PUBLIC REPORTING FOR RESIDENTIAL LONG-TERM SERVICES AND SUPPORTS

New recommendations have been issued by key stakeholders regarding the future of public reporting for assisted living and similar non-nursing home residential care.

The types of services, costs, and quality of care offered by assisted living residences vary widely, but little public information comparing residences is available for consumers. Public reporting is one option for providing consumers, their families, and others, with objective information to compare the 31,000 assisted living residences across the country. Currently, only a handful of states require providers to compile information about their services, and even then it is not usually readily available. "Older Americans and their families need consumer friendly information to determine which residential setting best meets their priorities and needs," said D.E.B. Potter, Project Officer of the U.S. Agency for Healthcare Research and Quality (AHRQ), which has promoted numerous efforts related to assisted living/residential care and public reporting.

Forty organizational leaders in long-term care convened in a day-long meeting funded by AHRQ and supported by LeadingAge. Representatives included those from the federal and state governments, investment and trade groups, policy makers, health care providers, consumer advocates, educators, and researchers. More than 80% of attendees believed that additional efforts should be directed toward obtaining, compiling, and disseminating information related to specific services and supports offered by residential care providers. Recommendations were proposed by a majority of participants in three areas:

1. Utility of publicly-available information

- a. Consumers want to be able to compare providers to guide their decision making. Therefore, relevant information about specific services and supports should be made available to consumers in advance of selecting a residence.
- b. Beyond consumer education, publicly-available information could inform providers of the services that others offer and potentially motivate them to change or improve their services. The information also could be useful to policymaker, regulators, researchers, and others.

2. Content of publicly-available information

- a. Consumers would benefit from information related to survey results, verified complaints, and outcomes such as satisfaction. They and others would benefit to some extent from "report cards" or similar rating scales.
- b. Medically-related outcome information would be challenging to provide in a balanced manner due to variability in the residents who live in these settings, such as how they vary in their medical and functional needs.
- c. Some of the information that is relevant to consumers is subjective; consumer-provided ratings may best provide this type of individualized information.

3. Roles and responsibilities related to obtaining and disseminating publicly-available information

- a. State mandates may be necessary in order to collect and report detailed information on all providers, because not all providers may want to share detailed information in advance of a consumer visiting their residence, or to provide information to a central reporting source.
- b. Independent, reputable, unbiased organizations should be responsible for disseminating public information, which may be state governments or others.

"This conference provided the 'next-steps' agenda to compile and provide publicly-available information related to assisted living and other residential care. The next step is to make relevant information available in an accessible and easy-to-use format, and to encourage consumers to share their assisted living experiences," said Dr. Sheryl Zimmerman, Professor and Co-Director of the Program on Aging, Cecil G. Sheps Center for Health Services Research, University of North Carolina at Chapel Hill, who convened the conference.

If you have questions or comments about this information, contact Lauren Cohen at <u>Lauren_Cohen@unc.edu</u> (919-843-8874).