National Study of Long Term Care Providers:
An Essential Resource for Effective Advocacy of Adult Day Services

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Acknowledgements

• Directors and staff of participating adult day services centers
• NADSA Board of Directors
• Representatives of NADSA’s state affiliates
• NCHS Colleagues
• RTI NSLTCP Team

Thank you!
Learning Objectives

1. To obtain an overview of the NSLTCP ADS survey and content fielded in 2016 and how to access data.

2. To learn about key policy-relevant characteristics of ADS providers and participants, including new content collected in 2016, that are essential for comparing with other types of LTSS

3. Learn about how providers and policy-makers have used NSLTCP findings for advocacy

4. Learn about changes to the 2018 survey design
Overview

- Sponsored by CDC’s National Center for Health Statistics
- Integrated biennial initiative to monitor trends in paid, regulated long-term care

- Includes five sectors
  - adult day services centers and participants
  - home health agencies and patients
  - hospices and patients
  - nursing homes and residents
  - residential care communities and residents
Primary Study Goals

1. Estimate supply and use of paid, regulated long-term care services
2. Estimate key policy-relevant characteristics of providers and service users, and practices of providers
3. Produce national and state-level estimates, where possible
4. Compare within and between sectors
5. Examine trends over time
Provider Association Supporters

- National Adult Day Services Association (NADSA)
- LeadingAge
- National Center for Assisted Living (NCAL)
- National Association for Home Care & Hospice (HCAH)
- Argentum
- NASUAD
- American Seniors Housing Association (ASHA)
- American Health Care Association (AHCA)
- Center for Excellence in Assisted Living
- National Hospice and Palliative Care Organization
2016 Survey Eligibility Criteria

• Licensed or certified by State specifically to provide adult day services, or accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), or authorized or otherwise set up to participate in Medicaid, or part of a program of All-Inclusive Care for the Elderly (PACE);

• One or more average daily attendance of participants based on a typical week; and

• One or more participants enrolled at the center at the location at the time of the survey.
Questionnaires, Datasets, and Related Documentation

- Questionnaires
  - In 2016, there are two versions of the Adult Day Services Center Questionnaire and the Residential Care Community Questionnaire—version A and version B. NCHS uses two versions of the questionnaire for each sector in order to increase content without increasing burden for respondents. For each sector there are a set of core items common to both versions of the questionnaire; NCHS intends to produce both state and national estimates for these items. For each sector there is a subset of items that are unique to each version; NCHS intends to produce only national estimates for these items. Respondents are randomly assigned to one version of the questionnaire to produce accurate estimates.
  - [Adult Day Services Center A](#) [PDF – 496 KB]
  - [Adult Day Services Center B](#) [PDF – 459 KB]
Information Collected about Centers

**Operating characteristics**—ownership, chain status, capacity, Medicaid certification, specializations, revenue sources, model type (medical, social)

**Services offered**—dietary/nutritional, hospice, mental health, pharmacy, skilled nursing, social work, therapeutic, transportation

**Staffing**—employee and contract nursing, social work, activities staff

**Practices**—advance directives documentation/education, health information and electronic health records technology, fall risk assessment and reduction interventions
Information Collected about Participants

**Socio-demographics**—age, race, ethnicity, sex, Medicaid use

**Health conditions**—e.g., Alzheimer’s, cardiovascular disease, depression, hypertension, asthma, arthritis, developmental disability, diabetes, etc.

**Physical functioning**—need any assistance with bathing, dressing, eating, toileting, transferring, and walking/locomotion

**Health care use and adverse events**—emergency department use, falls and related injuries, hospitalizations and re-hospitalizations, receiving hospice

**Other characteristics**—living arrangements, advance directives on file
Accessing NSL TCP Results, 2012-2016
Findings from the 2016 Survey

The biennial National Study of Long-Term Care Providers (NSLTCP) monitors trends in the supply, provision, and use of the major sectors of paid, regulated long-term care services. NSLTCP uses survey data on the residential care community and adult day services, and administrative data on the home health, nursing home, and hospice sectors. The vision for NSLTCP is to offer reliable, accurate, relevant and timely national and state statistical information to support and inform long-term care services policy, research and practice.

