



Adult Day Care Center in Maine Becomes Financially Self-Sufficient

Partners in Caregiving: The Dementia Services Program

SUMMARY

From 1993 to 1996, staff at the Kennebec Health System's Alzheimer's Care Center in Kennebec, Maine, expanded its program of adult day services, nearly tripled its average daily attendance, and achieved financial self-sufficiency.

The project was part of the Robert Wood Johnson Foundation (RWJF) *Partners in Caregiving: The Dementia Services Program* national program.

Key Results

- Staff at the Kennebec Health System's Alzheimer's Care Center expanded its program of adult day services, nearly tripled its average daily attendance (from 3.7 to 10.6), and achieved financial self-sufficiency by using the following strategies:
 - Enacting a strong marketing plan.
 - Increasing the number of hours it was open Monday through Friday.
 - Arranging transportation to and from the center for clients and families.
 - Switching its billing to a system of prepayment and increasing its hourly fees to reflect actual costs, which resulted in lowered cancellation and no-show rates.

Funding

RWJF supported this project through a grant of \$35,000.

THE PROBLEM

The center opened in 1988 as a rural provider, which, by 1992, was offering part-time adult day services for 18 individuals in mid-stage Alzheimer's and other dementias, as well as residential care for another 28 individuals with dementia. The center is owned by the Kennebec Health System which also contains Kennebec Valley Medical Center, a 200-bed community hospital with a geriatric evaluation unit that in the past was nearly

the sole referral source of the center's Alzheimer's clients. Prior to the grant period, the center's average daily attendance was 3.7 people.

THE PROJECT

A New Emphasis on Marketing

Early in the grant period, the center fulfilled a grant goal by hiring a program director with experience in both geriatric nursing and marketing. With the help of staff, she developed and implemented a marketing plan centered on a strong referral-relations effort.

The center distributed brochures ("Tender Loving Care for Your Loved One, a Time of Renewal for You...") about its services to physician practice groups and to physician's offices, made presentations to physician groups, and instituted regular contact with social service departments at area hospitals. As a follow-up marketing device, the center began to provide quarterly update to physicians on any patients they had referred to the center.

The director accepted speaking engagements before area service organizations, such as the Lions Club, Ministers Association, and Rebekah's Lodge. Other marketing efforts included development of three TV commercials and two radio "spots" that aired periodically throughout most of 1995 locally on CNN, the USA channel, and Lifetime Television, and on local radio. Articles on the center ran in two local newspapers, and the center placed advertisements in these newspapers every two weeks.

Streamlined Operations

The center developed telephone-inquiry formats and information packets, and used these for all inquiries, set up a toll-free 800 line for prospective client families, and streamlined and shortened the admission process. By changing its daily charting process the center significantly improved its staff's time management. Over the grant period, average daily attendance nearly tripled (to 10.6 people). Further increase was limited only by lack of space.

New Programming

During the grant period, the center initiated "Take Home Tuesday." This activity, managed by a volunteer, allowed clients to help cook a take-home meal as part of a weekly group activity. The center reported very positive feedback on this goal-oriented activity from participants, families, and its own staff.

Converting To a Real-Cost Fee Schedule

At the onset of the grant, the center increased its fees approximately 10 percent, to \$8 per hour, which brought fees in line with true cost. The fee included one whirlpool bath per week and one meal per day. Common additional services were unbundled: added baths were priced at \$6 each and additional meals at \$3. Fees were scheduled to increase to \$9.25 per hour in the third year of the grant to match increased services and costs.

Perhaps as financially significant as a true-cost fee schedule, the center also restructured its billing, converting to a system requiring advanced payment. This change greatly reduced cancellations and no-shows. By the end of the grant's second year the center had reached financial self-sufficiency.

Service Hours Tailored To Working Caregivers

In 1994, service was extended one-half hour at the end of the day, making care available from 7 a.m. to 5:30 p.m. The rationale for extending hours in this marginal fashion was to match childcare center hours in the area, and to attract more working caregivers.

Extra service time at the end of the day is often critical, making it possible for caregivers either to pick up their family member at the center on the way home from work or to be home when that family member arrives home. The center offered Saturday care briefly, but attendance was marginal (averaging only one client) and the center had chronic difficulty securing staff for Saturdays. Although instituting Saturday care had been a goal under the grant, this service had to be dropped.

Transportation

The center offered transportation for its clients and caregivers through a contract with a local driving business that had extensive experience in transporting individuals with dementia. Approximately 60 percent of clients used the service. As a backup, the center also contracted with the Area Agency on Aging for use of their van.

Communications

A September 1993 cable television program featured the program and its activities and staff, and articles on the center also appeared during the grant in two local newspapers. Other information about communications is described in the previous section, [A New Emphasis on Marketing](#).

AFTERWARD

At the end of the grant period, the center planned to consider again offering Saturday hours, and securing additional space in order to increase program enrollment. The center

was also seeking new ways to market itself to potential clients with early stage Alzheimer's in a way that would be non-threatening and positive. In 1996, it could not effectively solicit new clients with possible early stage Alzheimer's. Due to space limitations, when these individuals visited the center, they were thrown into sudden contact with existing clients more severely afflicted, and the level of dementia they saw often repelled and saddened them.

A 2007–2006 report on funding priorities at MaineGeneral Health documented that the Prudence V. Webster Adult Day Services Wing opened in January 2004. The wing had its own entrance and the increased space allowed participants to choose to integrate with residents or maintain their own activities, depending on level of function. Support for the wing came from local business and community members.

In 1999 the adult day care program was recognized as a "National Model Adult Day Care Center" by RWJF's *Partners in Caregiving* national program.

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Program area: Vulnerable Populations

BIBLIOGRAPHY

(Current as of date of the report; as provided by the grantee organization; not verified by RWJF; items not available from RWJF.)

Television Coverage

30-second and 60-second public service announcements on:

- CNN (52 spots), September 1995.
- Lifetime (4 spots), September 1995.
- USA (21 spots), September 1995.

Print Coverage

"Bailey Feels Her Patients' Frustrations," in *Kennebec Journal*, January 22, 1994.