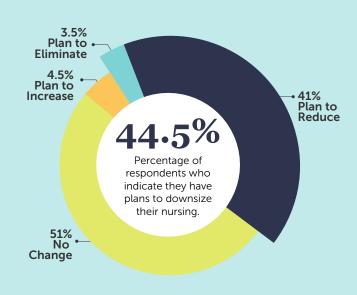


Nursing in Life Plan Communities (LPC)

What plans are in place for nursing beds on your campus?

As expected, most providers believe nursing is very important to their campus. Conversely, a significant percentage are reducing or have plans to reduce — the size of their nursing footprint. This possibly highlights operational challenges associated with nursing, and — as our survey of other trends highlights — the desire to support aging in place.



Having a skilled nursing unit/facility in an LPC campus will be important in the future.



Note: Data on graphs may not total 100% due to rounding of numbers

Observations:

Payment reform appears to be a big concern for providers. About a third of respondents indicated they did not believe their communities were appropriately equipped to handle some of the business models that may be required by those with significant census derived from government-paid sources.

What is the future of nursing within life plan communities over the next decade?

- Minimizing but not eliminating the use of nursing.
- Enhancing the full continuum of care and sizing nursing for independent living internal use.
- Adapting and enhancing the nursing that is provided.

CLA recommended action steps:

- Consider resizing physical spaces and enhancing services (specialty focus, home care, etc.).
- Look into continued efforts to create private, residential nursing focused on internal population.
- Evaluate reliance on government payers and find a financial pathway to achieve economic stability with smaller-sized nursing staff (if appropriate in individual markets).
- Analyze market dynamics in your direct market to understand role of nursing in the broader community outside the LPC.
- Assess internal need for nursing and patterns of use and care.
- Evaluate economic impact of changes to nursing if appropriate.
- Consider independent living growth or home and community services to help offset reductions in nursing and associated loss of margin (if that is the case).

Believe we will need less beds and more highly specialized care.

The lines will be blurred. Services provided will keep people in their homes longer. We will continue to see a decline in skilled services needed.

Participant comments