What's New

- 2018 NSLTCP Adult Day Services Center Participant Portal (7/2018)
- 2018 NSLTCP Residential Care Community Participant Portal (7/2018)
- 2018 NSLTCP Adult Day Services Center FAQs (7/2018)
- 2018 NSLTCP Residential Care Community FAQs (7/2018)
- Estimates and confidence intervals on use of electronic health records and health information exchange among adult day services centers and residential care communities [PDF - 148 KB] (7/2018)
- QuickStats: Percentage of Residential Care Communities That Use Electronic Health Records, by Census Region — United States, 2016 (6/2018)
- QuickStats: Percentage Distribution of Long-Term Care Staffing Hours, by Staff Member Type and Sector — United States, 2016 (5/2018)
Study Results and Publications

National Study of Long-Term Care Providers

Study Results and Publications

- Reports
- National and State Estimates (Maps, Tables, and Figures)
- Journal Articles
- Presentations

https://www.cdc.gov/nchs/nsltcp/nsltcp_products.htm
Published Results from the 2016 Survey

NCHS Reports

• Variation in Adult Day Services Center Participant Characteristics, by Center Ownership (Data Brief No. 296)
• Advance directive documentation among adult day services centers and use among participants, by region and center characteristics (NHSR No. 117)

Quickstats

• Percentage Distribution of Adult Day Services Centers, by Type of Service
• Percentage Distribution of Long-Term Care Staffing Hours, by Staff Member Type and Sector
• Percentage Distribution of Adult Day Services Center Participants, by Place of Residence

Tables

• Estimates and confidence intervals on use of electronic health records and health information exchange among adult day services centers and residential care communities
• State estimates and standard errors for Data Brief No. 296
• 2016 NSLTCP Weighted Survey Estimates: Adult Day Services Center
Reports in Progress Using 2016 Data

• 2015-2016 NSLTCP Overview Report, state tables, and U.S. maps

• Service Provision, Number of Chronic Conditions, and 90-Day Hospitalizations in Adult Day Services Centers

• Advance directives state policies, center practices, and participant prevalence in adult day services centers

• Adult Day Services Models of Care

National Study of Long-Term Care Providers
2016 NSLTCP ADS Center Characteristics
Supply and Capacity of Adult Day Services

- **4,600** centers in 2016

- **298,400** participants served

- Average **42** participants attending daily
### Percentage of Long-Term Care Services Providers, by Sector

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Percentage</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential care</td>
<td>44%</td>
<td>28,900</td>
</tr>
<tr>
<td>Nursing home</td>
<td>24%</td>
<td>15,600</td>
</tr>
<tr>
<td>Home health</td>
<td>19%</td>
<td>12,200</td>
</tr>
<tr>
<td>Adult day services</td>
<td>7%</td>
<td>4,600</td>
</tr>
<tr>
<td>Hospice</td>
<td>7%</td>
<td>4,300</td>
</tr>
</tbody>
</table>

Total number of long-term care services providers is 65,600.

Percentage of Adult Day Centers, by US Region

- South: 32%
- West: 31%
- Northeast: 20%
- Midwest: 17%

SOURCE: NCHS, Long-Term Care Providers and Services Users in the United States: Data From the National Study of Long-Term Care Providers, 2015–2016, planned release in December 2018. [https://www.cdc.gov/nchs/nsltcp/nsltcp_reports.htm](https://www.cdc.gov/nchs/nsltcp/nsltcp_reports.htm)
Percentage of Providers, by Profit Status

- Residential care community: 81% For profit, 18% Nonprofit, 1% Government and other
- Home health agency: 81% For profit, 15% Nonprofit, 5% Government and other
- Nursing home: 69% For profit, 24% Nonprofit, 7% Government and other
- Hospice: 63% For profit, 23% Nonprofit, 14% Government and other
- Adult day services center: 45% For profit, 51% Nonprofit, 5% Government and other

