

# Trends in Nursing Facility Characteristics

Prepared By

Research Department  
American Health Care Association

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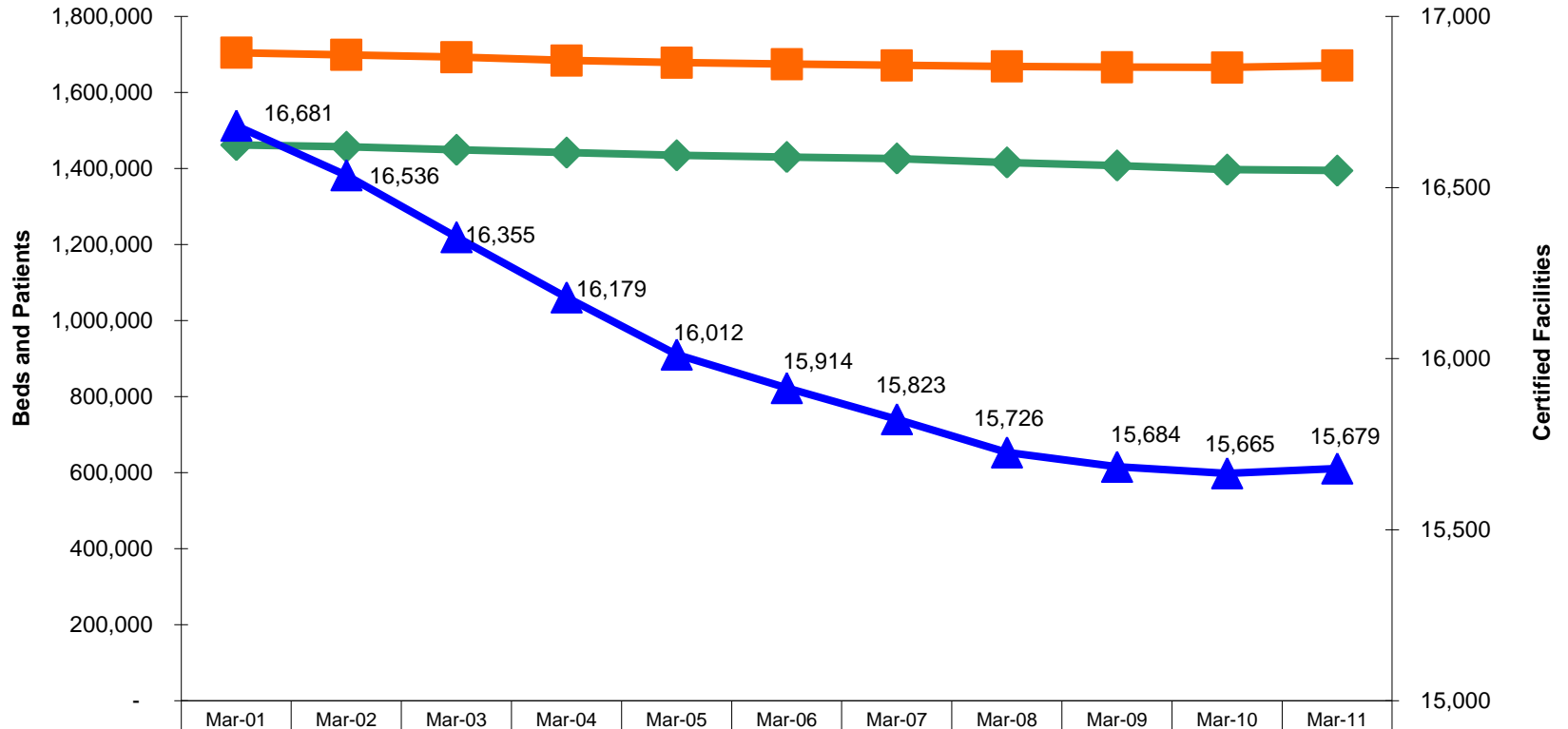
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Source: Center for Medicare & Medicaid Services Certification and Survey Provider Enhanced Reporting (CMS-CASPER) formerly known as OSCAR data.





