2010 National Survey of Residential Care Facilities (NSRCF): Overview and Selected Findings

Lauren Harris-Kojetin, PhD
Manisha Sengupta, PhD
National Center for Health Statistics

Emily Rosenoff, MPA
Office of the Assistant Secretary for Planning and Evaluation

National Conference on Health Statistics
August 7, 2012
NSRCF Federal Government Partners

- CDC’s National Center for Health Statistics (NCHS)
- HHS Office of the Assistant Secretary for Planning and Evaluation (ASPE)

Contributing agencies and departments
- CDC’s National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)
- CDC’s National Center for Immunization and Respiratory Diseases (NCIRD)
- Agency for Healthcare Research and Quality (AHRQ)
- U.S. Department of Veterans Affairs (VA)
NSRCF Provider Association
Supporters

LeadingAge
(formerly aahsa)

American Seniors Housing Association

ncal®
National Center for Assisted Living

ALFA
Assisted Living Federation of America

Board & Care Quality Forum
A Publication of Reisacher Petro & Associates
NSRCF Primary Goals

1. Estimate the size of the U.S. industry

2. Determine the characteristics of communities

3. Determine the characteristics of residents
NSRCF Content

• Community
  – Community Characteristics
  – Staffing
  – Services Offered
  – Operating Procedures and Practices
  – Facility-level Distribution of Resident Characteristics
  – Administrator Characteristics
NSRCF Content

• Resident
  – Demographics
  – Health Status and Health Care Use
  – Cognitive and Physical Functioning
  – Services Used
  – Involvement in Activities
  – Living Arrangements
  – Monthly Charges
  – Medicaid Coverage Status
NSRCF Eligibility Definition

• 4 or more beds;
• primarily an adult population;
• at least 1 resident at time of interview;
• licensed, registered, listed, certified, or otherwise regulated by the state to...
  • provide room and board with at least 2 meals a day;
  • provide around-the-clock on-site supervision; and
  • offer help with personal care OR health care-related services.

Exclusions: Nursing homes and facilities exclusively serving adults with severe mental illness or ID/DD.
NSRCF Data Collection

• Conducted interviews April – November 2010
• Collected data on 2,302 communities and 8,094 current residents
• Weighted response rates
  – Community-level: 81%
  – Resident-level: 99%
• Design and Operation of the 2010 National Survey of Residential Care Facilities

http://www.cdc.gov/nchs/data/series/sr_01/sr01_054.pdf
Residential care facilities and residents, by facility size: United States, 2010

- **Extra large (Over 100 beds)**
  - Facilities: 7% 2,100
  - Residents: 29% 208,900

- **Large (26 to 100 beds)**
  - Facilities: 28% 8,700
  - Residents: 52% 381,800

- **Medium (11 to 25 beds)**
  - Facilities: 16% 4,900
  - Residents: 52% 381,800

- **Small (4 to 10 beds)**
  - Facilities: 50% 15,400
  - Residents: 9% 67,000
  - Residents: 10% 75,700

**NOTE**: Estimates may not add to totals because of rounding.

**SOURCE**: CDC/NCHS, National Survey of Residential Care Facilities, 2010
Residential care facilities, by co-location status with other types of providers: United States, 2010

- Independent living or independent apartments: 19%
- Nursing Home: 12%
- Rehabilitation subacute or postacute care unit in a nursing home: 9%
- Continuing Care Retirement Community: 6%
- Stand-alone: 76%

NOTE: Figure excludes cases with missing data.
A small number of facilities were located on a property with a hospital. However, the number did not meet NCHS standards for reliability and are not presented here.
Residential care facilities, by selected services, United States, 2010

- Adult day services: 11%
- Respite care: 27%
- Dementia-specific unit within facility: 11%
- Dementia-only facility: 6%

NOTE: Figure excludes cases with missing data.
Residential care facilities, by selected aspects of access to residential care: United States, 2010

- Facilities with any residents currently on waiting list: 29%
- Facilities where any of the residents who moved out did so because of cost: 28%
- Facilities with any residents who had any LTC services paid by Medicaid: 43%

NOTE: Figure excludes cases with missing data.
Residential care facilities, by percentage of residents receiving assistance with selected activities of daily living, United States, 2010

![Bar chart showing the percentage of residents receiving assistance with daily activities.](chart)

- Eating: 23%
- Transferring: 26%
- Locomotion: 30%
- Using bathroom: 47%

**NOTE:** Figure excludes cases with missing data.

**SOURCE:** CDC/NCHS, National Survey of Residential Care Facilities, 2010.
# 2010 NSRCF Data Dictionary: Facility Public-Use File

**2010 National Survey of Residential Care Facilities**

**Data Dictionary**

**Facility Public-Use File**

* *Technical notes on the use of nesting and weight variables are at the end of this data dictionary.*