Which one of the following best describes the participant needs that the services of this center are designed to meet?

a. ONLY social/recreation needs--NO health/medical needs;

b. PRIMARILY social/recreational needs and SOME health/medical needs;

c. EQUALLY social/recreational and health/medical needs;

d. PRIMARILY health/medical needs and SOME social/recreational needs;

e. ONLY health/medical needs--NO social/recreational needs

SOURCE: NCHS, Quickstats: Percentage distribution of adult day services centers, by type of service United States, 2016.
https://www.cdc.gov/mmwr/volumes/67/wr/mm6732a8.htm?s_cid=mm6732a8_e
Percentage of Providers, by Services Provision

- **Social work services**
  - Adult day services: 52%
  - Home health: 83%
  - Hospice: 100%
  - Nursing home: 100%
  - Residential care: 51%

- **Therapeutic services**
  - Adult day services: 47%
  - Home health: 96%
  - Hospice: 98%
  - Nursing home: 100%
  - Residential care: 66%

- **Skilled nursing or nursing services**
  - Adult day services: 65%
  - Home health: 100%
  - Hospice: 100%
  - Nursing home: 100%
  - Residential care: 66%

**SOURCE:** NCHS, *Long-Term Care Providers and Services Users in the United States: Data From the National Study of Long-Term Care Providers, 2015–2016*, planned release in December 2018. [https://www.cdc.gov/nchs/nsltcp/nsltcp_reports.htm](https://www.cdc.gov/nchs/nsltcp/nsltcp_reports.htm)
Percentage of ADS Centers Using Electronic Health Records and Health Information Exchange

Electronic health records: 24%
Electronic health information exchange with physicians: 8%
Electronic health information exchange with pharmacies: 6%
Electronic health information exchange with hospitals: 5%

Distribution of Long-Term Care Staffing Hours, by Staff Member Type and Sector

Nursing home
- Aide: 59
- Registered nurse: 13
- Licensed practical or vocational nurse: 21
- Activities director or staff: 5
- Social worker: 2

Residential care community
- Aide: 76
- Registered nurse: 7
- Licensed practical or vocational nurse: 6
- Activities director or staff: 10
- Social worker: 1

Adult day services center
- Aide: 39
- Registered nurse: 15
- Licensed practical or vocational nurse: 9
- Activities director or staff: 30
- Social worker: 6

SOURCE: NCHS, QuickStats. Distribution of long-term care staffing hours, by staff member type and sector: United States, 2016. https://www.cdc.gov/mmwr/volumes/67/wr/mm6717a6.htm?s_cid=mm6717a6_e
Percentage of Providers that are Medicaid-Certified

- Nursing home: 95%
- Home health: 78%
- Adult day services: 77%
- Residential care: 48%

SOURCE: NCHS, Long-Term Care Providers and Services Users in the United States: Data From the National Study of Long-Term Care Providers, 2015-2016, planned release in December 2018. [https://www.cdc.gov/nchs/nsltcp/nsltcp_reports.htm](https://www.cdc.gov/nchs/nsltcp/nsltcp_reports.htm)
Percentage of Revenue From Paid Participant Fees

- Medicaid: 59.7%
- Out-of-pocket by the participant/family: 13.9%
- Other federal, state, or local government: 12.7%
- Other source: 4.0%
- Veteran’s Administration: 3.8%
- Medicare: 2.4%
- Older Americans Act: 1.9%
- Private insurance: 1.7%

NOTES: Estimates may not sum to 100 because of rounding. Medicaid includes revenue from a Medicaid state plan, Medicaid waiver, Medicaid managed care, or California regional center.
SOURCE: NCHS, National Study of Long-Term Care Providers, 2016.
Percentage of adult day services centers that maintain documentation participants' advance directives, by center characteristics

