undergo a physical examination and be assessed for any possible communicable disease, within forty-eight (48) hours after admission, unless an exam has been performed not more than fifteen (15) days prior to admission. Stone Hearth will not deny admission or the provision of services based solely upon the communicable disease status of a Resident unless the condition poses a direct threat to the health of others that cannot be eliminated through reasonable accommodation.

21. Emergency Treatment. Resident and Responsible Person, by executing this Agreement, authorize Stone Hearth to provide Resident emergency medical treatment its staff has been trained to provide. Resident and Responsible Party authorize Stone Hearth to transfer the Resident to a hospital or other facility for emergency purposes. Stone Hearth may share Resident's health information with other health care providers and may receive health information from other health care providers.

22. Condition of Admission and Retention. Stone Hearth is licensed as an assisted living facility by the State of Nebraska and as such it cannot accept or allow any Resident to remain whose care or needs cannot be met within the requirements of Stone Hearth's license or beyond Stone Hearth's ability to meet. No Resident may be admitted without a Resident evaluation. Each Resident must agree to other reevaluations as necessary in the opinion of the attending physician, nurse, or Administrator.

A Resident whose condition is medically complex, unstable, or unpredictable may be admitted or may remain at Stone Hearth only if the Resident or Responsible Party assumes responsibility for arranging for the Resident's care by an appropriately licensed agency or appropriately licensed personnel. Resident and Responsible Party will be requested to negotiate a risk agreement with Stone Hearth. A Resident may be admitted and may remain only if his/her presence or care does not compromise Stone Hearth operations or create a danger to Residents, staff or others. Residents must be independently mobile, have minimal difficulty with incontinence, or be able to

manage incontinence independently and appropriately, and have minimal difficulty with time, person, and place unless residing in the Memory Care Residence. Stone Hearth Staff will provide minimal assistance with ambulation to memory care residents as long as the assistance does not require assistance of more than one staff member and does not require lifting the resident. All of the following persons must agree that these conditions are met before a person may be admitted or remain: the Responsible Party; the Resident; the attending physician; the nurse employed by Stone Hearth; and the Administrator. The Administrator has final authority regarding admission or retention of Resident.

23. Resident or responsible party does give permission to use photographs and resident's name in news releases, on the website, on the radio, and in facility-published newsletters per resident's signature:

Signature here states agreement to
Paragraph 23.

24. Termination of Agreement or Discharge of Resident.

- a. Resident Termination: Resident or Responsible Party may terminate this Agreement by giving 30 days written notice to the Administrator. The Resident and Responsible Party will pay all charges arising under the Agreement through the date the Resident vacates the premises and the Responsible Party and Resident remove all of the Resident's personal property.
- b. Stone Hearth Termination: Stone Hearth will give 30 days written notice to terminate except in situations where transfer or discharge is necessary to protect the health, safety, and welfare of the Resident, other Residents or staff or when a medical emergency or disaster occurs.
- c. **If the Administrator determines the Resident is incapable of living at Stone Hearth, the Administrator may discharge the Resident. Should the Resident develop physical, mental or social conditions that Stone Hearth is not licensed to provide, Stone Hearth will notify Resident or Responsible Party to make arrangements for the move. Stone Hearth cannot set forth all matters or instances that would, in its judgment, indicate a discharge or termination, however, the instances may include, but not be limited to, uncooperative behavior, endangering self,**

other Residents or staff, inappropriate behavior, unstable medical conditions, interfering with the peaceful environment of other Residents or failure to pay fees when due.

- d. When notice is given, the Agreement shall terminate on the date that all personal property is removed. Resident and/or Responsible Party will be responsible for rent until such termination date. Any rent or other fees and deposits paid in advance or pursuant to the terms of this Agreement shall be refunded as appropriate to the Resident or Responsible Party within 14 days after the termination date.

25. Default and Remedies.

- a. Event of Default. The occurrence of one or more of the following shall constitute an Event of Default: (i) the failure of the Resident to make any payment of rent or payment of additional services required when due; (ii) the failure of the Resident to observe or perform the provisions of this Agreement; (iii) if Resident abandons the Premises; or (iv) if the Resident files a petition in bankruptcy or a petition of bankruptcy or reorganization is filed against the Resident.
- b. Remedies. On the occurrence of an Event of Default, Stone Hearth may exercise any rights or remedies it may have at law or in equity, including, but not limited to, one or more of the following: (i) terminate the Agreement; (ii) sue for the rent and other payments due and to become due under the Agreement; (iii) sue for any damages; and (iv) sue for possession of the Premises.
- c. Non-Exclusive Remedies. The remedies of Stone Hearth will not be exclusive, but shall be cumulative and in addition to all rights and remedies now or hereafter provided or allowed by law or equity.

26. Responsible Party Liability. Responsible Party is obligated to pay for services and supplies that are billed by or through Stone Hearth or billed directly to Resident or Responsible Party by any other provider from the Resident's resources.

Seize every day!



Health Admission

Blank = independent or not applicable
 1 = limited staff assistance (cueing and reminders)
 2 = extensive staff assistance (hands on assistance)

Resident Name: _____
 Date: _____
 Allergies: _____
 Current Diagnosis: _____

Section A: Activities of Daily Living/Functional Status	Comments/Devices/Supplies/Preferences	Assistance Needed
Bathing	Whirlpool – Shower	
Nail Care / Foot Care		
Oral / Denture	Upper - Lower - Partial	
Hair / Shaving/Razor maintenance	Beauty Shop	
Dressing	Special Equipment	
Transfers		
Meals	Cut Food – Open Packages – Reminders	
Difficult Speech	Clear – Slurred – Garbled – Language Spoken	
Vision	Glasses – Contacts – Magnifying Glass – Legally Blind	
Hearing	Left Aide – Right Aide – Legally Deaf	

