



CAADS

California Association for Adult Day Services

A Study of Patient Discharge Outcomes Resulting from California's Elimination of Adult Day Health Care on December 1, 2011

by the California Association for Adult Day Services

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PURPOSE

The purpose of the study was to analyze, for the ADHC population attending 4 days per week and 5 days per week, the overall services needed and those services available upon discharge, as well as the prognosis for avoidance of higher levels of care after the ADHC benefit is eliminated. The 4 and 5 days per week ADHC patient group was studied as the ADHC population whom the Department of Health Care Services asserts is at greater risk of institutional placement,

METHODOLOGY

Using a team of internal experts, CAADS designed an Involuntary Discharge Form and provided training to all ADHC CAADS members, inviting them to participate in the study by completing discharge plans for a sample of 10% of their patients attending four or five days per week. The discharge plan form focused on identifying skilled service needs as documented in the current Individual Plan of Care for each patient, and assessing the availability of and ability to obtain, for each patient, timely alternative services, as described in the Department's ADHC transition plan. Individual patient plans were then submitted electronically to CAADS with no identifiable patient information.

DATA VALIDATION

Each record was thoroughly reviewed for completeness and accuracy. If any data field was left blank, the ADHC was contacted by a trained volunteer and asked to provide missing data. All discharge records used in the final tabulation for the study were complete and accurate based on the multi-disciplinary team assessment and information known at the time of preparing the involuntary discharge form. In order to minimize errors, tabulation and validation of data were conducted by two different persons.

DESCRIPTION OF DATA

198 Patient discharge plans were used in the analysis from 15 counties out of 28 in the state where centers exist

36 ADHCs submitted data for the study (12% of ADHC centers statewide)

Twenty-five percent (25%) of ADHC patients attend 4 days per week or 5 days per week (information from DHCS ADHC Stakeholders Meeting 05-13-2011 PowerPoint), which translates to roughly 8,750 patients. The number 8,750 was used as the multiplier to calculate total patients and total services needed.

Using CAADS discharge plans for 198 patients attending ADHC and extrapolating the calculated averages to all ADHC patients attending four days per week and five days per week, produced the findings described in this report. All study data was based on careful review of individual health records and analysis of service resources within a geographic service area.

RESULTS

Patient Days Per Week Attendance

Average attendance for the 198 patients in the study: 4.5 days/week

Days Per Week	# of Patients in Study
4	61
5	137

198

Patient Gender Was Comparable to DHCS Statewide Data

Gender CAADS Survey		Gender DHCS Statewide	
Male:	35.1%	Male:	37.86%
Female:	64.9%	Female:	62.14%
100.00%		100.00%	

Post-ADHC Discharge Prognosis

The overall prognosis is poor after involuntary discharge from ADHC:

20.83% Fair

79.17% Poor

Multi-Disciplinary Team (MDT) Recommendation for Discharge

Almost 70% of the patients in the sample will be discharged to skilled nursing and another 30% to residential care or to the community, which could include their current living situation.

MDT Recommendation for Involuntary Discharge	% of Patients	# of Patients
Community with supports	15%	1,310
RCFE	16%	1,353
Skilled Nursing	69%	6,087
	100%	8,750

Summary of Patient Needs

The average patient in the study currently has 5.3 ongoing skilled service needs per week. This translates to 46,375 total weekly services needed for this population.¹

The average number of ongoing but unmet service needs post-ADHC discharge is 4.37. This translates to 37,975 total services needed for this population

Service NEED Category	% of Patients with Each Service Need	# of Patients
Social Work Services	86.98%	7,610
Skilled Nursing	81.86%	7,163
Physical Therapy Skilled	41.40%	3,622
Occupational Therapy Skilled	34.88%	3,052
Personal Care	32.56%	2,849
Physical Therapy Maintenance	28.84%	2,523
Occupational Therapy Maintenance	24.19%	2,116
Dietary Services	23.26%	2,035
Recreation/Activities	18.60%	1,628
Other	17.21%	1,506
Psychiatric Services	9.77%	855
Transportation	4.65%	407
Speech Therapy	3.26%	285

¹ Calculated by multiplying the average needs of the patients (5.3) by the number of 4 and 5 days per week patients (8,750) as a percent of the total population (25%). [5.3 x 8,750 = 46,375]

Total Services Needed / Available

Total Services Needed Per Week: 46,375

Nearly 48% (22,213) of Total Services needed are **not available** in the community:

52.10% ARE available in the Community (24,162)
47.90% ARE NOT available in the Community (22,213)

Total Services Available: 24,162

More than two-thirds (16,609) of Total Services available are **not adequate** to meet the current total service level needed by the patient:

31.26% ARE adequate to meet current service need (7,553)
68.74% ARE NOT adequate to meet current service need (16,609)

Summary:

Only 16.3% (7,553) of the 46,375 Total Services needed are both available and adequate to meet current need.