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small</td>
<td>78.7</td>
</tr>
<tr>
<td>Medium</td>
<td>79.0</td>
</tr>
<tr>
<td>Large</td>
<td>74.4</td>
</tr>
<tr>
<td>Medicaid licensed</td>
<td>83.7</td>
</tr>
<tr>
<td>Not Medicaid licensed</td>
<td>60.2</td>
</tr>
<tr>
<td>Uses EHRs</td>
<td>84.9</td>
</tr>
<tr>
<td>Does not use EHRs</td>
<td>76.4</td>
</tr>
<tr>
<td>Nonprofit</td>
<td>77.4</td>
</tr>
<tr>
<td>For-profit</td>
<td>78.8</td>
</tr>
</tbody>
</table>

2016 Participant Characteristics
Use rate of ADSC participants aged 65 and over: US, 2016

The national rate is 4 per 1,000.

Rates based on participants enrolled in adult day services centers on any given day in 2016 per 1,000 persons aged 65 and over.
Percent Distribution of Users’ Age, by Provider Type

- **Adult day services center**: 16.3% Under 65, 25.2% 65 - 74, 20.3% 75 - 84, 37.4% 85 and over
- **Home health agency**: 25.2% Under 65, 29.9% 65 - 74, 26.8% 75 - 84, 18.1% 85 and over
- **Hospice**: 47.8% Under 65, 29.3% 65 - 74, 17.5% 75 - 84, 5.5% 85 and over
- **Nursing home**: 38.6% Under 65, 26.7% 65 - 74, 18.2% 75 - 84, 16.5% 85 and over
- **Residential care community**: 52.1% Under 65, 30.3% 65 - 74, 11.0% 75 - 84, 6.6% 85 and over

Percentage of Participants, by Race/Ethnicity and Ownership Type

- **All participants**
  - Non-Hispanic black: 15
  - Non-Hispanic white: 31
  - Hispanic: 23
  - Other race/ethnicity: 42

- **Participants in for-profit centers**
  - Non-Hispanic black: 14
  - Non-Hispanic white: 31
  - Hispanic: 29
  - Other race/ethnicity: 18

- **Participants in nonprofit centers**
  - Non-Hispanic black: 17
  - Non-Hispanic white: 54
  - Hispanic: 15
  - Other race/ethnicity: 12

*SOURCE: NCHS, Data Brief no. 296. https://www.cdc.gov/nchs/products/databriefs/db296.htm*
10 most common health conditions

Hypertension  50.3%
Arthritis  37.9%
Diabetes  31.4%
Alzheimer's disease or other dementias  30.9%
Depression  28.2%
Heart disease  27.1%
Osteoporosis  21.2%
COPD  10.0%
Asthma  8.3%
Chronic kidney disease  7.2%

Select health conditions in 2012, 2014, and 2016

Participants Needing Assistance with Physical Limitations, by Ownership Type

<table>
<thead>
<tr>
<th>Activity</th>
<th>All participants</th>
<th>Participants in for-profit centers</th>
<th>Participants in nonprofit centers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bathing</td>
<td>39</td>
<td>36</td>
<td>34</td>
</tr>
<tr>
<td>Dressing</td>
<td>37</td>
<td>34</td>
<td>39</td>
</tr>
<tr>
<td>Toileting</td>
<td>39</td>
<td>28</td>
<td>40</td>
</tr>
<tr>
<td>Transferring in or out of a chair</td>
<td>28</td>
<td>27</td>
<td>30</td>
</tr>
<tr>
<td>Eating</td>
<td>41</td>
<td>23</td>
<td>28</td>
</tr>
</tbody>
</table>

Percentage of Participants, by Place of Residence

- Private residence with relative(s): 51.6%
- Private residence alone: 19.9%
- Assisted living/residential care: 16.3%
- Private residence with non relative(s): 5.3%
- Other living arrangement: 4.5%
- Nursing home: 1.5%

SOURCE: NCHS, Quickstats: Percentage distribution* of adult day services center participants by place of residence†--National Study of Long-Term Care Providers, United States, 2016. https://www.cdc.gov/mmwr/volumes/67/wr/mm6702a9.htm?s_cid=mm6702a9_e
Percentage of Participants with Advance Directives, Overall and by US Region

<table>
<thead>
<tr>
<th>Region</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>37.7</td>
</tr>
<tr>
<td>Northeast</td>
<td>45.6</td>
</tr>
<tr>
<td>Midwest</td>
<td>41.0</td>
</tr>
<tr>
<td>South</td>
<td>39.6</td>
</tr>
<tr>
<td>West1</td>
<td>27.2</td>
</tr>
</tbody>
</table>

Using NSLTCP Data for Advocacy
How Can NSLTCP Findings Help With Planning to Meet The Needs of Your Participants?