## Trend in Certified Nursing Facilities, Beds and Residents

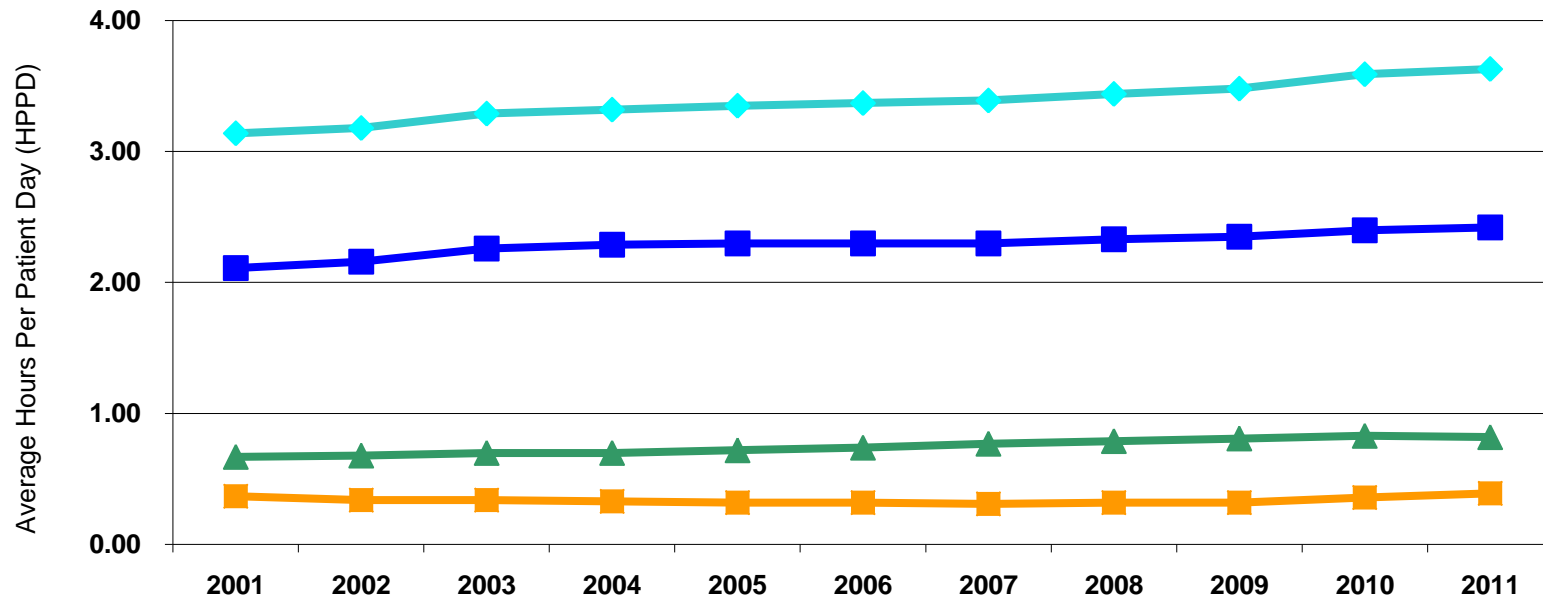


	Mar-01	Mar-02	Mar-03	Mar-04	Mar-05	Mar-06	Mar-07	Mar-08	Mar-09	Mar-10	Mar-11
— Certified Beds	1,704,884	1,699,118	1,693,299	1,684,482	1,678,634	1,674,807	1,671,645	1,668,815	1,666,800	1,665,845	1,671,226
— Patients in Certified Beds	1,461,937	1,457,205	1,449,260	1,441,930	1,434,812	1,430,367	1,426,460	1,415,951	1,407,975	1,397,149	1,394,537
— Certified Facilities	16,681	16,536	16,355	16,179	16,012	15,914	15,823	15,726	15,684	15,665	15,679

Source: Computed by AHCA Research staff using CMS Nursing Facility standard health survey data.  
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## Nursing Facility Average Direct Care Staff Hours Per Patient Day