Section B: Health Maintenance	Comments / Supplies / Treatments	Assistance Needed
Special Skin Care <i>Any history of: Dry, at risk for pressure ulcer, wound care, bruises, fragile, edema</i>		
Nutritional Needs -Restrictions <i>Diabetic, therapeutic diet, lactose intolerant, at risk for malnutrition</i>	Food Allergies	
Exercise Program <i>Restorative or other</i>		
Bowel & Bladder Care <i>Incontinence, frequent UTI, at risk for constipation, catheter, other</i>	Peri-Care – Riser - Incontinence Supplies	
Foot Impairments <i>Prosthesis, Callus, Ingrown Toenail, Corn, Bunions, Diabetic Foot Care</i>		
Musculoskeletal Impairments	Pain – edema – Decreased ROM	
Other (special treatments) <i>Pacemaker, Colostomy, Catheter, Oxygen, Brace, CBG</i>		

Additional Comments: _____

Section C: Behavior	Comments / Medications / Interventions	Assistance Needed
Sad mood / Anxious / Worried		
Disregards Appearance /Hygiene		
Verbal Outbursts		
Physically Abusive		
Socially Inappropriate		
Wanders		
Disoriented to Time and Place		
<i>Mini Mental score</i>		
Short Term Memory Loss		
Emotional Support		

Skin Assessment	Yes/No	Location	Treatment
Bruising			
Redness/Rash/Abrasions			
Skin Tears/Open Areas			
Soreness			
Swelling			
Other Observations			

Blood Pressure: Sitting: _____ Pulse: _____ Respiration: _____ Temp: _____

Weight: with shoes _____ Height approximate: _____

Fall Assessment	Yes/No	Explanation	Treatment
History of Falls			
Specific Meds affecting BP or Level of Consciousness			
Unstable		Standing, Walking, Turning	
Diagnosis		Confusion – Weakness – Sensory deficient – Incontinence urgency – Other	
Ambulation		Wheelchair – Walker – Cane- Motorized chair	

Recommendation for care and additional comments for Admitting Diagnosis:

Signature: _____ Title: _____

D) & J)

STONE HEARTH ESTATES
SERVICE AGREEMENT
ADDENDUM "A"
MEMORY CARE (2ND FLOOR)

Suite Rate \$5983.00 per month

Memory Care Service Package:

1. Three (3) meals per day, plus daily snacks
2. Medication administration
3. Health maintenance support (ie: daily glucose monitoring, hot/cold packs, etc)
4. Whirlpool bathing/shower supervision (3 times weekly or more as needed)
5. Daily upkeep/bed making
6. Weekly flat linen service
7. Weekly housekeeping
8. Assistance with dressing
9. Assistance with personal hygiene
10. Personal laundry services once per week, or as needed (excluding dry cleaning, hand washables and ironing)
11. Staff on duty 24 hours a day
12. Assistance with daily social and leisure activities
13. Transportation coordination
14. All utilities, excluding telephone, and extended basic cable TV
15. Interior and exterior maintenance, including lawn care and snow removal
16. Annual housekeeping (wash windows, deep clean)
17. Palliative care - \$50.00 per day
18. Ambulation Assistance _____ \$325.00 per month

Suite # _____ Monthly Rate _____ Date _____

Resident

Legal Representative Signature

Administrator Signature

Legal Representative Signature

**Memory Care is not available for Medicaid Waiver individuals*

Seize every day!



RESIDENT SERVICE PLAN

Name: Jane Doe
Apartment: 200

SERVICE	WHO	WHEN	HOW
Whirlpool	Care Staff	Once weekly/Wednesday	Assist resident getting into and out of whirlpool. Assist with washing of back, hair, legs and feet and private areas as needed.
Toe Nail Care	Care Staff	Bath days PRN	After whirlpool dry feet completely, trim toenails with clippers and file as needed.
Hair	Care Staff	Bath days	Wash hair on bath days and assist with combing
Skin Care	Care Staff	Bath days	Check skin according to skin check guidelines. After bathing, before dressing apply lotion to skin, back, arms, legs and feet as well as face
Dressing	Care Staff	AM & PM/Bath days	Staff will assist in AM and PM. Staff will assist with dressing during bathing
Ambulation	Self	Ongoing	Utilizes a walker for stability
Transfers	Self/Care Staff	PRN	Provide stand-by assistance if resident is showing signs of dizziness or is unstable. Assist resident in and out of vehicle; provide standby assist if resident unsteady.
Medication	Med Aides	Per Doctor's Order	Provide medications according to Stone Hearth Policy & Procedure and Per OPUS system with training according to the State of Nebraska Medication Aide Act.
Memory Support	All Staff	Ongoing	Resident will attend programs please prompt. Resident prefers art programs and devotions. Use "come with me" to direct resident when confused. Use "reflection" methods to assure resident. Resident likes to do dishes and go for walks.
Monthly Wellness	Med Aides	Monthly & PRN	Only take BP on right arm due to history of Mastectomy on left side per Stone Hearth Policy & Procedure.
Oral Care	Self/Care Staff	AM & PM	Cue, assist and set-up toothbrush
Incontinence Care	PM Staff	Twice nightly	Wake and assist resident to bathroom

Up Date:

Director of Resident Care: _____

Resident/Authorized Representative Signature: _____

January 2017

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<p>1 Nicole 6-2 MA Rachelle 6:30-1 Lindsay 7-12 DR Theresa 8-1 Jennie 11-5 MA Rhonda 1-5 Lindsay 5-9 MA Rachelle 5-9 DR Theresa 5:30-9 Diane M 9-6 MA</p>	<p>2 Lindsay 6-1 MA Kaitlyn 6:30-5 Jennie 6:30-5 Theresa 7-10 Rhonda 5-9 Selena 1-5 Bill 1-9 MA Wendy 5:30-9 DR Diane M 9-6 MA</p>	<p>3 Jessica 6-1 MA Adrain 6:30-1 Bill 7-5 Kaitlyn 8-5 Tiff C 1-5 Paula 5-9 Rachelle 5:30-9 DR Kim 5-10 MA Diane M 10-6 MA</p>	<p>4 Nicole 6-2 MA Bill 6:30-1 Jennie 7-1 Jessica 8-5 Diane L 1-9 MA Kim 5-10 DR Timari 1-5 Theresa 1-9 Diane M 10-6 MA</p>	<p>5 Diane L 6-2 MA Bill 6:30-1 Paula 7-5 Jennie 8-5 Carol 2-10 MA Nicole 5-9 Theresa 1-9 DR Debbie 9-6 CS</p>	<p>6 Diane L 6-2 MA Adrain 6:30-1 Lindsay 7-5 Jessica 8-1 Rhonda 1-5 Kim 5-9 MA Rachelle 5-9 DR Theresa 1-9 Makayla 9-6 MA</p>	<p>7 Diane L 6-2 MA Wendy 6:30-11 Jessica 7-5 Adrain 11-7 Wendy 5-9 DR Kim 5-9 Bill 5:30-9 MA Makayla 9-6 MA</p>
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MEMORY