• Provides performance benchmarks for your center and other centers across your state and nation

• Internal planning:
  – Addressing chronic conditions and unmet needs
  – Measure of frailty in center and sector across states and nation
  – Consider evidenced-based interventions and programs
  – Measure of center payer-mix and participant resources
  – Identify changes in conditions and services over time

• Meeting state reporting requirements

• Communicate with public and policymakers regarding services
Using NSLTCP Findings For Promotion of Adult Day Services Within States and Nationally

• Increases the visibility of the sector among policymakers and the public
• State-level, cross-sector comparisons provide basis for including adult day services in national and state-specific definitions of LTSS and post-acute care
• Provide evidence of the viability of the adult day services sector in meeting the needs of a diverse set of participants
Assisted Living: A Growing Aspect of Long Term Care

Assisted living communities serve individuals who need help with everyday activities and some health care services but do not require 24-hour skilled nursing care services for extended periods of time. These communities offer a unique mix of companionship, independence, privacy, and security in a home-like setting. The philosophy of assisted living is built on the concept of delivering person-centered care and services to each individual resident.

Residents
Assisted living communities serve the oldest old who need help with some activities of daily living (ADLs) and health care services.

- 835,200 residents nationwide
- 70% women
- 30% men
- 70% 85+
- 53% 75-84
- 30% 65-74
- 7% 65+

Activities of Daily Living
- 62% need help with bathing
- 47% need help with dressing
- 39% need help with toileting
- 20% need help with eating
- 30% need help with feeding

THE MEDIAN LENGTH OF STAY IS ABOUT 22 MONTHS

Common Conditions ALs Help Residents Manage
- 40% have Alzheimer’s or dementia
- 46% have irreversible disease
- 23% have depression
- 17% have diabetes

Activities and Services
- Typical Services:
  - 24-hour supervision and assistance
  - Exercise, health, and wellness program
  - Housekeeping and maintenance
  - Meals and dining service
  - Medication management or assistance
  - Personal care services such as ADLs
  - Transportation

- Coordinated Services:
  - Assisted living does not directly provide certain health care services, but consistently works with other providers to ensure residents' health needs are met.
  - Transportation
  - Depression screening
  - Injuries
  - Mental health or counseling
  - Pharmacy/Pharmacist
  - Podiatry
  - Skilled nursing
  - Speech therapy

Coordinated Services (Continued)
- 95% of communities have a licensed nurse available 24-7
- 53% of assisted living residents use some form of private funds to pay for care.

Paying for Care
- Average Yearly Cost: $43,200 per year
- Medicaid: 47% of all assisted living residents certified
- Medicare: 30%
- 10% 7%

Communities
- 30,200
- 1,000,000 Total Licensed Beds
- 33 Beds Average Number of Licensed Beds in an AL Community

Workforce
- 416,300 total employees
- 82% Aide
- 11% LVN/LPN
- 7% RN

Paying for Care
- This is less than the average cost for home health aide ($45,760)
- Medicaid does not pay for room and board costs. Each state varies on whether it covers assisted living services.

Medicare
- Medicare beneficiaries, making Medicare issues (hospitalizations, medications, therapy services, etc.) important to assisted living providers.

Residents

- 60% are over the age of 85.
- 36% have Alzheimer’s disease or other form of dementia.