	Mar-01	Mar-02	Mar-03	Mar-04	Mar-05	Mar-06	Mar-07	Mar-08	Mar-09	Mar-10	Mar-11
◆ DCS HPPD	3.14	3.18	3.29	3.32	3.35	3.37	3.39	3.44	3.48	3.59	3.63
■ Aide HPPD	2.11	2.16	2.26	2.29	2.30	2.30	2.30	2.33	2.35	2.40	2.42
▲ LPN HPPD	0.67	0.68	0.70	0.70	0.72	0.74	0.77	0.79	0.81	0.83	0.82
■ RN HPPD	0.37	0.34	0.34	0.33	0.32	0.32	0.31	0.32	0.32	0.36	0.39

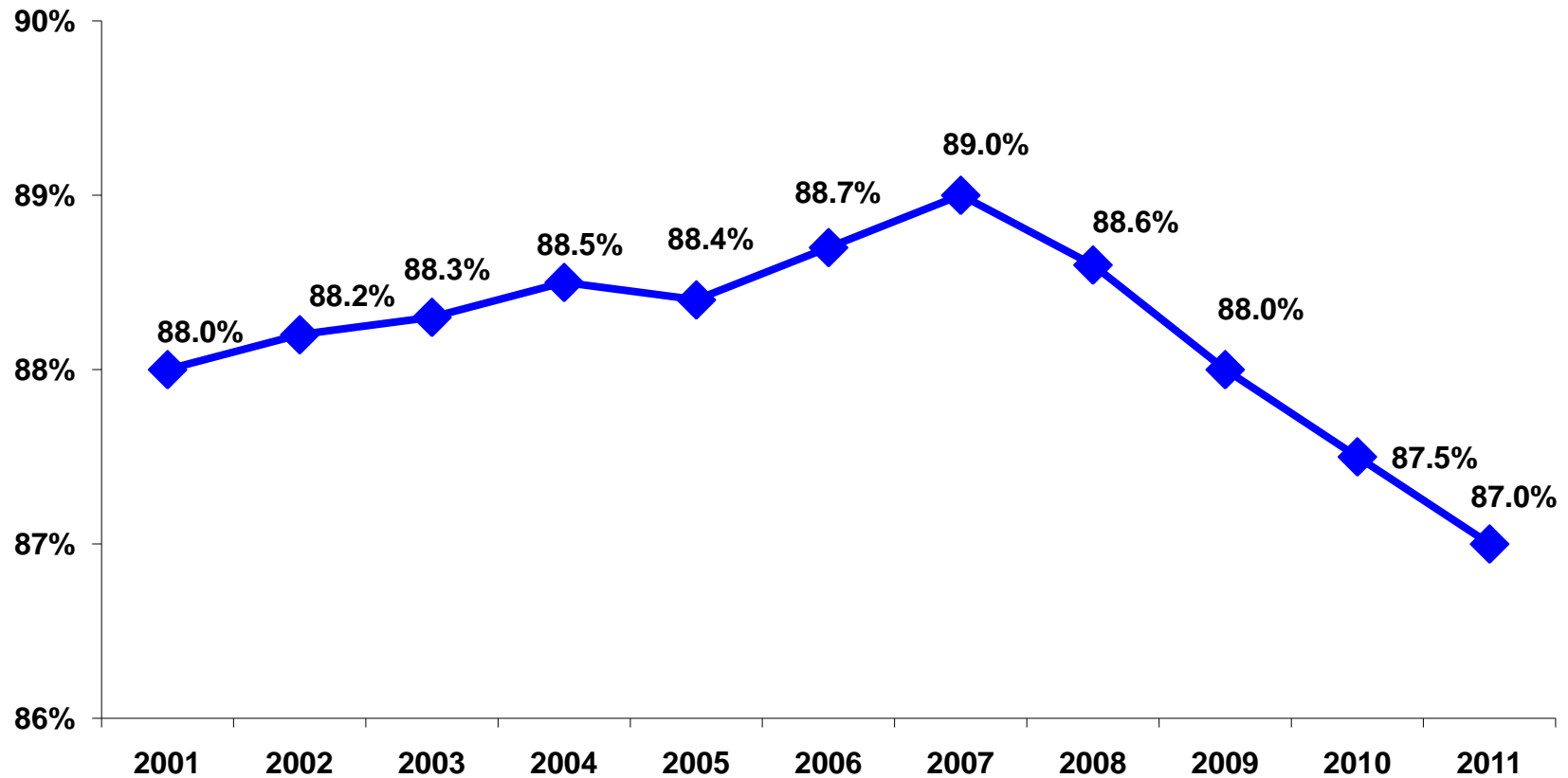
Note: Staff positions are measured in full-time equivalents, which is based on a 35-hour work week. Aide staff is equal to the sum of certified nurse aides+nurse aides in training+medication aides. Due to invalid or incomplete data, some facilities are eliminated from the staffing analysis.

