



The State of Resident Engagement in 2019

The defining feature of a successful senior living or long-term care community should be that it provides all residents, no matter their abilities or preferences, abundant opportunities to live with purpose - the true realization of person centered experiences. Facing staffing shortages, residents living with higher acuity levels and ever tightening budgets, it isn't difficult to understand why the senior care market may struggle to optimize engagement. This white paper will help the market understand the current state of resident engagement and identify opportunities for improvement when it comes to meaningfully engaging older adults.

CURRENT STATE OF RESIDENT ENGAGEMENT

The [GAO reported](#)¹ in September 2018 that about 15,600 nursing homes provide care to about 1.4 million residents nationwide. According to the [National Center for Assisted Living](#), there are 28,900 assisted living communities nationwide with approximately 1 million licensed beds.

A [CDC report from 2016](#)² suggests that there is plenty of room for improvement when it comes to optimizing engagement in senior living. According to the report, residents are typically receiving just 11 minutes of engagement each day outside of assistance with activities of daily living. Beyond just the quantity of time spent engaging residents, there is a larger question of whether providers are focusing first on older adults who are most in need of therapeutic engagement. Many times, engagement options provided in senior care consist of no more than the 3Bs: Bingo, Bible and Birthdays. Unfortunately, residents who are most in need of person-centered engagement can often feel neglected, bored and lonely which can lead to the overuse of antipsychotic drugs or other types of potentially harmful medication. A [Human Rights Watch report](#)³, released in February 2018, found that approximately 179,000 people living in U.S. nursing facilities are being given antipsychotic medications even though they don't have approved psychiatric diagnoses.

1 United States Government Accountability Office. *Nursing Home Quality. Continued Improvements Needed in CMS's Data and Oversight.* September 2018.
2 CDC. *Long-Term Care Providers and Services Users in the United States. Data from the National Study of Long-Term Care Providers, 2013-2014.* February 2016.
3 Human Rights Watch. *They Want Docile. How Nursing Homes in the United States Overmedicate People with Dementia.* February 5, 2018.



“Resident engagement is today’s most untapped opportunity for enhancement of person-centered care, high quality of life for residents and improved business indicators. I believe it has tremendous potential for us, our residents and their families.”

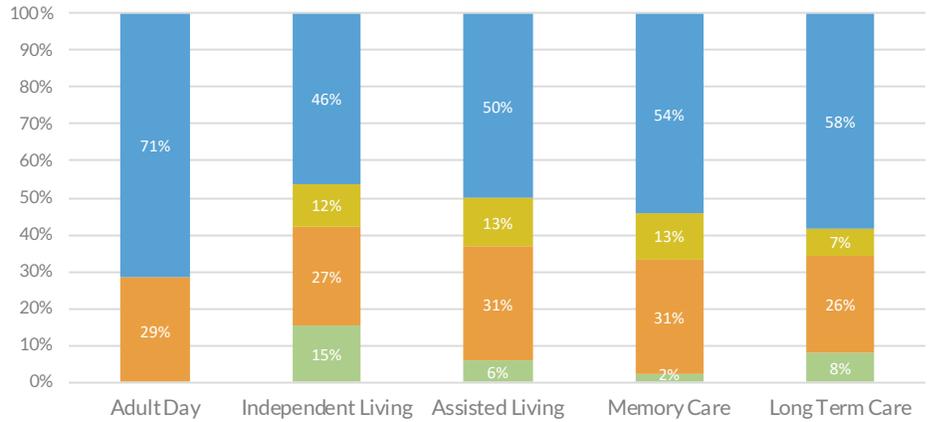
- Lynne Katzmann, Ph.D., Founder and President of Juniper Communities

BARRIERS TO OPTIMIZING ENGAGEMENT

A 2018 national Linked Senior survey of more than 300 Activity Directors uncovered that more than half of survey participants across all care setting types indicated that documentation is the most challenging part of their work and frequently prevents them from spending time getting to know residents and engaging them in a meaningful way.

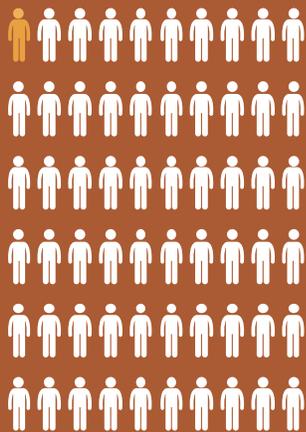
WHAT DO YOU FIND MOST CHALLENGING?