Providers

- 900: The number of assisted living communities
- 60,500: The number of beds or licensed max capacity

Workforce

- 19,742: The number of nursing FTEs (nurses, LPNs/LVNs*, and personal care aides, certified nurse assistants, home health aides, home care aides, personal care assistants, and medication technicians or medication aides) working in assisted living communities.
ARGENTUM    DESIGNING EXCELLENCE

OUR MISSION

Argentum (previously named Assisted Living Federation of America) serves as the voice for operators of senior living communities and the seniors and families those communities serve. Members of Argentum exemplify the principles of choice, dignity, and independence for seniors. To support these principles and to enhance quality of life for seniors, Argentum influences public policy, promotes business excellence, and informs an informed public.

WHAT IS ASSISTED LIVING?

Assisted Living is a home and community-based setting for older adults combining housing, supportive services, and health-care as needed. Individuals who choose assisted living enjoy an independent lifestyle with assistance customized to meet each resident’s needs and benefits that enrich their lives.

Assisted Living promotes independence, purpose, and dignity for each resident and encourages the involvement of a resident’s family and friends. Staff is available to meet both schedule and unscheduled needs. Communities typically offer dining, social and wellness activities, and personal care services. There are currently 39,200 communities in the United States with more than 885,200 residents calling assisted living homes.

OUR IMPERATIVES

WORKFORCE DEVELOPMENT
Growing a workforce of trained professionals to serve America’s older adults
Adding 347,000 new jobs by 2025, senior living employment will exceed 11 million

QUALITY CARE
Nurturing environments that enhance the quality of life for senior living residents
78% of senior living residents currently are diagnosed with at least two chronic conditions

OPERATIONAL EXCELLENCE
Improving the senior living business through innovation and technology
17.4% of residential care communities use electronic health records for purposes other than billing or accounting

CONSUMER CHOICE
Promoting strategies for financing long-term care services and supports
A 65 year old today will incur $138,100 in future lifetime expenses for severe long-term needs. 16% of those 65 year olds will incur more than $256,000.

MEMORY CARE
Enhancing awareness and best practices for the care of residents with dementia
By 2050, Alzheimer’s and other dementias is projected to cost the nation $255 billion.

UNITED STATES RESIDENTS PROFILE

Need for assistance with selected activities of daily living among residential care residents, by community size. United States, 2014

<table>
<thead>
<tr>
<th></th>
<th>ALL SIZES</th>
<th>24-50 BEDS</th>
<th>MORE THAN 50 BEDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mobility</td>
<td>18%</td>
<td>20%</td>
<td>19%</td>
</tr>
<tr>
<td>Eating</td>
<td>16%</td>
<td>18%</td>
<td>14%</td>
</tr>
<tr>
<td>Dressing</td>
<td>14%</td>
<td>14%</td>
<td>13%</td>
</tr>
<tr>
<td>Transferring</td>
<td>11%</td>
<td>11%</td>
<td>11%</td>
</tr>
<tr>
<td>Toileting</td>
<td>11%</td>
<td>11%</td>
<td>11%</td>
</tr>
<tr>
<td>Bathing</td>
<td>10%</td>
<td>12%</td>
<td>10%</td>
</tr>
</tbody>
</table>

TOTAL RESIDENTS: 835,200
COMMUNITIES: 30,200

Majority of residents (53%) were aged 85 & over

Selected diagnosed medical conditions among residential care residents, by community size. United States, 2014

<table>
<thead>
<tr>
<th></th>
<th>ALL SIZES</th>
<th>24-50 BEDS</th>
<th>MORE THAN 50 BEDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chilean</td>
<td>2%</td>
<td>2%</td>
<td>1%</td>
</tr>
<tr>
<td>American Indian</td>
<td>1%</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Arab</td>
<td>1%</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Asian</td>
<td>1%</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>African American</td>
<td>1%</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Other Race</td>
<td>1%</td>
<td>1%</td>
<td>1%</td>
</tr>
</tbody>
</table>

SOURCE: CDC, National干事 of Long-term Care Facility, 2011
What to Expect from the 2018 Adult Day Services Center Survey
The Dawn of a New Design
Sample versus Census