Source: Computed by AHCA Research staff using CMS Nursing Facility standard health survey data (Form 671: F41 - F45).

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## Median Nursing Facility Occupancy Rate for Certified Beds

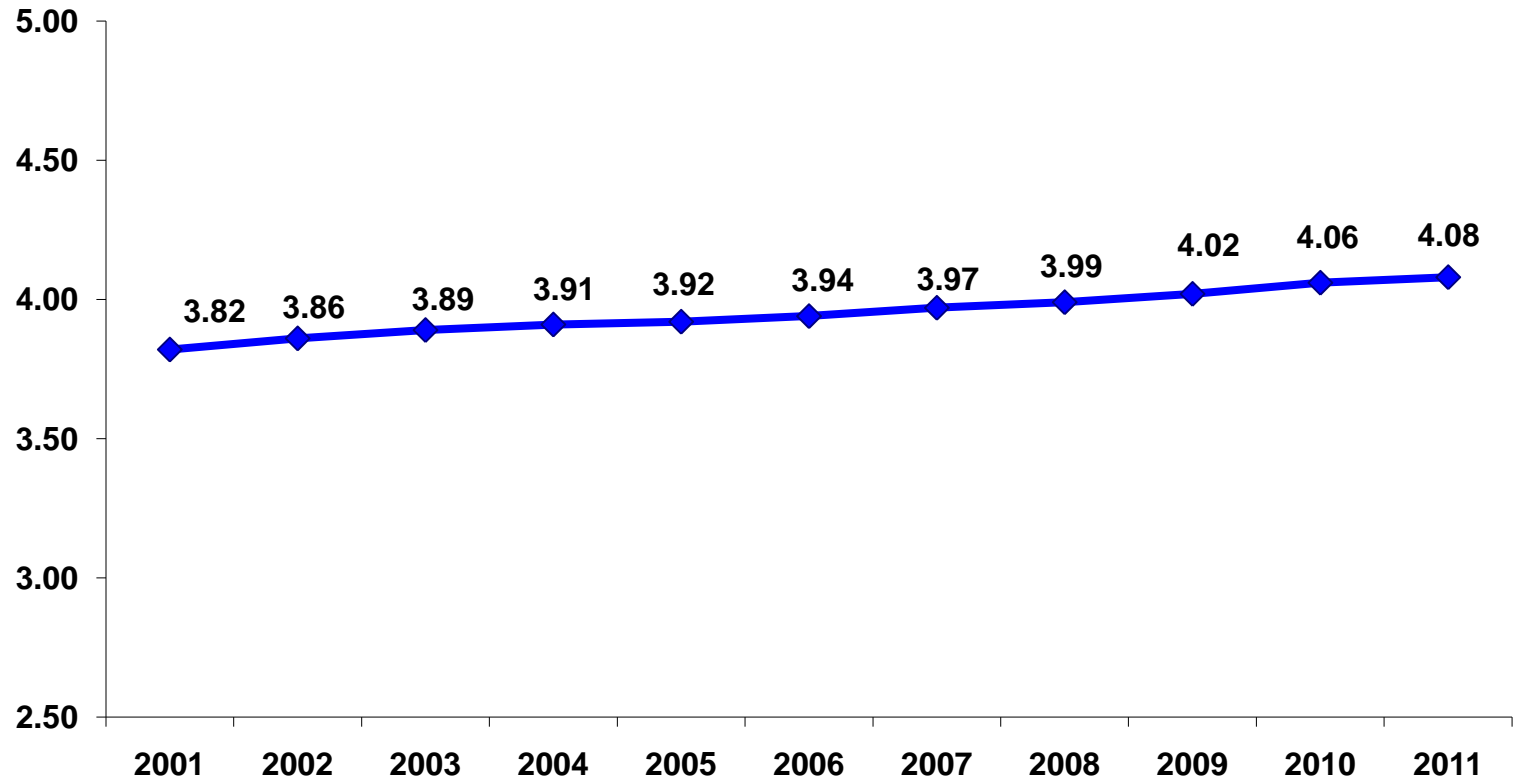


Note: Results reflect data for patients who occupy certified beds. Observations with occupancy less than 0% and greater than 100% were eliminated from this analysis.

Source: Computed by AHCA Research staff using CMS Nursing Facility standard health survey data (CMS Forms 671: L18, L37 -- L39 and 672:F78). Various years. March  
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## Trend in Resident ADL Dependence



Source: Computed by AHCA Research staff using CMS Nursing Facility OSCAR standard health survey data. Various years. March American Health Care Association - Research Department



## *Overview of Nursing Facility Characteristics Data*

**Certification and Survey Provider Enhanced Reporting (CASPER)** formerly known as Online Survey, Certification and Reporting (OSCAR) is a data network maintained by the Centers for Medicare and Medicaid Services (CMS) in cooperation with the state long-term care surveying agencies. CASPER is a compilation of all the data elements collected by surveyors during the inspection survey conducted at nursing facilities for the purpose of certification for participation the Medicare and Medicaid programs.

Onsite evaluations are conducted by state survey agencies. The findings of these surveys are entered into the CASPER database. The evaluations occur at least once during a 15-month period, or as a result of a complaint being investigated. The state survey agencies are responsible for entering survey information into the CASPER database and providing updates as needed. Every attempt is made by CMS to assure the accuracy and timeliness of the data.

Information on the nursing homes operational characteristics are reported on CMS Form 671 and patient characteristics are reported on CMS Form 672. CASPER captures facility level information on the operations, patient census and regulatory compliance of nursing facilities.

