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**National Center for Assisted Living**

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and Professional Development

# Industry Perspective on the National Study of Residential Care Facilities

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# Why the NSRCF was Successful

- The four trade associations had worked together to collect industry data twice before. We all believe in data.
- Two of the researchers were familiar to us
- The others were people friendly
- Frequent communication (meetings and emails) worked and avoided miscommunication
- Regularly soliciting industry input built trust
- CEAL played a role in keeping us organized and communication flowing



# Member Communication was Key

- Regular “blurbs” allowed the trade associations to raise awareness among providers in e-communications and articles
- Stump speeches & presentations
- NCHS booths in national convention expo halls
- The Purple Brochure was an effective “leave behind”
- Signing on in support of the survey reduced provider fears
- Nomenclature mattered “study” vs. “survey”



# The Survey Findings Were Relevant

- **Two user-friendly fact filled data briefs that could be used with a number of audiences, including:**
  - Providers
  - Policymakers
  - Media
  - The public
  - Other researchers
- **The data contained answers to most of the common questions we receive**



# Regional Variation

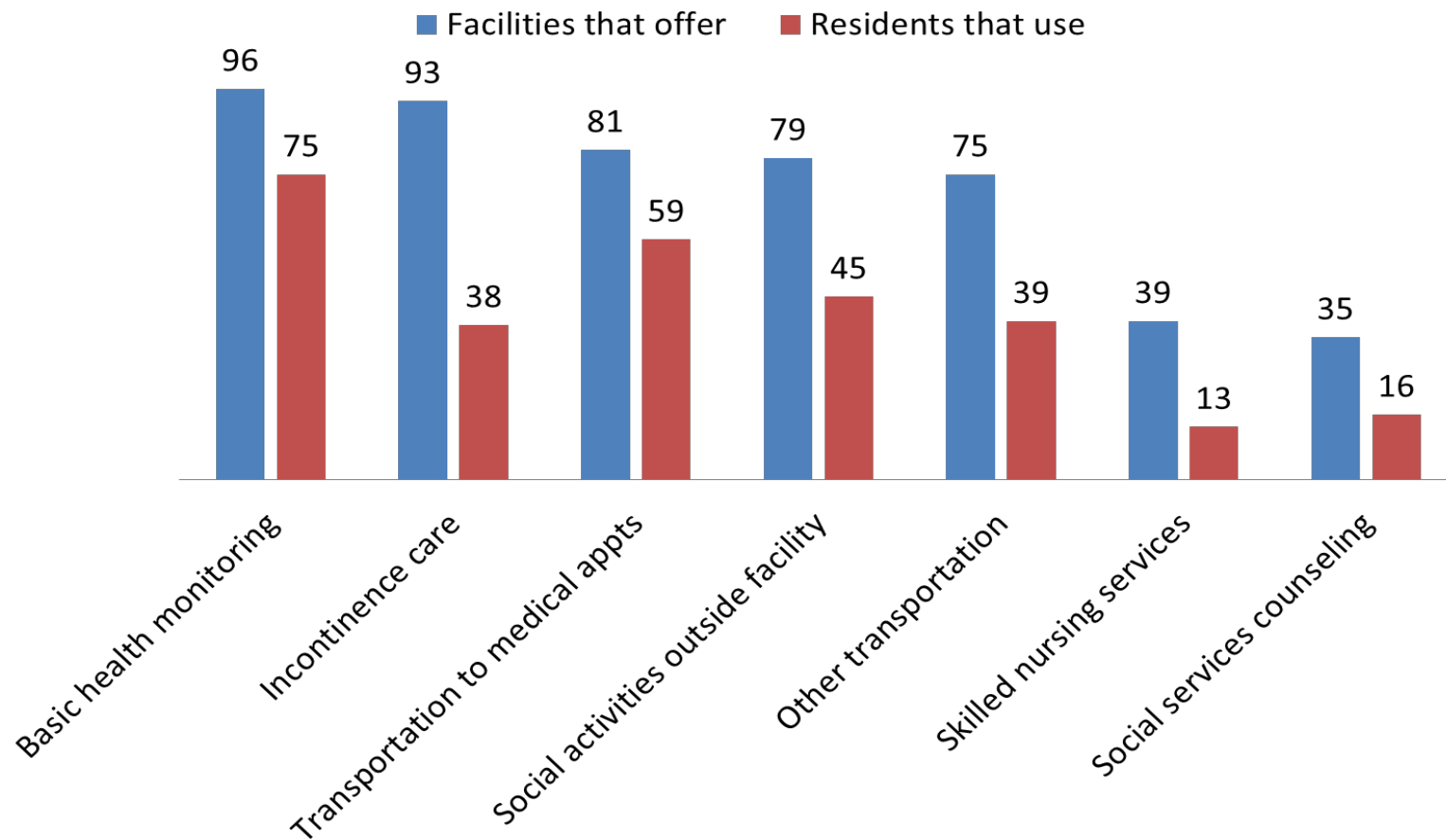
U.S. Dept. of HHS  
*2010 National Survey of Residential Care Facilities*