**POPULATION**
Your whole customer base

**SAMPLING FRAME**
The group of customers you have the ability to contact with your survey

**SAMPLE**
The group of customers you actually contact with your survey and who actually fill it out
# Two Survey Components

<table>
<thead>
<tr>
<th>Provider Questionnaire</th>
<th>Services User Questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Randomly selected sample of 1,650 centers throughout the US</td>
<td>• Randomly selected sample of 2 participants from centers that submit a provider questionnaire</td>
</tr>
<tr>
<td>• Organizational characteristics of centers and some participant characteristics</td>
<td>• Must be completed by telephone only</td>
</tr>
<tr>
<td>• Completed by <a href="#">web</a> or by mail</td>
<td></td>
</tr>
</tbody>
</table>


Geographic Detail

National estimates only

State estimates not possible

- Cardiovascular disease
- Diabetes
- Alzheimer's disease or other dementias
- Intellectual or developmental disability
- Depression
- Severe mental illness

- All participants
- Participants in for-profit centers
- Participants in nonprofit centers

Estimate does not meet reliability or confidentiality standards
Information about Participants

Look across characteristics

Examine burden of disease and ADLs

The 10 most common chronic conditions for all residents included, in descending order: hypertension (57%), Alzheimer’s disease and other dementias (42%), heart disease (36%), depression (28%), arthritis (27%), osteoporosis (21%), diabetes (17%), chronic obstructive pulmonary disease (COPD) (15%), cancer (15%), and stroke (11%).

Hypertension, Alzheimer’s disease and other dementias, heart disease, arthritis, osteoporosis, cancer, and stroke were more prevalent among residents aged 65 and over than among residents under age 65.

A higher percentage of residents under age 65 had depression, diabetes, or COPD than did residents aged 65 and over.
Information about Centers

• More thorough review of key organizational characteristics, such as the center’s...

• Hours of operation
• Screening and assessment tools
• Computerized capabilities and use of electronic health records/health information exchange
• Staffing
• Person-centered care practices
## Survey Respondent Burden

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<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>• 15 minutes telephone call to screen for eligibility and set future appointment for participant sampling and data collection</td>
<td>• 45-60 minutes provider questionnaire</td>
</tr>
<tr>
<td>• 30 minutes provider questionnaire</td>
<td>• Tasks are more difficult to complete because we are asking providers to aggregate information about participants</td>
</tr>
<tr>
<td>• 30 minutes services user questionnaire</td>
<td></td>
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<tr>
<td>• Tasks are easier to complete because we are not asking providers to aggregate information about participants</td>
<td></td>
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</tbody>
</table>
If selected to participate in 2018, your center will be contacted by NCHS to:

**Read important information about the survey**
- Contact method: By mail (USPS)
- Purpose: Provide information about data collection; ethical and confidentiality issues; examples of NSLTCP publications; letters of support from organizations that provide services to adult day services centers

**Screen for Eligibility and Schedule Appointment to Complete the Services User Component**
- Contact method: Telephone call
- Purpose: Determine survey eligibility and schedule a follow-up call to complete the services user sampling and questionnaire.

**Complete the Provider Questionnaire**
- Contact method: Email or by mail (USPS)
- Purpose: Complete the provider questionnaire.

**Prepare Information for Services User Sampling and Questionnaire**
- Contact method: Email or by mail (USPS)
- Purpose: Prepare a list of participants and access showcards to assist with completing the services user sampling and questionnaire.

**Complete Services User Sampling and Questionnaire**
- Contact method: Telephone call
- Purpose: Sample two participants and complete a services user questionnaire for each of them.
Accessing the 2018 data

• Public Use Files
• Published reports and tables
• Restricted data files
ADSC Survey Participant Portal

Welcome Adult Day Services Center NSLTCP Participants

Your Adult Day Services Center is Important to Us!

The most reliable information comes directly from providers like you. In order for policy-makers to make solid, evidence-based decisions about long-term care in the U.S., it is essential that we collect data from the 1,650 adult day services centers invited to participate in the 2018 National Study of Long-Term Care Providers (NSLTCP). Your adult day services center was randomly selected to represent not only your adult day services center, but also other comparable adult day services centers across the United States. Without your help, it may be impossible to make accurate estimates about the amount and types of care provided to participants in adult day services centers like yours.

