



Nursing Home Quality of Life: Measurement, Disparities, and Directions for the Future

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Outline

- 1: Measurement of quality of life (QOL) in nursing homes and the role of person-centered measures
- 2: Are there disparities in QOL by race/ethnicity? If so, what factors play a role?
- 3: What are the implications for policy and future work?

Background

- Nursing home quality of life (QOL) is a persistent concern for consumers and policy makers.
- Yet, most studies have measured quality of care (QOC), not QOL.
 - QOC refers to the delivery of proper services
 - QOL captures dimensions of the resident experience such as activity, social engagement, food enjoyment, and other aspects of well-being. (Shippee et al. 2013)
- QOC is often measured by asking facility staff about quality.
- QOL can be measured by directly asking residents and family members.

QOL Matters for Quality

THE NATIONAL IMPERATIVE TO IMPROVE

NURSING HOME QUALITY

Honoring Our Commitment to Residents, Families, and
Staff

Committee on the Quality of Care in Nursing Homes

Board on Health Care Services

Health and Medicine Division

A Consensus Study Report of

The National Academies of
SCIENCES • ENGINEERING • MEDICINE

- Centers for Medicare and Medicaid, Institute of Medicine have called for improvements in person-centered measures
- NASEM calls for person-centered care that ensures residents' health, safety and **quality of life**
- Co-leading Committee 1 for Moving Forward: National Nursing Home Quality Coalition
 - Person-centeredness, culture-change and quality of life
 - <https://movingforwardcoalition.org/committees/>

Minnesota QOL Survey

- Validated tool, used since 2005
 - Annual survey
 - Based on in-person interviews, collected by Vital Research
 - Includes respondents with mild to moderate cognitive impairment
 - Average of 13,000 interviews completed
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- The results are aggregated into a risk-adjusted total score for each facility and one- to five-star ratings are posted on the Minnesota Nursing Home Report Card website.

 - The goal is to look for strategies for improving quality in nursing facilities.

MN Nursing Home Report Card

- <http://nhreportcard.dhs.mn.gov/>



Resident Quality Of Life - Details

Domains	Facility	State	Facility rank (#1 is best)
Overall Percent Positive	82.4%	82.7%	215 of 374
Comfort	80.0%	81.6%	266 of 374
Environment	83.8%	89.6%	343 of 374
Privacy	88.7%	89.4%	210 of 374
Dignity	96.7%	96.2%	138 of 374
Activity	72.5%	73.6%	206 of 374
Food	77.9%	85.5%	333 of 374
Autonomy	87.9%	86.9%	119 of 374
Individuality	80.0%	83.2%	278 of 374
Security	91.1%	88.2%	57 of 374
Relationships	84.6%	82.4%	76 of 374
Satisfaction	89.8%	83.4%	6 of 374
Mood	73.5%	71.1%	97 of 374

What are key predictors of QOL?

- What are resident and facility factors associated with lower QOL scores?
- What is the relationship between facility characteristics and change in QOL scores over time?

Question 1: Key Findings

- Resident characteristics influence QOL
 - Limitations in ADLs
 - Alzheimer's disease, low cognitive scores
 - Anxiety/mood disorders
 - Diagnoses of mental illness
- Facility characteristics, too
 - Medicaid payment source
 - Staff hours per resident day (especially RN & activity staff)
 - Quality of care score
 - Administrative turnover
 - Non-profit status

Disparities in QOL

- Racial/Ethnic Differences in QOL

Key Findings

- 1. Black and Indigenous residents experience lower QOL than white residents.*
- 2. NHs with lower proportions of racial/ethnic minority residents have better aggregate QOL scores than NHs with higher proportions of racial/ethnic minority residents.*

Implications

- Measures need to evolve to stay relevant for the changing nature of LTC
- Short-stay resident QOL; family member satisfaction
- Understanding the experience of minority residents
- Importance of reliable, valid data
- Partnership with community organizations and facilities to improve QOL for vulnerable and complex residents, especially in facilities with low capacity to do so

Thank you and Questions?

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