Residential care facility beds per 1,000 persons aged 85 and over, by region

Region	Beds/1,000 persons 85+
West	245
South	164
Midwest	177
Northeast	131
Total: United States	177



# Percent of facilities offering selected services, and residents using them



2010 National Survey of Residential Care Facilities



# Health Conditions

## 2010 National Survey of Residential Care Facilities Data National Center for Health Statistics

▪ Hypertension	56.7%
▪ Alzheimer's/Dementia	41.8%
▪ Diabetes	17.2%
▪ Coronary Heart Disease	13.2%
▪ Congestive Heart Failure	13.2%
▪ Heart Attack	4.2%
▪ Other Heart Condition	14.4%
▪ Stroke	10.9%
▪ Cancer	10.7%



# Health Conditions

## 2010 National Survey of Residential Care Facilities Data National Center for Health Statistics

▪ Osteoporosis	20.4%
▪ Arthritis	25.1%
▪ Depression	27.4%
▪ Serious Mental Problems	7.6%
▪ Intellectual Disability	3.3%
▪ Asthma	4.2%
▪ Chronic Bronchitis	2.0%
▪ COPD	10.8%





# Health Conditions

## 2010 National Survey of Residential Care Facilities Data National Center for Health Statistics

▪ MS/Parkinson's	7.7%
▪ Anemia	9.6%
▪ Macular Degeneration	5.9%
▪ Glaucoma	6.3%
▪ Gastro Intestinal	7.5%
▪ Kidney Disease	5.7%
▪ Traumatic Brain Injury	1.5%
▪ Blind/both eyes	3.4%



# Assistive Devices

## 2010 National Survey of Residential Care Facilities Data National Center for Health Statistics

▪ Dentures	39.4%
▪ Glasses/Contacts	9.6%
▪ Hearing Aids	18.6%
▪ Cane	12.9%
▪ Walker	45.9%
▪ Wheel Chair	22.9%
▪ Scooter/Electric Wheel Chair	5.3%
▪ Oxygen	7.6%



# ADL Dependence

<u>ADL</u>	<u>ALF</u>	<u>NF</u>
• Bathing	72%	96%
• Dressing	52%	90%
• Toileting	35%	86%
• Transfer	13%	83%
• Eating	22%	54%

*(NCHS 2010 Res. Care Survey & 2011 CMS NF Data)*



# Other Health Related Characteristics

- **19.9 % bowel incontinent in last 7 days**
- **36.6% urinary incontinent in last 7 days**
- **77.1% need help with medications**
- **37% receive help with 3+ADLs**
- **24% admitted to a hospital in last 12 months**
- **35% treated in hospital ED in last 12 months**
- **14% fell in last 12 months resulting in injuries other than hip fractures**



# Residents' Cognitive Abilities

- **48.7% experience confusion**
- **46% experienced difficulty with short term memory in the last 7 days**
- **28% experienced difficulty with long term memory in the last 7 days**
- **18% could not find apartment**
- **21% could not recognize staff names & faces**
- **15% don't know they are in a facility**
- **22% don't know what season it is**

*Source: NSRC 2010 Survey*



# Outreach for the 2012 National Study of Long-term Care Providers

- **Communication started early**
- **Conference calls and meetings played an important role once again**
- **Fall outreach is set and everyone knows what is coming and is planning accordingly**
- **We're largely working with the same NCHS staff as we have in the past so there is buy-in**
- **NCHS has effectively explained why it is collecting data biennially**



# Major Changes in Federal LTC Data Collection

- **National Center for Health Statistics also reconfiguring how Feds will collect data on paid, regulated LTC providers:**
  - Nursing Homes
  - Home Health Care
  - Residential Care (including assisted living)
  - Adult Day Care
  - Hospice
- **Biennial collection of ALF data will include:**
  - Provider Services
  - Provider Staffing
  - Provider Practices (e.g., transitioning or PCC)
  - User Characteristics (e.g., % needing ADL assistance)

