

Personal Care Homes, Assisted Living, and Nursing Care Explained

Levels of care terminology in Pennsylvania can be confusing. For many years, Pennsylvanians used assisted living and personal care as synonymous, interchangeable terms. Most facilities preferred assisted living because it sounded “less institutional.” But if you asked to see their licensure, every provider would have produced paperwork affirming their status as a personal care home.



That all changed in January 2011 after new legislation required the PA Department of Public Welfare and Office of Long-Term Living to license Assisted Living Residences (ALR) and Personal Care Homes (PCH) separately. However, many consumers—and even healthcare professionals—remain confused about the difference between the two as well nursing care.

Why the change?

In theory, assisted living was created to bolster consumer choice and bridge the gap between costly skilled nursing homes and personal care homes to enable residents to “age in place” for a longer period of time. The Pennsylvania Health Care Association (PHCA) and Center for Assisted Living Management (CALM) published a 280 page manual outlining the differences, but this handy chart is a great starting summary!

	Personal Care Homes (PCH)	Assisted Living Residences (ALR)
Level of Care	To provide meals, shelter and assistance with activities of daily living such as bathing, grooming, dressing, toileting, ambulating, medication monitoring and more.	To provide meals, shelter and assistance with activities of daily living such as bathing, grooming, dressing, toileting, ambulating, medication monitoring and more. Can also provide certain skilled nursing services such as catheter or colostomy care and IV medication administration.
Construction	Although many larger facilities don't follow these practices, PCH are permitted to offer shared bathrooms, multiple roommates, living quarters less than 225 sq. ft. for a single person and not required to provide “kitchen capacity” in rooms.	ALR must provide living quarters no less than 225 sq. ft. for a single person, private bathrooms, and provide counter-top space and outlets for small appliances and a sink equaling “kitchen capacity.”
Concept	Per state regulations, PCH must move residents requiring certain skilled nursing services to a higher level of care.	Per state regulations, ALR can maintain those found to be nursing facility eligible, enabling them to “age in place” longer because of higher staffing ratios and additional staff training.

Defining Nursing Care

Nursing care offers the more extensive care than personal care and assisted living. Also called “nursing home”, they too offer assistance with bathing, grooming, dressing and toileting, but typically for those whom are much more dependent. Skilled care is also provided registered nurses and includes medical monitoring and treatments along with services provided by specially trained professionals, such as physical, occupational, speech and sometimes respiratory therapists.

The Current Outlook

Since 2011, ALR have been slow to serve as a true alternative to nursing homes or personal care homes. To date, there are only about 3 dozen ALR compared to more than 1,200 PCH throughout Pennsylvania. In theory, ALR are a great option but practical challenges exist, like potential funding losses from state Medicaid programs. Many facilities would need extensive renovations to meet the new requirement - which is another roadblock. Only time will tell if the ALR model will gain popularity and support as a choice for older Pennsylvanians. Finally determining what level of care is the right one is a collaborative effort lead by a physician and other healthcare providers to recommend and order the correct level of living.