Information on the nursing homes standard health and life safety deficiencies are reported on CMS Form 2567 by the surveyor at the time of the inspection. Results from the standard health survey are evaluated to determine whether a nursing facility is providing care according to the requirements, which the federal government deems representative of quality care, and whether the care and services provided by the facility meet the assessed needs of each resident. Results from the standard life safety survey are evaluated to determine a facility's compliance with the Life Safety Code fire and building safety standards, which are developed, updated and published by the National Fire Protection Association and incorporated into the federal requirements.

**Certified Beds** This measure indicates the total number of certified beds in the nursing home. Some nursing homes can have a combination of Medicare, Medicaid, and/or private pay beds. Please check with the nursing home to find out what types of beds are available.

**Residents in Certified Beds** This measure indicates how many residents in certified beds were living in the nursing home at the time of the inspection.

**Occupancy Rate** This measure indicates the percentage of certified beds occupied by residents at the time of the inspection. It is obtained by taking the number of residents occupying certified beds at the time of the inspection divided by the total number of certified beds in the nursing home.

**Activities of Daily Living (ADL)** are activities done during a normal day such as getting in and out of bed, dressing, bathing, eating, and using the bathroom. Residents are considered to be independent if they can execute an activity of daily living independent of direct care staff or with only "set up" assistance. Residents needing assistance can partially execute the activity of daily living but must have considerable assistance from direct care staff to successfully complete the activity. Residents who are dependent for an activity of daily living are not capable of executing the activity of daily living and are dependent on staff to perform the activity. This measure for ADLs is obtained by taking the sum of residents that are somewhat (assisted and dependent combined) or fully dependent on staff for the five ADLs (dressing, bathing, transferring, toileting and eating) divided by the total number of residents.

**Hours Per Patient Day (HPPD)** is computed as the sum of the total number of hours worked by direct care staff in each category divided by a 35-work week and by the number of residents.



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