- Documentation (care plans, notes, monitoring, participation)
- Leading programs (guiding and participating with residents in engagement programs)
- Planning Programs (themed programs, parties, events, 1:1)
- Getting to know the resident



Providing meaningful engagement can be challenging because of the diversity of the residents' needs, interests and their physical or cognitive abilities. To make things more complicated, the Activities department is often understaffed and turnover can be high. Without an adequate staff to resident ratio, quality of life can suffer. Unfortunately, even in our increasingly technology driven world, much of the important assessment, planning, implementation and evaluation that an Activity Director does is still paper-based.

Prioritizing engagement in a community means providing those whose job it is to lead those efforts with the time, tools, and budget they need to succeed. This represents a unique opportunity for senior care communities to improve across the board. Quality engagement is correlated with better quality of life for all residents, longer lengths of stay, a lower cost of providing care, higher satisfaction for all stakeholders and better referrals!



1 Engagement Staff Person for every 60 residents

Today's senior care residents are **highly dependent**.⁴



Suffer cognitive impairment or dementia



Struggle with depression



Receive unnecessary antipsychotic drugs

4 National Partnership to Improve Dementia Care in Nursing Homes: Antipsychotic Medication Use Data Report (October 2018). Staff Ratio data is per Dawn Worsley, President, NCCAP. Sept 12, 2017, Argentum. *Senior Living Innovation Series*. February 2017

BEST PRACTICES

Linked Senior has analyzed hundreds of conversations with professionals working in the resident engagement field, including all levels of care and in environments ranging from buildings, to regions and corporate offices. From those conversations we have identified three resident engagement questions that providers need to ask themselves when it comes to serving their residents in a truly person-centered and therapeutic way:

- 1** Are we engaging everyone?
- 2** Are we engaging based on needs and preferences?
- 3** Are we thinking about wellbeing and outcomes?

To address these questions, it is important for providers to empower staff members with the right tools so they are focused on meaningfully engaging residents, not just on research and preparation of engagement programming. Instead, their focus should be on assessing the needs of the resident, planning engagement based on those needs, implementing the plan with the help of technology in real-time and then evaluating their success based on the changing needs and preferences of the resident. Using program tracking on our platform we can identify how much time is dedicated to one-on-one interaction compared to group engagement which changes based on the care setting.



“Wellness is...a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.”

– The World Health Organization

RESIDENT ENGAGEMENT DATA

Linked Senior analyzed engagement data from its client base to understand how some of the best providers engage their residents and how it can be optimized.

The data has been aggregated thanks to Linked Senior's proprietary attendance tracking product. It includes data from the Linked Senior program and from non-Linked Senior programs. This data covers the assisted living, memory care and SNF settings and was collected in Q4 2018.

AVERAGE NUMBER OF ENGAGEMENT MINUTES A RESIDENT GETS PER DAY

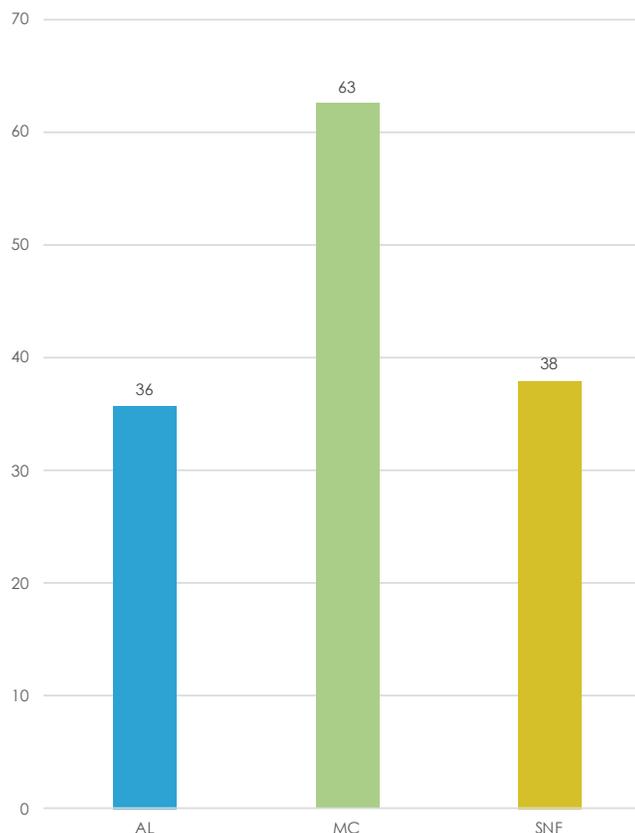
● Assisted living ● Memory Care ● Nursing Home