What’s in it for your Adult Day Services Center?

Data for Comparisons: NSLTCP data will provide benchmarks, which will allow you to compare your center with other centers like your own.

National Estimates: By participating, you will contribute to a more complete and accurate picture of the provision and use of adult day services centers and services in this country, which will inform long-term care policies and planning. Visit the NSLTCP Study Results and Publications page for examples of how NSLTCP data have been used to produce national estimates of adult day services centers and participants.

Survey participant materials:

- [What to expect from the 2018 Adult Day Services Center Survey](http://www.cdc.gov/nchs/nsltcp/adsc_participants.htm) [PDF - 178 KB]
- [Letter from NCHS Director with FAQ's](http://www.cdc.gov/nchs/nsltcp/adsc_participants.htm) [PDF - 42 KB]
Survey Participant Resources

Survey participant materials:

- **What to expect from the 2018 Adult Day Services Center Survey** [PDF – 178 KB]
- **Letter from NCHS Director with FAQ’s** [PDF – 42 KB]
- **Provider and Services User Questionnaires**
  - The adult day services center provider questionnaire collects information about the organizational characteristics of centers, the services they offer, their staffing profile, and the demographic and functional status profile of participants.
    - **Adult Day Services Center Provider Questionnaire** [PDF – 1 MB]
  - In 2018, NSLTCP will for the first time also collect information about individual services users, or center participants. The services user telephone interview will collect information about the demographics, health and functional status, and service utilization of two randomly sampled adult day services center participants.
    - **Adult Day Services Center Services User Questionnaire** [PDF – 152 KB]
    - **Adult Day Services Center Services User Questionnaire Showcards** [PDF – 160 KB]
- **Ethics Review Board (ERB) Letter** [PDF – 51 KB]
- **Adult Day Services Centers Letter of Support** [PDF – 75 KB]
- **Adult Day Services Center Participant Data Brief**
- **Strictly Confidential Brochure** [PDF – 245 KB]

http://www.cdc.gov/nchs/nsltcp/adsc_participants.htm
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Importance of Completing Your 2018 ADS Provider and User Questionnaires

National Study of Long-Term Care Providers

2018 Adult Day Services Center Provider Questionnaire

Dear Director,

The Centers for Disease Control and Prevention conducts the National Study of Long-Term Care Providers. Please complete this questionnaire about the adult day services center listed below.

- If this adult day services center is associated with a long-term care facility or campus that offers multiple levels of care, please focus on the portion operating at the location listed below.
- Please consult records and other staff as needed.
- If you need assistance or have questions, please email us or call 1-877-256-8029.

What is [SAMPLED PERSON'S INITIALS]'s gender?
1. MALE
2. FEMALE

What is [SAMPLED PERSON'S INITIALS]'s age in years?

Is [SAMPLED PERSON'S INITIALS] of Hispanic, Latino, or Spanish origin or descent?
1. YES
2. NO
3. DON'T KNOW

Please look at the show card titled “Race” to answer this question. Which one or more of the following would you say is [SAMPLED PERSON'S INITIALS]'s race? Please tell me the numbers that apply from the show card. Any others?

1. AMERICAN INDIAN OR ALASKA NATIVE
2. ASIAN
If you are selected to participate in the 2018 NSLTCP, please complete your adult day services provider and services user questionnaires as soon as possible and make your voices heard!

If you need assistance with completing the survey, call the NSLTCP survey team at 1-877-256-8029.
This and other presentations can be downloaded at no cost from the following website:

http://www.cdc.gov/nchs/nsltcp/nsltcp_presentations.htm
For questions or comments about NSLTCP, please contact the Long-Term Care Statistics Branch at National Center for Health Statistics (NCHS):

Email: ltcsbfeedback@cdc.gov
Phone: 301-458-4747

Visit us on the web at:
http://www.cdc.gov/nchs/nsltcp.htm