Nursing Services Needed / Available

Nursing Services Needed Per Week: 11,579

Nearly 57% (6,581) of Nursing Services needed are **not available** in the community:

43.16% ARE available in the Community (4,998)
56.84% ARE NOT available in the Community (6,581)

Nursing Services Available: 4,998

Almost two-thirds (3,169) of Nursing Services available are **not adequate** to meet the current Nursing service level needed by the patient:

36.59% ARE adequate to meet current Nursing service need (1,829)
63.41% ARE NOT adequate to meet current Nursing service need (3,169)

Summary:

Only 15.8% (1,829) of the 11,579 Nursing Services needed are both available and adequate to meet current need.

Social Work Services Needed / Available

Social Work Services Needed Per Week: 11,385

Roughly 38% (4,350) of Social Work Services needed are **not available** in the community:

61.79% ARE available in the Community (7,035)

38.21% ARE NOT available in the Community (4,350)

Social Work Services Available: 7,035

Nearly 81% (5,693) of Social Work Services available are **not adequate** to meet the current Social Work service level needed by the patient:

19.08% ARE adequate to meet current Social Work service need (1,342)

80.92% ARE NOT adequate to meet current Social Work service need (5,693)

Summary:

Only 11.8% (1,342) of the 11,385 Social Work Services needed are both available and adequate to meet current need.

Dietary Services Needed / Available

Dietary Services Needed Per Week: 2,808

Roughly 10% (285) of Dietary Services Needed are **not available** in the community:

89.86% ARE available in the Community (2,523)

10.14% ARE NOT available in the Community (285)

Dietary Services Available: 2,523

More than three-fourths (1,953) of Dietary Services available are **not adequate** to meet the current Dietary service level needed by the patient:

22.58% ARE adequate to meet current Dietary service need (570)

77.42% ARE NOT adequate to meet current Dietary service need (1,953)

Summary:

Only 20.3% (570) of the 2,808 Dietary Services needed are both available and adequate to meet current need.

Personal Care Services Needed / Available

Personal Care Services Needed Per Week: 3,063

Roughly 43% (1,330) of Personal Care Services needed are **not available** in the community:

56.58% ARE available in the Community (1,733)
43.42% ARE NOT available in the Community (1,330)

Personal Care Services Available: 1,733

More than one-half (967) of Personal Care Services available are **not adequate** to meet the current Personal Care service level needed by the patient:

44.19% ARE adequate to meet current Personal Care service need (766)
55.81% ARE NOT adequate to meet current Personal Care service need (967)

Summary:

Only 25% (766) of the 3,063 Personal Care Services needed are both available and adequate to meet current need.

Physical Therapy (PT) Skilled Services Needed / Available

PT Skilled Services Needed Per Week: 3,734

Nearly 59% (2,192) of PT Skilled Services needed are **not available** in the community:

41.3% ARE available in the Community (1,542)
58.7% ARE NOT available in the Community (2,192)

PT Skilled Services Available: 1,542

About 84% (1,298) of PT Skilled Services available are **not adequate** to meet the current PT Skilled service level needed by the patient:

15.79% ARE adequate to meet current PT Skilled service need (244)
84.21% ARE NOT adequate to meet current PT Skilled service need (1,298)

Summary:

Only 6.5% (244) of the 3,734 PT Skilled Services needed are both available and adequate to meet current need.

Occupational Therapy (OT) Skilled Services Needed / Available

OT Skilled Services Needed Per Week: 3,083

More than one-half (1,663) of OT Skilled Services needed are **not available** in the community:

46.05% ARE available in the Community (1,420)

53.95% ARE NOT available in the Community (1,663)

OT Skilled Services Available: 1,424

Almost two-thirds (868) of OT Skilled Services available are **not adequate** to meet the current OT Skilled service level needed by the patient:

38.89% ARE adequate to meet current OT Skilled service need (552)

61.11% ARE NOT adequate to meet current OT Skilled service need (868)

Summary:

Only 17.9% (552) of the 3,083 OT Skilled Services needed are both available and adequate to meet current need.

Significant Risk Factors

The average patient has 6.8 “evidence-based” risk factors out of 11 with a median of 6.