<p>22 Diane L 6-2 MA Wendy 6:30-11 Jessica 7-5 Adrain 11-7 Wendy 5-9 DR Kim 5-9 Bill 5:30-9 MA MaKayla 9-6 MA</p>	<p>23 Lindsay 6-1 MA Kaitlyn 6:30-5 Jennie 6:30-5 Theresa 7-10 Rhonda 5-9 Selena 1-5 Bill 1-9 MA Wendy 5:30-9 DIR Diane M 9-6 MA</p>	<p>24 Jessica 6-1 MA Adrain 6:30-1 Bill 7-5 Kaitlyn 8-5 Tiff C 1-5 Paula 5-9 Rachelle 5:30-9 DIR Kim 5-10 MA Diane M 10-6 MA</p>	<p>25 Nicole 6-2 MA Bill 6:30-1 Jennie 7-1 Jessica 8-5 Diane L 1-9 MA Kim 5-10 DR Timari 1-5 Theresa 1-9 Diane M 10-6 MA</p>	<p>26 Diane L 6-2 MA Bill 6:30-1 Paula 7-5 Jennie 8-5 Carol 2-10 MA Nicole 5-9 Theresa 1-9 DR Debbie 9-6 CS</p>	<p>27 Diane L 6-2 MA Adrain 6:30-1 Lindsay 7-5 Jessica 8-1 Rhonda 1-5 Kim 5-9 MA Rachelle 5-9 DR Theresa 1-9 MaKayla 9-6 MA</p>	<p>28 Nicole 6-2 MA Lindsay 6:30-1 Rachelle 7-12 Theresa 8-1 Jennie 11-9 MA Rhonda 1-5 Rachelle 5-9 DR Theresa 5:30-9 Diane M 9-6 MA</p>
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January 2017

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
ASSISTED						
<p>1 MA Celeste 6-1 MA Carol 1-9 CS Rhonda 6-1 DR Janelle/Breakfast CS Savannah 5-7 CS Selena 11-9 Bingo CS Goni 9-6</p>	<p>2 MA Nicole 6-1 MA Carol 1-9 CS 7-9 Lenay Sylvia/Breakfast BA Rhonda/Lunch CS Selena 1-9 CS Savannah 5-7 CS Goni 9-6</p>	<p>3 MA Nicole 6-1 MA Carol 1-9 CS Jennie 7-5 HK/Lenay 7-4 Paula/Breakfast BA Tiff C/Lunch CS Celeste 11-7 CS Timari 5:30-8 CS Goni 9-6</p>	<p>4 MA Lindsay 6-1 MA Tiff C 5-9 CS Rhonda 7-1 DR Lenay/Breakfast BA Celeste/Lunch CS Timari 5-8 CS Savannah 5-7 CS Debbie 9-6</p>	<p>5 MA Jessica 6-1 MA Celeste 11-9 Janelle/Breakfast CS Tiff C 7-11 HK/Lenay 8-4 BA Rhonda/Lunch CS Savannah 5-7 CS Kaitlyn 5:30-8 CS Goni 9-6</p>	<p>6 MA Tiff C 6-1 MA Celeste 11-7 MA Makalya 5-9 CS Paula 7-1 DR Sylvia M/Breakfast BA Rhonda/Lunch CS Timari 5-8 CS Debbie 9-6</p>	<p>7 MA Tiff C 6-1 MA Bill 1-9 CS Paula 6-1 DR Diane/Breakfast CS Kaitlyn 11-5 Bingo CS Timari 5-8 CS Debbie 9-6</p>
<p>8 MA Tiff C 6-1 MA Bill 1-9 CS Paula 6-1 DR Lenay/Breakfast CS Kaitlyn 11-5 Bingo CS Timari 5-8 CS Debbie 9-6</p>	<p>9 MA Nicole 6-1 MA Carol 1-9 CS 7-9 Lenay Sylvia/Breakfast BA Rhonda/Lunch CS Selena 1-9 CS Savannah 5-7 CS Goni 9-6</p>	<p>10 MA Nicole 6-1 MA Carol 1-9 CS Jennie 7-5 HK/Lenay 7-4 Paula/Breakfast BA Tiff C/Lunch CS Celeste 11-7 CS Timari 5:30-8 CS Goni 9-6</p>	<p>11 MA Lindsay 6-2 MA Tiff C 5-9 CS Rhonda 7-1 DR Lenay/Breakfast BA Celeste/Lunch CS Timari 5-8 CS Savannah 5-7 CS Debbie 9-6</p>	<p>12 MA Jessica 6-1 MA Celeste 11-9 Janelle/Breakfast CS Tiff C 7-11 HK/Lenay 8-4 BA Rhonda/Lunch CS Savannah 5-7 CS Kaitlyn 5:30-8 CS Goni 9-6</p>	<p>13 MA Tiff C 6-1 MA Celeste 11-7 MA Makalya 5-9 CS Paula 7-1 DR Sylvia M/Breakfast BA Rhonda/Lunch CS Timari 5-8 CS Debbie 9-6</p>	<p>14 MA Celeste 6-1 MA Carol 1-9 CS Rhonda 6-1 DR Janelle/Breakfast CS Savannah 5-7 CS Selena 11-9 Bingo CS Goni 9-6</p>
<p>15 MA Celeste 6-1 MA Carol 1-9 CS Rhonda 6-1 DR Janelle/Breakfast CS Savannah 5-7 CS Selena 11-9 Bingo CS Goni 9-6</p>	<p>16 MA Nicole 6-1 MA Carol 1-9 CS 7-9 Lenay Sylvia/Breakfast BA Rhonda/Lunch CS Selena 1-9 CS Savannah 5-7 CS Goni 9-6</p>	<p>17 MA Nicole 6-1 MA Carol 1-9 CS Jennie 7-5 HK/Lenay 7-4 Paula/Breakfast BA Tiff C/Lunch CS Celeste 11-7 CS Timari 5:30-8 CS Goni 9-6</p>	<p>18 MA Lindsay 6-1 MA Tiff C 5-9 CS Rhonda 7-1 DR Lenay/Breakfast BA Celeste/Lunch CS Timari 5-8 CS Savannah 5-7 CS Debbie 9-6</p>	<p>19 MA Jessica 6-1 MA Celeste 11-9 Janelle/Breakfast CS Tiff C 7-11 HK/Lenay 8-4 BA Rhonda/Lunch CS Savannah 5-7 CS Kaitlyn 5:30-8 CS Goni 9-6</p>	<p>20 MA Tiff C 6-1 MA Celeste 11-7 MA Makalya 5-9 CS Paula 7-1 DR Sylvia M/Breakfast BA Rhonda/Lunch CS Timari 5-8 CS Debbie 9-6</p>	<p>21 MA Tiff C 6-1 MA Bill 1-9 CS Paula 6-1 DR Diane/Breakfast CS Kaitlyn 11-5 Bingo CS Timari 5-8 CS Debbie 9-6</p>

