



The Commonwealth Fund Long-Term Care Opinion Leader Survey: Top-Level Findings

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Background

- Although long-term care (LTC) delivery and financing may appear to be at a crisis point, it will be a quarter of a century before the leading edge of the “baby boomers” reach 85 years of age, the height of LTC use.
- However, the scope of the coming need and lack of preparedness means that we cannot afford to wait to begin the serious work ahead.
- Policy proposals are typically generated, debated, redrafted, and accepted for consideration in communities of specialists.
- To help move the LTC reform debate forward, we conducted the first national survey of individuals specializing in LTC in the United States.

Objective

- To assess the views of LTC opinion leaders regarding the current state of LTC in the U.S. and potential areas and strategies for reform.

Design

- Survey construction was informed, in part, by our own expertise, literature reviews, in-depth interviews, secondary analyses, expert advisory panel feedback, and cognitive interviews.
- The final instrument included questions about provider quality, challenges, policy and reform. Respondents were also asked to provide basic demographic and other background information.
- The survey was distributed via Web-based format to 2,577 eligible individuals during September 2007 through March 2008.

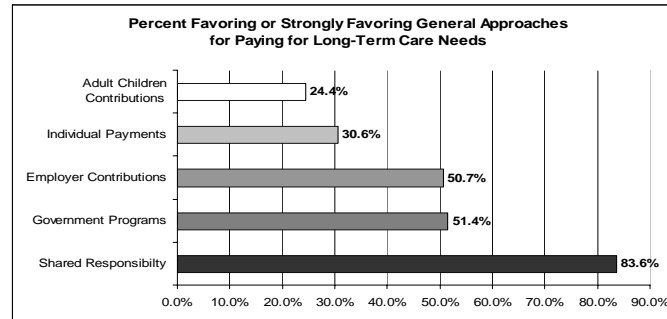
Population

- There were 1,147 respondents completing the entire survey for an overall response rate of 44.5%.
- Respondents included consumer advocates (10.6%), providers (25.9%), public officials (31.8%), policy experts (24.3%), and others (7.3%).
- Most worked in LTC for >15 years (59.3%); had family/friends served by the LTC system (88.6%); were female (60.6%), non-Hispanic, Whites (92.6%), and 45-64 years of age (64.4%); Masters- or doctoral-level educated (81.0%); had annual household incomes >\$100,000 (78.8%); and self-identified as Democrats (54.2%) or independents (25.1%).

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Findings

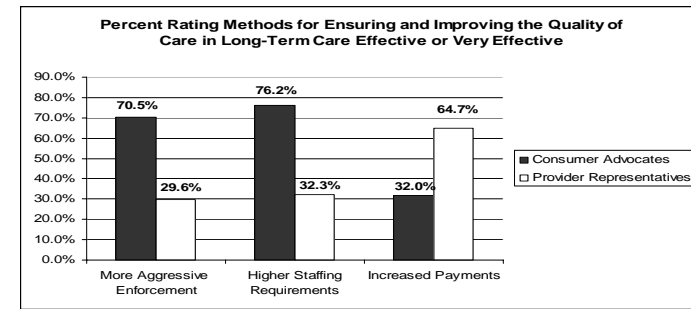
- Most (85.0%) ranked workforce among the top three challenges facing LTC, followed by financing (66.0%) and achieving quality (60.0%).
- Considerably more (53.0%) ranked the average nursing home as fair or poor than any other provider type, especially hospices (6.0%).



Most believed that LTC financing should be a shared responsibility; few felt that individuals or families should pay most (or even share) in the cost; half thought that employers should contribute.

- Adopting incentives to promote savings and adding a LTC benefit to Medicare financed by a premium (both ~80.0%) were favored over more particularistic options for paying for LTC costs such as buying into Medicaid, LTC insurance, or reverse mortgages, particularly by policy experts and consumer advocates.
- Few (<25.0%) had faith in using consumer report cards and other publicly available information to help people make informed choices; most preferred care coordination (74.1%) and counseling (67.0%).
- Most (~67.0%) believed care coordination/counseling, respite, and adult day care more effective than paying family members (53.0%) for supporting informal caregivers, though consumer advocates favored the latter as well.
- While nearly all (84.0%) felt that LTC should be rebalanced toward home- and community-based services, virtually no one (just 21.0%) wanted to do so by limiting the supply of nursing homes beds.
- Most (61.0%) favored the expansion of consumer-directed programs such as “Cash & Counseling,” though providers (at 48.0%) less so than other groups.
- The majority (66.0%) were familiar with “culture change” BUT most think that less than 10.0% of nursing homes have adopted it; barriers are generally thought to be associated with cost, leadership resistance, and regulation.

- Most (>85.0%) viewed improved work environments and increased compensation as the keys to recruiting/retaining paraprofessional staff.
- Most felt that the federal government performs poorly in regulating nursing homes; however, in most areas, the government’s performance vis-à-vis home health agencies was ranked even lower.
- Most (67.7%) thought the regulation of assisted living should be more stringent; many believed this best done using the nursing home model of mandated resident assessments (44.0%) and comprehensive surveys and inspections (38.0%).



Consumer advocates were much more likely to favor more aggressive regulatory enforcement and higher staffing requirements as methods for improving quality; provider representatives much more likely to favor increased payment rates.

- Most (>60.0%) viewed HIT as a promising way to improve the quality of clinical assessment data, access patient hospital information, establish electronic health records, and electronically monitor patients.

Implications

- Advocates for LTC reform must be able to communicate the importance of the issue to policymakers and the general public.
- This survey gives voice to those who know LTC very well; an important first step toward developing an effective communication strategy.
- By identifying potential areas of agreement and disagreement, this survey also provides a better sense of which policy changes might garner more support from experts representing diverse interests.
- This knowledge should be especially useful in identifying common ground among groups with seemingly disparate points-of-view, thereby promoting action where it might otherwise have remained politically intransigent.