Assisted living: **36 Minutes**

Memory care: **63 Minutes**

Nursing home: **38 Minutes**

A Linked Senior client provides on **average 42 minutes** of engagement per day per resident.



TYPES OF PROGRAMS

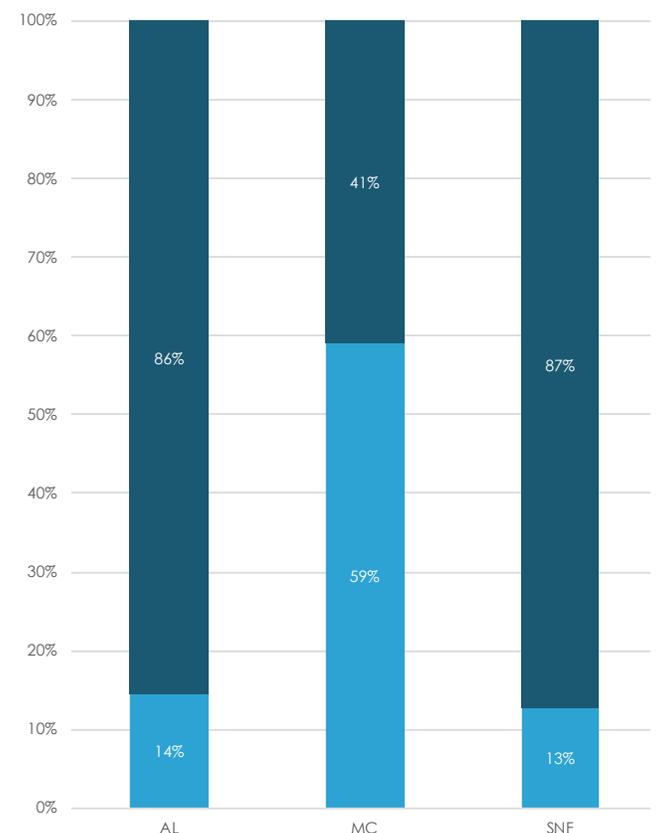
● 1:1 ● Group Programs

Assisted living: **14% / 86%**

Memory care: **59% / 41%**

Nursing home: **13% / 87%**

A Linked Senior client provides on average **27% 1 on 1s, 73% group programs**



TYPES OF PROGRAMS PER RESIDENT

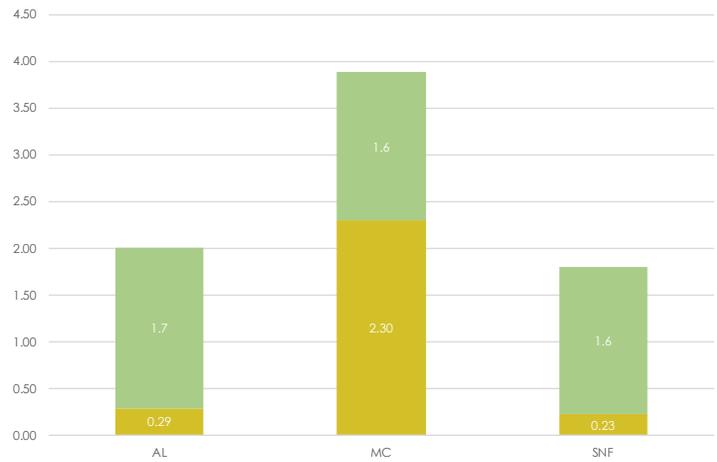
● 1:1 ● Group Programs

Assisted living: 0.291 / 1.7

Memory care: 2.31 / 1.6

Nursing home: 0.23 / 1.6

A Linked Senior client provides on average 27% 1 on 1s, 73% group programs



RESIDENT RESPONSE TO PROGRAMS

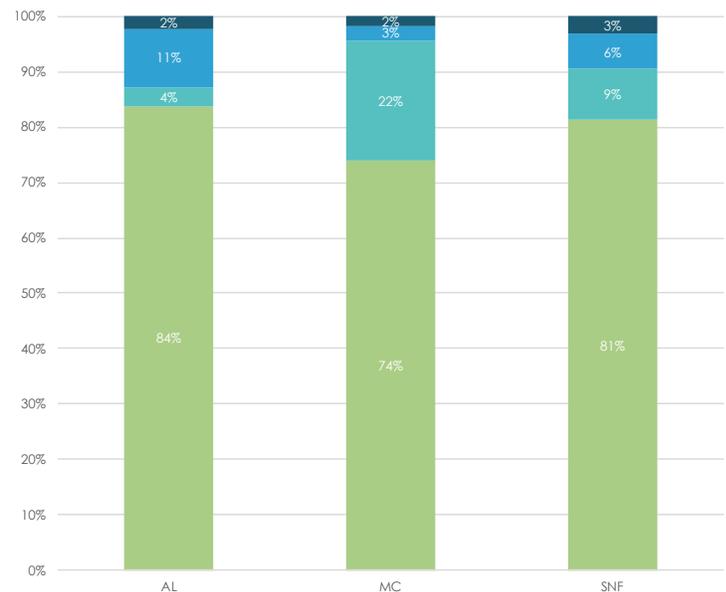
● Active ● Passive ● Refused ● Sleeping

Assisted living: 84% / 4% / 11% / 2%

Memory care: 74% / 22% / 3% / 2%

Nursing home: 81% / 9% / 6% / 3%

A Linked Senior client gets on average a resident response type of: 81% are active, 9% passive, 7% refuse, 2% sleep



RESEARCH FINDINGS

The number of programs increases with acuity (between Assisted Living and Memory Care) but is limited in SNF because of staffing.

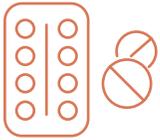
Staff is challenged in engaging everyone in Memory Care (lack of program quality) in SNF (lack of program quality and staff).

There is a need for more 1 on 1 in Assisted Living and SNF and that cognitive impairment and staffing limit the offering across level of care.

The higher the acuity, the lower the response to programs. It seems that the challenge is in building programs for cognitive impaired residents in Memory Care and building programs for cognitive impaired residents and staffing in SNF.

REVIEW OF EVIDENCE ON BENEFITS OF ENGAGEMENT