<p>22 MA Tiff C-6-1 MA Bill 1-9 CS Paula 6-1 DR Lenay/Breakfast CS Kaitlyn 11-5 Bingo CS Timari 5-8 CS Debbie 9-6</p>	<p>23 MA Celeste 6-1 MA Carol 1-9 CS 7-9 Lenay Sylvia/Breakfast BA Rhonda/Lunch CS Selena 1-9 CS Savannah 5-7 CS Goni 9-6</p>	<p>24 MA Nicole 6-1 MA Carol 1-9 CS Jennie 7-5 IK/Lenay 7-4 Paula/Breakfast BA Tiff C/Lunch CS Celeste 11-7 CS Timari 5:30-8 CS Goni 9-6</p>	<p>25 MA Linday 6-2 MA Tiff C 5-9 CS Rhonda 7-1 DR Lenay/Breakfast BA Celeste/Lunch CS Timari 5-8 CS Savannah 5-7 CS Debbie 9-6</p>	<p>26 MA Jessica 6-1 MA Celeste 11-9 Janelle/Breakfast CS Tiff C 7-11 IK/Lenay 8-4 BA Rhonda/Lunch CS Savannah 5-7 CS Kaitlyn 5:30-8 CS Goni 9-6</p>	<p>27 MA Tiff C-6-1 MA Celeste 11-7 MA Makalya 5-9 CS Paula 7-1 DR Sylvia M/Breakfast BA Rhonda/Lunch CS Timari 5-8 CS Debbie 9-6</p>	<p>28 MA Celeste 6-1 MA Carol 1-9 CS Rhonda 6-1 DR Janelle/Breakfast CS Savannah 5-7 CS Selena 11-9 Bingo CS Goni 9-6</p>
<p>29 MA Celeste 6-1 MA Carol 1-9 CS Rhonda 6-1 DR Janelle/Breakfast CS Savannah 5-7 CS Selena 11-9 Bingo CS Goni 9-6</p>	<p>30 MA Nicole 6-1 MA Carol 1-9 CS 7-9 Lenay Sylvia/Breakfast BA Rhonda/Lunch CS Selena 1-9 CS Savannah 5-7 CS Goni 9-6</p>	<p>31 MA Nicole 6-1 MA Carol 1-9 CS Jennie 7-5 IK/Lenay 7-4 Paula/Breakfast BA Tiff C/Lunch CS Celeste 11-7 CS Timari 5:30-8 CS Goni 9-6</p>				

Seize every day!



Hire Requirement Check List

Name _____

MANAGEMENT DOCUMENTATION	Date when Complete
Application <input type="checkbox"/> Reference Check <input type="checkbox"/> Two forms of Identification <input type="checkbox"/> W-4 <input type="checkbox"/> Automatic Deposit <input type="checkbox"/> I-9 <input type="checkbox"/>	
Physician's Choice <input type="checkbox"/> Health Screen <input type="checkbox"/> Health & Human Service Felony Misdemeanor <input type="checkbox"/> Drug Testing <input type="checkbox"/>	
Adult Central Registry (APS) Child Central Registry (CPS) <input type="checkbox"/> Criminal Background Check <input type="checkbox"/>	
Job Description <input type="checkbox"/> Job Hazard Information <input type="checkbox"/> Work Responsibilities <input type="checkbox"/> Benefit Information <input type="checkbox"/>	
New Hire <input type="checkbox"/> Medicaid Exclusion <input type="checkbox"/> Sex Offender Registry <input type="checkbox"/> OIG <input type="checkbox"/>	
Credentials (License, Certification) Nurse/Medication Aide Registry <input type="checkbox"/>	
NEW EMPLOYEE TRAINING CHECK LIST RESIDENT CARE	
Resident Service Agreements – Document in Packet	
Resident's Rights Policy & Procedure – Document in Packet	
Resident's Rights <u>Online Education "Relias" Resident's Rights for Assisted Living</u>	
Resident's Handbook – Document in Packet	
Abuse & Neglect Policy & Procedure – Document in Packet - misappropriation of money or property of a resident & reporting procedures <u>Online Education "Relias" Abuse, Neglect & Exploitation Essentials</u>	
Advance Directives – Document in Packet - Policy & Procedure & Form	
Death & Dying – Policy & Procedure – Document in Packet	
Emergency – Policy & Procedure – Document in Packet	
OSHA Training <u>Online Education "Relias" Tuberculosis: The Basics – Workplace Violence – Bloodborne Pathogens Essentials – Infection Control – OSHA Compliance (Lockout/Tagout & Hazard Communications) – OSHA Ergonomics lifting & moving</u>	
Handwashing <u>Online Education "Relias" Hand Hygiene: The Basics</u>	
Employee Policy & Procedure – Document in Packet – Personal Hygiene - Confidentiality	
TRAINING REQUIRED FOR EMPLOYEES THAT ARE NOT CNA'S	
Physical Special Care - Document in Packet - Resident Care Policy & Procedure– Initials by Trainer - Incontinence Care, Dressing Assistance, TED Application, Nail Care, Foot Care, Denture Care, Hearing Aides, Skin Care	
Mental Specific Care	
DISASTER TRAINING	
Disaster Training - Document in Packet – Disaster Policy & Procedure – Loss of Telephone, Water, Electrical, Elopement, Severe Weather, Evacuation	
Fire – Document in Packet <u>Online Education "Relias" Fire Safety Essentials</u>	
Disaster Training - <u>Online Education "Relias" Disaster Preparedness Essentials</u>	
DEMENTIA EDUCATION	
Dementia Care & Cultural Competency - <u>Online Education "Relias" Cultural Diversity, Challenging Behaviors, Communicating with older adults with Dementia, Delirium, Dementia, and Depression, Coaching & Completing ADL</u>	

