

Adult Day Services Outcomes and Data Collection – The Path Forward

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Background

- Lack of policy regulation has led to variability in services and dearth of regulatory data
- Our goal is for payers and the public to recognize the value of ADS
- To do so quantitatively, we need data!
- 2020: Adult Day Services is a system of professionally delivered, integrated, home and community-based, therapeutic, social and health-related services provided to individuals to sustain living within the community.
- 2023: Demonstrate value by documenting services, interventions and outcomes using standard measures

Services, Interventions, Outcomes

- Identify services that lead to positive impacts on
 - Participant (Health Outcomes)
 - Caregiver (Burden Reduction)
 - Community and Payor (Cost Avoidance/Savings)

- But how and what?
 - Detailed Participant Demographics
 - Health Outcomes (Standard Tools)
 - Health Occurrences

Process: Overview



Participant Data - Demographics

The image shows a laptop screen displaying a web application interface for participant data. The browser's address bar shows 'Finder' and the URL 'RTZ systems'. The page title is 'Charles Bing' and the breadcrumb is 'Home / Client Info / Charles Bing'. There are three tabs: 'Basic Information' (active), 'Occurrences', and 'Assessments'. An 'Edit' button is visible in the top right corner of the data section.

Name: Charles Young Bing **Age:** 52 **DOB:** 02/14/1970

System ID : 25 **Participant Site ID :** EL0002025 (optional) **Site:** Centennial Adultcare Center - Mt. Juliet **Enrollment Date :** 04/01/2022

Caregiver: We Care A Lot Facility Representative

Diagnoses : Ocular hypertension, left eye-H40.052
Essential (primary) hypertension-I10

Gender: Male **Race:** Latino/Latina **Ethnicity:** Assiniboine
Primary Language: Other **Living Situation:** Alone **Veterans Status:** Unknown
Other Language: **Transportation Status:**

Mobility Status: Wheelchair

Allergies : Substance: Dust(Environmental), Severity: Mild, Status: Active, Date: 01-01-2022
Substance: Beef(Food), Severity: Mild, Status: Active, Date: 05-01-2022

Emergency Contacts: Bing, Apple
Bing, Banana

Food Restriction: Do not eat dairy foods and plant foods.

Attendance Days: TuWTh

Virtual Attendance Days: MF

Participant Data - High-Cost Health Care Utilization

Outcome	Tool/Scale	Frequency
ER Visit	Numeric with Date	Occurrence Based
Hospital Admission	Yes/No - With Admitting Diagnosis	Occurrence Based
Length of Hospital Stay	Numeric with Admission Date	Occurrence Based
Hospital Readmission	Yes/No - With Admitting Diagnosis and original admission date	Occurrence Based
Injury Inducing Fall	Date and resulting ER or Hosp. Admission	Occurrence Based
Medication	Numeric - number of prescribed medication	At enrollment and annually thereafter
Hospice/Palliative care use	Yes/No - With Admitting Date	Occurrence Based
ALF/SNF Placement	Yes/No - With Admitting Date	Occurrence Based
Date of Death	Date	Occurrence Based

Participant Data - Outcomes

Outcome	Tool/Scale	Frequency
Functional Health - ADL	Katz Index	At Enrollment and at least annually thereafter
Functional Health - iADL	Lawton Scale	At Enrollment and at least annually thereafter
Fall Risk	Hendrich II	At Enrollment and at least annually thereafter
Depression	GDS-15	At Enrollment and at least annually thereafter
Loneliness	UCLA-8	At Enrollment and at least annually thereafter
Nutrition Assessment	DETERMINE	At Enrollment and at least annually thereafter
Cognitive Function	SLUMS	At Enrollment and at least annually thereafter
Pain Assessment - Optional	One-Time NRS Pain Scale	At Enrollment and at least annually thereafter
Physical Health – Optional	One-time Self-perceived Physical Health Scale	At Enrollment and at least annually thereafter

Caregiver Outcomes (Phase 2)

Outcome	Tool/Scale	Frequency
Physical Health	One-time Self-perceived Physical Health Scale	At enrollment and annually thereafter
Emotional Health	Modified Caregiver Strain Index	At enrollment and annually thereafter

Participant Data - SDOH (Phase 2)

Outcome	Tool/Scale	Frequency
Housing Security	Modified AHC-HRSN	At enrollment and annually thereafter
Nutrition - Meal/Food Access at home	Modified AHC-HRSN	At enrollment and annually thereafter
Transportation Access	Modified AHC-HRSN	At enrollment and annually thereafter
Medication Access	Modified AHC-HRSN	At enrollment and annually thereafter
Personal Care Access @ home	Modified AHC-HRSN	At enrollment and annually thereafter
Healthcare Power of Attorney	Modified AHC-HRSN	At enrollment and annually thereafter
Healthcare appointments where possible	Numeric, based on PCP, Specialty, Dentist, etc.	Occurrence based

Participant Data - Person Centered Outcomes (Phase 3)

Measuring What Matters: Incorporating Person-Centered Outcomes in Adult Day Services to Identify Mechanisms Supporting Quality of Life in Diverse Persons with Dementia - Sadarangani, T, and Anderson, K. ARCOM Grant, 2024

- Dementia Care Practice Recommendations prioritize strength-based assessments that reflect values of people with dementia
- Valid and reliable person-centered outcome measures that reflect PLWD's values, preferences, and strengths will enrich understanding of ADS's impact on quality of life

The long-term goal of our research is to integrate person-centered outcome measures across Adult Day Services to ensure that programs nationwide are delivering equitable standards of person-centered Alzheimer's Disease and Related Dementia (ADRD) care that enhance quality of life for persons living with dementia (PLWD).