<table>
<thead>
<tr>
<th>QUESTION NUMBER</th>
<th>VARIABLE NAME</th>
<th>QUESTION TEXT</th>
<th>CODE CATEGORIES</th>
<th>UNWEIGHTED FREQUENCIES</th>
<th>WEIGHTED PERCENTAGES</th>
<th>FACILITIES ASKED / RECODED</th>
<th>ADDITIONAL NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>FACNUM</td>
<td>FACID</td>
<td>Facility ID</td>
<td></td>
<td></td>
<td></td>
<td>A3</td>
<td></td>
</tr>
<tr>
<td>FACSIZE</td>
<td></td>
<td>Facility size defined by the number of beds reported in Resident Selection Questionnaire</td>
<td>1 = SMALL (4-10 beds)</td>
<td>626</td>
<td>49.6</td>
<td>A3</td>
<td>FACILID is not the same as FACID in the resident public-use file. For requirements of confidentiality, the files cannot be linked using FACILD and FACID.</td>
</tr>
<tr>
<td>F_514</td>
<td>CHAIN</td>
<td>Is this facility owned by a chain, group, or multi-facility system?</td>
<td>1 = YES</td>
<td>974</td>
<td>37.7</td>
<td>A3</td>
<td></td>
</tr>
<tr>
<td>Derived from F_515</td>
<td>OWN2</td>
<td>What is the type of ownership of this facility? Private for profit, Private Nonprofit, or State, county, or local government</td>
<td>1 = PRIVATE, FOR PROFIT</td>
<td>1776</td>
<td>82.4</td>
<td>A3</td>
<td>3 code categories were recoded to 2 categories.</td>
</tr>
<tr>
<td>Derived from F_A1, F_3</td>
<td>OCCU_CAT</td>
<td>Occupancy rate = 100* [total number of residents/total number of residential care beds]</td>
<td>1 = 1.0-65.0%</td>
<td>502</td>
<td>21.6</td>
<td>A3</td>
<td>Recoded from a continuous variable.</td>
</tr>
<tr>
<td>Derived from F_ANEW2a, F_A2</td>
<td>PERROOM1</td>
<td>Percent of resident living quarters that are rooms designed for 1 person</td>
<td>0.0 - 100.0%</td>
<td>2302</td>
<td>100.0</td>
<td>A3</td>
<td></td>
</tr>
<tr>
<td>Derived from F_ANEW2b, F_ANEW2c, F_A2</td>
<td>PERROOM2</td>
<td>Percent of resident living quarters that are rooms designed for 2 or more persons</td>
<td>0.0 - 100.0%</td>
<td>2302</td>
<td>100.0</td>
<td>A3</td>
<td></td>
</tr>
<tr>
<td>Derived from F_ANEW4a, F_ANEW4b, F_A2</td>
<td>PERAPT1</td>
<td>Percent of resident living quarters that are studio or one bedroom apartments</td>
<td>0.0 - 100.0%</td>
<td>2302</td>
<td>100.0</td>
<td>A3</td>
<td></td>
</tr>
</tbody>
</table>
Upcoming NSRCF Products

• ASPE Issue Briefs, Spring and Summer 2012
  – Impact of the April 15, 2011 Proposed Rule on Medicaid HCBS Waivers
  – Medicaid in Residential Care
  – Resident Health Conditions/Functional States and Services

• NCHS/ASPE NSRCF Chart Book, 2013
  – Characteristics of communities and residents

• NCHS products underway, 2013
  – Dementia care
  – Medication management
  – Health information technology
  – Hospitalizations
Major Goals

1. Estimate the national supply of paid, regulated LTC providers
2. Estimate key policy-relevant provider characteristics
3. Estimate the national use of these providers
4. Estimate key policy-relevant user characteristics
5. Within the above goals, provide state estimates where feasible
6. Compare types of providers
NSLTCP Provider Types and Data Sources

**Provider Types**
- Hospices
- Nursing Homes
- Home Health Care Agencies
- Residential Care Communities
- Adult Day Services Centers

**Data Sources**
- Administrative records
- Survey data
The National Center for Health Statistics is launching a new National Study of Long-Term Care Providers (NSLTCP). NSLTCP will replace the previously conducted National Nursing Home Survey, National Home and Hospice Care Survey, and most recently, National Survey of Residential Care Facilities. NSLTCP will provide nationally representative statistical information about the supply and use of paid, regulated long-term care (LTC) providers in the United States. This study, which will be conducted every other year, is intended to enable efficient and timely monitoring of the diverse and evolving field of LTC and to help address the nation’s information needs to inform future LTC policy.

For more information and announcements:
- Sign up for the Long-Term Care Listserv
- Leave a message at 301-458-4747

National Study of Long-Term Care Providers Newsletter [PDF - 159 KB]

For more information and announcements:
- Sign up for the Long-Term Care Listserv
- Leave a message at 301-458-4747

Contact Us:
Long-Term Care Statistics Branch
National Center for Health Statistics
3311 Toledo Road
Hyattsville, MD 20782
1-800-232-4636
(301) 458-4747
For questions about NSLTCP or NSRCF:

Lauren Harris-Kojetin  
National Center for Health Statistics  
fti3@cdc.gov  
301-458-4369

Manisha Sengupta  
National Center for Health Statistics  
hku2@cdc.gov  
301-458-4754