Training completion is necessary within two weeks of employment. Relias and Policy & Procedures included in this packet contain your required training. Your Relias login is your first and last name as user ID and the password training101. Please create your own password with the last four digits of your social security number. You will receive notice for group orientation after your formal training. You must have 12 hours of Continuing Education per year; training times will be posted on the bulletin board.

Signature _____

Date _____

Benefit Options:BCBS: Waived Yes No If no Plan Summary Offered Yes No Initialed _____AFLAC: Waived Yes No If no Plan Summary Offered Yes No Initialed _____Guardian Dental: Waived Yes No If no Plan Summary Offered Yes No Initialed _____Vision Service Plan VSP: Waived Yes No If no Plan Summary Offered Yes No Initialed _____Unum Life Insurance: Yes No Initialed _____IRA Information: Waived Yes No Initialed _____

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2017 Training Calendar

DATE & STAFF	TOPIC	EDUCATOR	HOURS
JANUARY			
01-01-2017 All Staff	OSHA – Bloodborne pathogens, Infection control, workplace violence, TB, Resident’s Rights, Ergonomics, Advance Directives, Disaster Preparedness, Fire Safety, Hazardous Chemicals	Relias – online training	8 HRS
FEBRUARY			
02-01-2017 All Staff	Dementia Education – Meet Teepa Snow	Relias – online training	1 HR
02-01-2017	Winter District Rounds	Nebraska Health Care Association	4 HRS
MARCH			
03-01-2017 Medication Aides	Diabetes Management	Linda Klaasmeyer, RN	1HR
03-01-2017 All Staff	Dementia Education – Dementia 101 with Teepa Snow	Relias – online training	1HR
APRIL			
04-06-2017 Care Staff	Dementia Care Conference – sponsored by the Alzheimer’s Association	Nebraska Chapter Alzheimer’s Association	6-9 HRS
04-01-2015 Care Staff	Spring Convention Kearney	NALA	6-9 HRS
MAY			
05-01-2017 All Staff	Virtual Dementia Training	Stone Hearth Facilitators	2 HRS
JUNE			
05-01-2016 Medication Aides	Medication Aide training review	Linda Klaasmeyer, RN	1 HR
05-01-2017 All Staff	Cultural Competency	Relias – online training	1 HR
JULY			
08-01-2017 All Staff	Virtual Dementia Training	Stone Hearth Facilitators	2 HRS
AUGUST			
07-01-2017 All Staff	Dementia Education – Challenging Behaviors with Teepa Snow	Relias – online training	1 HR
SEPTEMBER			
09-01-2017 Medication Aides	Catheter and Colostomy Care	Linda Klaasmeyer, RN	1 HR
09-2016 Management Staff	Fall Convention	Nebraska Health Care Association	6-9 HRS
OCTOBER			
10-01-2017 All Staff	Dementia Education – Brain Changes with Teepa Snow	Relias – online training	1 HR
NOVEMBER			
11-01-2017 All Staff	Abuse & Neglect	Barb Nuxoll, Administrator & Relias Online training	1 HR
DECEMBER			
12-01-2017 All Staff	Workplace Violence	Barb Nuxoll, Administrator & Relias Online training	1 HR

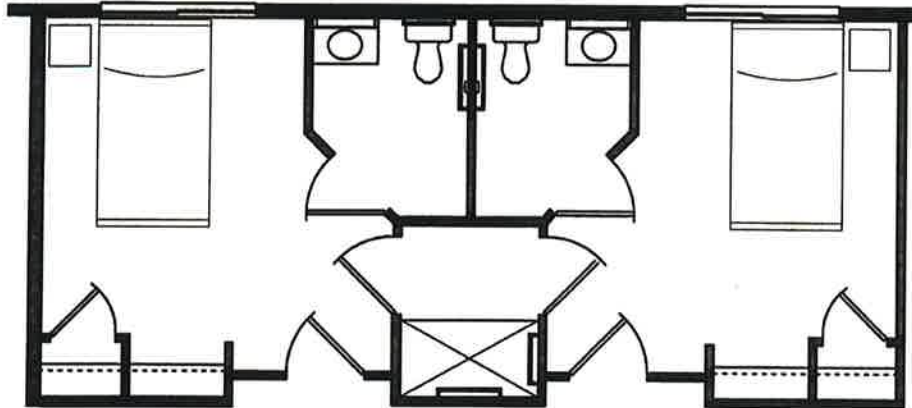
Specific dates during the month have yet to be scheduled.

