Issue Brief: Adult Day Health Services and Hospital Admissions in RI

Introduction
Adult day health centers are critical providers of long term care in Rhode Island. Their role is expected to grow as Rhode Island continues to rebalance its long term care system, promote home and community-based services, and better coordinate care for older and chronically ill individuals. In fact, adult day centers in Rhode Island have the capacity and ability to care for some of our state’s most frail and acute individuals, especially those with dementia. There are 24 adult day centers throughout the state, as well as the PACE program which operates an adult day center.

In Rhode Island, adult day health programs are considered medical models. This means that each adult day health participant has an individual plan of care and that each organization has sufficient clinical staff to help support the specialized nursing, personal care, therapeutic, nutritional and social needs of program participants. It has long been evident anecdotally that adult day health services are a cost-effective model of care to help individuals remain in the community, but the data to quantify their impact is very limited. In response, two members of LeadingAge RI (the Adult Day Center of Westerly and the To Life Adult Day Center) participated in the New Roots Learning Collaborative, a local initiative to help organizations develop an evaluation and performance management program. A key component of their project involved tracking how effective adult day centers may be in reducing hospitalizations.

Study Description and Outcomes
LeadingAge RI, on behalf of the two adult day centers, engaged Healthcentric Advisors to develop a plan to measure hospital admission rates of adult day participants, create a tracking tool, and analyze the data. LeadingAge RI then collected data on adult day participants in two phases. Phase 1 involved collecting baseline data on participants that began services between January 1 and June 30 2013 from the UCAT client assessment form that is used by the adult day industry. A wide range of data was collected, including demographics, other services used, and hospitalizations within the last
six months. Phase 2 involved follow-up data collection on these same individuals during the period of July to December 2013 to track any changes since they began receiving adult day health services, including hospitalizations.

Overall, 101 patients within the adult day population were reviewed for this LeadingAge RI project. Over 40% were aged 85 and older. Many participants suffered from chronic disease(s). More than 50% of the participants suffer from cardiovascular disorders and over 75% had been diagnosed with Alzheimer’s or other dementia. Over 65% took a minimum of 6 prescription drugs daily, mostly with the assistance of a caregiver.

The most notable finding involved those who were already receiving home-based services such as home health care. About 40% of the individuals were receiving these services when they began adult day health services (a rate which remained unchanged in Phase 2). When these individuals were reassessed six months after they began services, the data showed that hospitalization rates declined by 48 percent, from 27.5% to 14.3%. This indicates that adult day services, in partnership with other home and community-based services, may be associated with decreased hospitalizations. While more research is necessary to determine whether the services directly reduce risk of hospitalizations or if other factors contribute, this nevertheless is a positive finding from this analysis.
This association of adult day services and decreased hospitalizations is timely given the increased focus in Rhode Island and across the nation on reducing hospitalization rates and improving the quality and cost-effectiveness of care. Hospitals are now penalized by CMS if their readmission rates exceed a certain level for patients with different diagnoses. In addition, CMS will begin tracking readmission rates for nursing homes in 2016, and thereafter will similarly begin penalizing nursing homes whose rates are too high. Lastly, and most importantly, there is a body of research showing the negative effects that hospitalizations can cause in the elderly. For the frail elderly, the risks of hospitalization can include falls, delirium, infections, pressure ulcers, and adverse drug reactions. These events have a negative impact on the health and well-being of these individuals and also can result in unnecessary costs to our health care system. But based on this analysis, it appears that the use of adult day services, in coordination with home and community-based services such as home health care, can play a key role in addressing these issues, which should be of interest to consumers, caregivers, policymakers, payers, and other stakeholders.

**Other Benefits of Adult Day Health Centers**

Adult day health services can be an affordable alternative to higher-cost care settings such as nursing homes, for which most participants qualify. Early nursing intervention may prevent or reduce the severity of more serious health, behavioral, and safety issues, and may reduce the need for emergency room or hospital inpatient care. Moreover, participants receive the numerous health and social services, care coordination, social and cognitive stimulation, peer support, activities, meals, and numerous other services that promote their health and well-being. Individual dignity and public and private resources are preserved, allowing many persons to remain in their homes until the very end of their lives. These are win-win outcomes for the individuals and families involved as well as for their communities.

While the benefits of adult day health services are evident in the quality of care that participants receive, there is also a growing body of research documenting the benefits of adult day health services. A 2010 study by the Institute on Aging and published in The Gerontologist found that individuals who attend adult day centers reported fewer problems with daily activities as a result of their physical or emotional health than individuals who did not attend a day center\(^1\). This helps demonstrate how adult day health centers provide an environment that can meet the physical and emotional needs of elders.

Adult day centers also benefit caregivers by providing respite from caregiver responsibilities, providing information and referral services, in addition to stabilizing the status of the adult day

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participant. In fact, a study published in the Journals of Gerontology Series B: Psychological and Social Sciences in August 2011 found that adult day services significantly reduce the stress levels of family caregivers of older adults with dementia. The research also found that dementia patients who attend adult day centers had fewer behavioral problems and sleep better at night. Another study in The Gerontologist similarly found that caregivers whose loved ones attended adult day had improved stress levels as indicated by the stress hormone cortisol.

Conclusion

Rhode Island is at the forefront of national efforts to promote care for individuals in the right setting at the right time. Adult day health services provide a broad range of health services at a reasonable public and private cost, and are a critical component of any community-based service model. They are particularly experienced in caring for individuals with Alzheimer’s and related dementias. Adult day is uniquely positioned to play an increasingly prominent role as Rhode Island continues its efforts to rebalance our system, better support people in the community and their caregivers, transition people out of nursing homes, reduce hospitalizations, and improve the overall quality and cost-effectiveness of care. A broad-based commitment to increase adult day use and promote the growth of the industry will benefit older Rhode Islanders, their caregivers, and our society.

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