Since September 2017, Linked Senior has been working with Responsive Health Management in Toronto on a research study using a quasi-experimental repeated-measures design at three RHM long-term care and memory care communities. This research was funded by the Baycrest-led **Centre for Aging + Brain Health Innovation** (CABHI), in partnership with RHM and Western Oregon University. RHM residents participating in this study were grouped either in a high-engagement or a low-engagement category. When comparing the two groups, being in the high-engagement group was associated with:



↓ **20%**

decrease in antipsychotic medication use



↓ **18%**

decrease in aggressive behaviors



↑ **20%**

increase in social engagement



↑ **3%**

increase in cognitive functioning

In other words, being highly engaged in recreational activity is associated with increased cognitive functioning and social engagement, as well as decreased aggression and antipsychotic medication use. The data is based on a total sample size of n = 185 residents (Low Engagement n= 75, High Engagement n = 110).



CENTRE FOR AGING
+ BRAIN HEALTH
INNOVATION
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ADDITIONAL RESEARCH STUDIES ON THE BENEFITS OF ENGAGEMENT:

"Relationship Between Restraint Use, Engagement in Social Activity, and Decline in Cognitive Status among Residents Newly Admitted to Long-Term Care Facilities." *Geriatrics Gerontology*, 2017, 17:246-255.

"Antipsychotic Use in Nursing Home Residents Admitted with Hip Fracture." *Journal of American Geriatrics Society*, 2013, Vol. 61, No.1, 101-106.

"Individual Music Therapy for Agitation in Dementia: An Exploratory Randomized Controlled Trial." *Aging & Mental Health*, 2013, Vol. 17, No.6, 667-678.

For more visit: <https://www.linkedsenior.com/the-science/>



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