Stone Hearth Estates Floor Plans

Second Floor
Memory Care

Memory Care Type 1

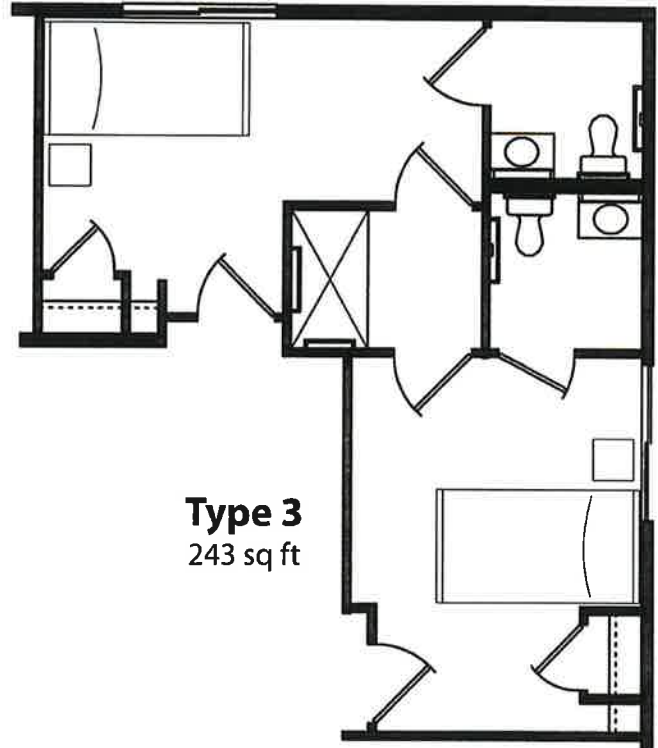
257 sq ft



Memory Care

Type 2

238 sq ft



Type 3

243 sq ft

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STONE HEARTH ESTATES

Independent Living • Assisted Living • Memory Care



Stone Hearth Estates provides housing and services to qualified individuals without regard to race, sex, age, national origin, religion or disability.

Stone Hearth Estates Floor Plans

Second Floor



**Stone Hearth Estates
2nd Floor Plan**

- | | |
|--------------------|--------------------|
| C Apartment Type C | 7 Men's Restroom |
| 1 Memory Care Type | 9 Laundry Room |
| 2 Memory Care Type | 10 Therapy Room |
| 3 Memory Care Type | 11 Fitness Room |
| 4 Stairs | 16 Public Restroom |
| 5 Elevator | 17 Fire Door |
| 6 Women's Restroom | |

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December 2016 Memory

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<p><i>Come Sing</i></p> <p><i>with us this</i></p> <p><i>Christmas</i></p>	<p>10:30 Coffee/Water/walks</p> <p>11:00 Scrabble</p> <p>11:30 Devotion's</p> <p>1:00 Monthly Wellness</p> <p>2:00 Craft time with KATE</p> <p>3:30 Refreshments</p> <p>4:15 Creative Coloring/Chalk Board Words</p> <p>5:00 Lawrence Walk</p> <p>7:00 Hand Messages/Stations</p>	<p>10:30 Coffee/Water/Walks</p> <p>11:00 Deans List</p> <p>11:30 Devotion's</p> <p>2:00 Bingo 2nd Floor</p> <p>3:30 Fresh Bread with Celeste 2nd floor</p> <p>4:00 Junk Band Christmas Practice</p> <p>4:15 R2D2* Family Feud</p> <p>5:00 Lawrence Walk</p> <p>7:00 Arm Messages/Stations</p>	<p>7 8:00 Men's Bible Study</p> <p>10:30 Coffee-Water/Walks</p> <p>11:00 Chair Exercise</p> <p>11:30 Devotion's</p> <p>2:15 Piano Recital Rhonda Peterson's</p> <p>3:00 Devotions with Pastor Mark</p> <p>3:45 Cheese & crackers</p> <p>4:00 Circle of Needles</p> <p>4:15 R2D2*BINGO</p> <p>5:00 Lawrence Walk</p> <p>7:00 Back Messages/Stations</p>	<p>1 9:00 Mark Kripal-Hearing & Audiologist</p> <p>10:30 Coffee/Water/walks</p> <p>11:00 Deans List</p> <p>11:30 Devotion's</p> <p>1:00 Walking/Puzzles</p> <p>2:00 Music with Judy and Regis</p> <p>3:00 Chalk Board Words</p> <p>3:15 Junk Band Christmas Practice</p> <p>3:30 Pie and Friends</p> <p>4:15 Chalk Board Words</p> <p>5:00 Lawrence Walk</p> <p>7:00 Foot Messages/Stations</p>	<p>2 9:00 Catholic Communion</p> <p>10:30 Coffee/Water/walks</p> <p>11:00 Chalkboard Words</p> <p>11:30 Words of Hope</p> <p>1:00 <u>Facials With Rhonda</u></p> <p>1:30 <u>Qwirkle Manicures</u></p> <p>2:30 <u>BINGO</u></p> <p>3:30 Refreshments</p> <p>4:15 Deans List</p> <p>5:00 Lawrence Walk</p> <p>7:00 Arm massages/Stations</p>	<p>3 10:30 Coffee/Water/walks</p> <p>Bean bag Toss/Qwirkle</p> <p>11:30 Devotions</p> <p>1:00 Walking/Car Rides</p> <p>2:00 Horse Races</p> <p>3:00 Chalk Board Words</p> <p>4:15 Creative Coloring/Walks</p> <p>5:00 Lawrence Walk</p> <p>7:00 Foot Messages/Stations</p>
<p>4 10:30 Coffee/Water/walks</p> <p>Bean bag Toss/Walks</p> <p>11:30 Devotions</p> <p>1:00 Walking/Car Rides</p> <p>2:00 Bingo</p> <p>3:15 Piano Recital with Sherri McMichael</p> <p>4:15 Church Service</p> <p>5:00 R2D2*Trivia</p> <p>7:00 New Hope Bible Study/Stations</p> <p><i>Community</i></p> <p><i>Christmas Cantata</i></p> <p><i>Lutheran Church</i></p>	<p>5 10:30 Coffee/Water/walks</p> <p>11:00 Scrabble</p> <p>11:30 Devotion's</p> <p>1:00 Monthly Wellness</p> <p>2:00 Craft time with KATE</p> <p>3:30 Refreshments</p> <p>4:15 Creative Coloring/Chalk Board Words</p> <p>5:00 Lawrence Walk</p> <p>7:00 Hand Messages/Stations</p>	<p>6 10:30 Coffee/Water/Walks</p> <p>11:00 Deans List</p> <p>11:30 Devotion's</p> <p>2:00 Bingo 2nd Floor</p> <p>3:30 Fresh Bread with Celeste 2nd floor</p> <p>4:00 Junk Band Christmas Practice</p> <p>4:15 R2D2* Family Feud</p> <p>5:00 Lawrence Walk</p> <p>7:00 Arm Messages/Stations</p>	<p>7 8:00 Men's Bible Study</p> <p>10:30 Coffee-Water/Walks</p> <p>11:00 Chair Exercise</p> <p>11:30 Devotion's</p> <p>2:15 Piano Recital Rhonda Peterson's</p> <p>3:00 Devotions with Pastor Mark</p> <p>3:45 Cheese & crackers</p> <p>4:00 Circle of Needles</p> <p>4:15 R2D2*BINGO</p> <p>5:00 Lawrence Walk</p> <p>7:00 Back Messages/Stations</p>	<p>8 10:30 Coffee/Water/walks</p> <p>11:00 Deans List</p> <p>11:30 Devotion's</p> <p>1:00 Walking/Puzzles</p> <p>2:00 I Got It!</p> <p>3:30 Pie and Friends</p> <p>4:15 Lawrence Walk</p> <p>5:30 to 6:00 Soup Supper</p> <p>Your family is cordially invited to our Soup Supper. See the Newsletter for details.</p>	<p>9 9:00 Catholic Communion</p> <p>10:30 Coffee/Water/walks</p> <p>11:00 Chalkboard Words</p> <p>11:30 Words of Hope</p> <p>1:00 Car Rides</p> <p><u>Manicures/Walks</u></p> <p>2:30 <u>BINGO</u></p> <p>3:30 Refreshments</p> <p>4:15 Word Search-r2d2</p> <p>5:00 Lawrence Walk</p> <p>7:00 Manicures/Stations</p>	<p>10 10:30 Coffee/Water/Walk</p> <p>11:30 Chalkboard Words</p> <p>11:30 Words of Hope</p> <p>2:00 Bingo</p> <p>3:15 Christmas Movie 2nd Floor</p> <p>"The Perfect Angel" With popcorn</p> <p>3:30 Refreshments</p> <p>4:15 Chalk Board Words</p> <p>5:00 Lawrence Walk</p> <p>7:00 Foot Messages/Stations</p>