Risk Factor	% of Patients with Risk Factor	# of Patients
Fall Risk	94.88%	8,302
Isolation	82.79%	7,244
Two or More Chronic Conditions	77.67%	6,797
Poor Judgment	75.81%	6,634
Medication Mismanagement	69.77%	6,105
Frailty	67.44%	5,901
Self Neglect	57.67%	5,047
Inappropriate Affect, Appearance or Behavior	46.51%	4,070
Dementia Related Behavior Problems	42.33%	3,703
Other	23.72%	2,076

Diagnosis and Skilled Services Needed

The average patient has 5.5 chronic diagnoses that require ongoing skilled services. Of the 28 diagnoses listed, 22 or 79% have a greater than 50% likelihood of resulting in ER visits, hospitalization or nursing facility placement without ongoing skilled nursing and skilled therapy interventions.

Diagnosis	ICD9 Code/s	Patients by Diagnosis		Likely to Require ER, Hospitalization or NF without Ongoing Skilled Intervention to Address Diagnosis		
		% of Patients	# of Patients	% of Patients	# of Patients	% of Total Population
Alzheimer's disease	331	15.81%	1,384	15.81%	1,384	100.00%
Multiple Sclerosis / Plegia	340-344	8.37%	733	8.37%	733	100.00%
Blindness	360-369	6.51%	570	6.05%	529	92.86%
Seizures / Brain Disorder	345-349	11.63%	1,017	10.70%	936	92.00%
Parkinson's disease	332	5.12%	448	4.65%	407	90.91%
Dementia	290	32.09%	2,808	27.91%	2,442	86.96%
Mental Retardation	312-319	13.49%	1,180	11.16%	977	82.76%
Mental / Schizophrenia	294-295	20.93%	1,831	17.21%	1,506	82.22%
Brain injury	854	5.12%	448	4.19%	366	81.82%
Heart Issues	427	12.56%	1,099	9.77%	855	77.78%
Cerebrovascular Accident (stroke)	434-436	16.74%	1,465	13.02%	1,140	77.78%
Congestive Heart Failure	428	17.67%	1,547	11.63%	1,017	65.79%
Chronic obstructive pulmonary disease	496	10.70%	936	6.98%	610	65.22%
Depression	311	28.84%	2,523	18.60%	1,628	64.52%
Osteoporosis	733	15.35%	1,343	9.77%	855	63.64%
Diabetes	250	61.40%	5,372	38.60%	3,378	62.88%
Hypertension	401	72.56%	6,349	45.12%	3,948	62.18%
Osteoarthritis	714-716	41.40%	3,622	25.58%	2,238	61.80%
Cerebrovascular Accident (stroke)	437-439	22.33%	1,953	12.56%	1,099	56.25%
Obesity	278	5.12%	448	2.79%	244	54.55%
Anxiety	300	11.16%	977	6.05%	529	54.17%
Coronary Artery Disease	414	12.09%	1,058	6.05%	529	50.00%
Blood Issues	272	30.23%	2,645	13.49%	1,180	44.62%
Chronic Kidney Disease	585	8.37%	733	3.72%	326	44.44%
Hypothyroid	244.9	8.84%	773	3.26%	285	36.84%
Gait Abnormality	781	16.28%	1,424	4.65%	407	28.57%
Benign prostatic hyperplasia	600	6.05%	529	1.40%	122	23.08%
Anemia	285	8.37%	733	1.86%	163	22.22%

CONCLUSIONS

The average 4 and 5 days per week ADHC patient profile from this study reveals:

- 5.31 ongoing skilled service needs
- 4.37 unmet ongoing skilled services needs once ADHC is eliminated
- 6.8 average risk factors likely to result in ER, hospitalizations or NF placement,
- 5.5 average diagnoses needing skilled services
- 79% have greater than 50% likelihood for institutionalization (22 out of 28 chronic diagnoses that require ongoing skilled services) *[This closely mirrors the results of the MDT recommendation for involuntary discharge of 69% to NF placement.]*
- 39% have greater than 75% likelihood for institutionalization (11 out of 28 chronic diagnoses that require ongoing skilled services)

Overall the data show that with the elimination of ADHC, more than 80% (4.37/5.31) of the patients' needs will be unmet, resulting in high probability of emergency department visits, hospitalizations and nursing facility placements.

The study also showed that alternative community resources are either unavailable or inadequate to keep the majority of patients residing safely in the community.

ATTACHMENT

- CAADS Involuntary Discharge Form