The overall objective of this study is to develop and pilot test a core set of person-centered quality of life measures for use in Adult Day Services that capture the values and preferences of PLWD in these settings.

Focus Groups completed Sep. 2024

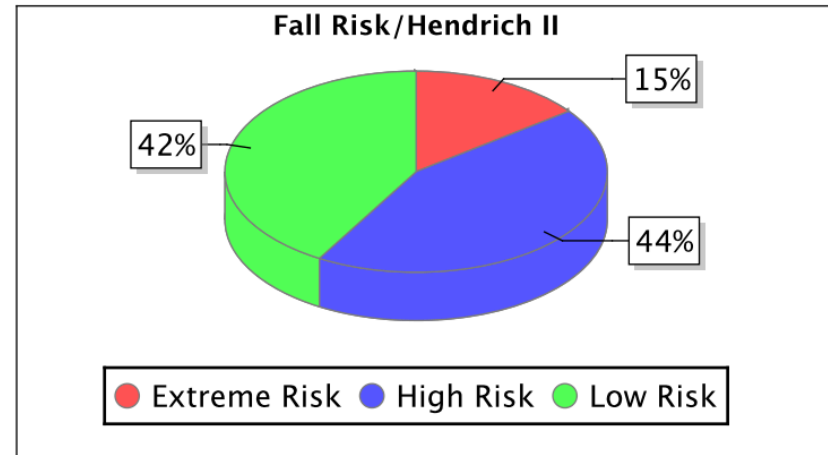
- Despite racial and geographic differences among our study populations, there are universal experiences particularly when it comes to bonding, social connectedness, and friendships.
- Participants expressed that they did not view their staff as employees but as a second family. Rather than a clinician-patient dynamic found in clinical settings, they experience what feels like an extended kinship network. These centers provide dementia patients a sense of partnership, rather than a feeling of dependence.
- Caregivers also express that they trust these centers and that they provide them with significant relief knowing that their loved one is in good care as well as taking a load off their shoulders.



Preliminary Data 2024

As of August 31, 2024. All data are preliminary. Statistical significance will increase as sample size grows. Based on 995 total participants across 9 states and 27 active sites. (additional 28 sites and 12 states enrolled but not reporting)

Top Diagnoses	
Essential (primary) hypertension I10	169
Unsp dementia, unsp severity, without beh/psych/mood/anx F03.90	167
Alzheimer's disease, unspecified G30.9	107
Hyperlipidemia, unspecified E78.5	56
Vascular dementia, unsp severity, without beh/psych/mood/anx F01.50	47



Assessment Score Average	
DETERMINE Nutrition Assessment	3.84
Fall Risk/Hendrich II	5.23
Geriatric Depression Scale	2.70
Katz Index	3.96
Lawton Scale	1.62
Loneliness (UCLA Short Form)	14.05

Preliminary Data 2024

As of August 31, 2024. All data are preliminary. Statistical significance will increase as sample size grows. Based on **995 total participants across 9 states and 27 active sites.** (additional 28 sites and 12 states enrolled but not reporting)

92%

Live with someone else

24%

Show signs of geriatric depression (GDS-15)

77%

Determined to have high nutritional risk (DETERMINE)

96%

Are Dependent for iADLs (Lawton)

36%

Require ambulatory assistive device

42%

Determined to have a high fall risk (Hendrich II)

78%

Diagnosed with some form of dementia (SLUMS)

65%

Are dependent for ADLs (Katz)

Preliminary data demonstrate the high acuity and need of individuals served in ADS across the US. Additional data will highlight the longitudinal benefits to participants, caregivers, and community as well as the cost savings to all pay sources.

Next Steps

- ❑ Full release and promotion –ongoing (with addition of Phase 2 in early 25, and phase 3 in late 25/early 26)
- ❑ Educational webinars on the basics of data collection
- ❑ Education on access to and use of tools –
 - ❑ [Adult-Day-Services-Introductory-Assessment](#)
 - ❑ [Modified-AHC-HSRN](#)
 - ❑ [Modified Caregiver Strain Index](#)
 - ❑ [SLUMS](#)
- ❑ Partnerships and proposals for data aggregation and analysis
- ❑ Operations manual and training videos
- ❑ Questions answered: Who uses, how does it help (person, caregiver, payor and community), how long does it help, and:
- ❑ Eventuality: Minimum effective ‘dose’...