<p>11 10:30 Coffee/Water/walks Bean bag Toss/Stations 11:30 Words of Hope Hope 1:00 Walking 3:30 Refreshments 2:00 Bingo 4:15 Church Service 5:00 Lawrence Welk 7:00 New Hope Bible Study/ Hand Messages/Stations</p>	<p>12 10:30 Coffee/Water/walks 11:00 Scrabble 11:30 Devotion's 1:00 Walking 1:30 Lutheran Communion 2:00 Craft time with KATE 3:30 Refreshments 4:15 Chalk Board Words 5:00 Lawrence Welk 7:00 Hand Messages/Stations</p>	<p>13 10:30 Coffee/Water/Walks 11:00 Deans List 11:30 Devotion's 1:00 Walking / Manicures 2:00 BINGO 3:30 Fresh Bread 4:15 R2D2 Word Search 5:00 Lawrence Welk 7:00 Arm Messages/Stations</p>	<p>14 8:00 Men's Bible Study 10:30 Coffee-Water/Walks 11:00 Chair Exercise 11:30 Devotion's 3:00 Devotions with Pastor Mark-2nd floor 3:30 Refreshments 4:00 Circle of Needles Chalk Board Words 5:00 Lawrence Welk 7:00 Back Messages/Stations 6:45 Awana's Carolers</p>	<p>15 10:30 Coffee/Water/Walks 11:00 Deans List 11:30 Devotion's 1:00 Music with Janice 3:30 Pie and Coffee/Friends 4:15 Family Feud 5:00 Lawrence Welk 7:00 Foot Messages/Stations "Happy Birthday" Mary Alice Grow</p>	<p>16 9:00 Catholic Communion 10:30 Coffee/Water/walks 11:00 Chalkboard Words 11:30 Words of Hope 1:00 Car Rides/Walks 2:00 Ginger Bread Houses 2:30 BINGO 3:30 Refreshments 4:15 R2D2 Word search 5:00 R2D2 Trivia 7:00 Manicures/Stations</p>	<p>17 10:30 Coffee/Water/walk 11:30 Chalkboard Words 11:30 Words of Hope 1:00 Walking/ Car Rides 2:00 BINGO 2-4 Open house  3:30 Popcorn 4:15 Chalk Board Words</p>	<p>18 10:30 Coffee/Water/walks 11:00 Play Ball/Stations 11:30 Devotions 1:00 Walking 2:00 Bingo 3:15 Trnny Lutheran Carolers/ Christmas Cookies 4:15 Church Service 5:00 Lawrence Welk 7:00 New Hope Bible Study/ Hand Messages/Stations</p>	<p>19 10:30 Coffee/Water/walks 11:00 Scrabble 11:30 Devotion's 1:00 Walking 2:00 Cookies with Day Care 2nd Floor 3:00 Sing-a-long with Pastor Joel -Chapel 3:30 Fresh Cookies 4:15 Qwirkle 5:00 Lawrence Welk 7:00 Hand Messages/Stations</p>	<p>20 10:30 Coffee/Water/Walks 11:00 Deans List 11:30 Devotion's 1:00 Walking/ Manicures 2:00 BINGO 3:30 Fresh Bread 4:00 Junk Band Concert  4:15 Qwirkle 5:00 Lawrence Welk 7:00 Arm Messages/Stations</p>	<p>21 8:00 Men's Bible Study 10:30 Coffee-Water/Walks 11:00 Chair Exercise 11:30 Devotion's 1:00 Foot Soaks/Stations 3:00 Devotions with Pastor Mark-2nd floor 3:30 Refreshments 4:00 Circle of Needles 4:30 Gothenburg Band -Instrumental 5:00 Lawrence Welk 7:00 Back Messages/Stations "Happy Birthday" Jean Knecse</p>	<p>22 10:30 Coffee/Water/Walks 11:00 Deans List 11:30 Devotion's 1:00 Walking/Puzzles 2:00 Bingo/Car Rides 2:00 Gingerbread Houses - 1st Floor Dining Room 3:30 Pie and/Friends 4:15 Stations/Qwirkle 5:00 Lawrence Welk 7:00 Foot Messages/Stations</p>	<p>23 9:00 Catholic Communion 10:30 Coffee/Water/Walks 11:00 Chalkboard Words 11:30 Words of Hope 1:00 Car Rides 1:00 Car Rides 2:00 Words of Hope 3:15 Christmas Movie 2nd Floor White Christmas 3:30 Popcorn 4:15 Chalk Board Words 5:00 Lawrence Welk 7:00 Foot Messages/Stations</p>	<p>24 10:30 Coffee/Water/walk 11:30 Chalkboard Words 11:30 Words of Hope 1:00 Walking/ Car Rides 2:00 BINGO 3:15 Christmas Movie 2nd Floor White Christmas 3:30 Popcorn 4:15 Chalk Board Words 5:00 Lawrence Welk 7:00 Foot Messages/Stations</p>
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25	10:30 Coffee/Water/walks 11:00 Creative Coloring/Stations /Walking 11:30 R2D2 Bingo 2:00 Bingo 3:15 Refreshments-Cheese & crackers 4:15 Word Search 5:00 Lawrence Welk 7:00 Foot Messages/Stations	26	10:30 Coffee/Water/walks 11:00 Scrabble 11:30 Devotion's 1:00 Walking/Stations 2:00 Craft time with KATE 3:00 Pastor Joel 3:30 Refreshments 4:15 Chalk Board Words 5:00 Lawrence Welk 7:00 Hand Messages/Stations	27	10:30 Coffee/Water/Walks 11:00 Deans List 11:30 Devotion's 1:00 Road Trip with the Men & Don 1:00 Walking 1:30 Manicures 2:00 BINGO 3:30 Fresh Bread 4:15 Family Fued 5:00 Lawrence Welk 7:00 Arm Messages/Stations	28	8:00 Men's BibleStudy 10:30 Coffee-Water/Walks 11:00 Chair Exercise 11:30 Devotion's 1:00 Foot clinic 1:00 Foot Soaks 3:00 Devotions with Pastor Mark-2 nd floor 3:30 Refreshments 4:00 Circle of Needles 4:15 Deans List 5:00 Lawrence Welk 7:00 Back Messages/Stations	29	10:30 Coffee/Water/walks 11:00 Deans List 11:30 Devotion's 1:00 Walking 2:00 I Got It! 3:30 Refreshments 4:15 R2D2 Word Search 5:00 Lawrence Welk 7:00 Foot Messages/Stations	30	9:00 Catholic Communion 10:30 Coffee/Water/walks 11:00 Chalkboard Words 11:30 Words of Hope 1:00 Car Rides Creative Coloring 2:30 BINGO 3:30 Refreshments 4:15 Family Feud 5:00 Lawrence Welk 7:00 Manicures/Stations	31	Happy New Year 10:30 Coffee/Water/walk 11:30 Chalkboard Words 11:30 Words of Hope 1:00 Walking/ Car Rides 2:00 BINGO 3:30 Popcorn 4:15 Chalk Board Words 5:00 Lawrence Welk 7:00 Foot Messages/Stations
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Merry Christmas

STONE HEARTH ESTATES
SERVICE AGREEMENT
ADDENDUM "A"
MEMORY CARE (2ND FLOOR)

Suite Rate \$5983.00 per month

Memory Care Service Package:

1. Three (3) meals per day, plus daily snacks
2. Medication administration
3. Health maintenance support (ie: daily glucose monitoring, hot/cold packs, etc)
4. Whirlpool bathing/shower supervision (3 times weekly or more as needed)
5. Daily upkeep/bed making
6. Weekly flat linen service
7. Weekly housekeeping
8. Assistance with dressing
9. Assistance with personal hygiene
10. Personal laundry services once per week, or as needed (excluding dry cleaning, hand washables and ironing)
11. Staff on duty 24 hours a day
12. Assistance with daily social and leisure activities
13. Transportation coordination
14. All utilities, excluding telephone, and extended basic cable TV
15. Interior and exterior maintenance, including lawn care and snow removal
16. Annual housekeeping (wash windows, deep clean)
17. Palliative care - \$50.00 per day
18. Ambulation Assistance _____ \$325.00 per month

Suite # _____ Monthly Rate _____ Date _____

Resident

Legal Representative Signature

Administrator Signature

Legal Representative Signature

**Memory Care is not available for Medicaid Waiver individuals*

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STONE HEARTH ESTATES

Independent Living · Assisted Living · Memory Care

STONE HEARTH ESTATES
110 W. 20TH SUITE 400
GOTHENBURG, NEBRASKA
308-537-7771

ALA CARTE SERVICES

Residents may choose any of the following services as the need for them arises. Charges for these services will be added to the next monthly statement following the use of the service(s).

- Staff accompaniment to medical visits - \$20.00 per hour
- Out of town transportation (distance restriction) .45 cents per mile plus \$20.00 per hour staff time.

Guest meals (Advanced noticed is appreciated)

- Breakfast – Lunch - Dinner \$7.50
- Holiday – Sunday Buffett \$12.50

