

Changes to Select Residential Care Community Questions

2014 Change	2012 Questionnaire Number and Wording
DROP	RCC Q10. Is this residential care community owned by any other type of organization?
DROP	RCC Q10a. For each item (a-f) below, please indicate whether or not this type of organization owns this center. Mark Yes or No in each row a. Hospital b. Nursing home or skilled nursing facility c. Home health agency d. Hospice agency e. Adult day services center f. Other
DROP	RCC Q16. A continuing care retirement community is a community that offers multiple levels of care such as independent living, residential care and skilled nursing care, and provides residents the opportunity to remain in the same community as their needs change. Is this residential care community part of a continuing care retirement community?
DROP	RCC Q18a. Does this residential care community have specially trained staff for residents with dementia or Alzheimer's disease?
DROP	RCC Q18d_a. Does this dementia or Alzheimer's special care unit have...higher staff-to-resident ratios compared to other units?
DROP	RCC Q18d_b. Does this dementia or Alzheimer's special care unit have...specially trained staff for residents with dementia or Alzheimer's disease?
DROP	RCC Q19_d. . Any case management services--generally a process of assessment, planning and facilitation of options and services for an individual
DROP	RCC Q23. On a regular basis, does this residential care community create daily schedules based on each resident's life history, abilities, and interests?
DROP	RCC Q24a. On a regular basis, does this residential care community seek input from residents and their families into what personal care services are received by the resident?
DROP	RCC Q24b. On a regular basis, does this residential care community seek input from residents and their families into how the resident's room is decorated?
DROP-FTEs. (2014 RCC Q17)	RCC Q26 For each item (a-d) below, please indicate the number of staff that currently work at this residential care community full-time and part-time. Please report either the number of full-time and part-time staff OR the number of full-time equivalent (FTE) staff, not not both, for the residential care community employee category and the contract staff category.
DROP	RCC Q25. On a regular basis, does this residential care community give residents choices for each of the following? a. Meals b. Meal types/menus
DROP	RCC Q33. Before or upon admission, does this residential care community use a standardized tool to conduct a formal assessment of its residents to identify anyone with a cognitive impairment?
DROP	RCC Q33a. Based on this assessment, about how many of the residents currently living in this residential care community have been identified as having a cognitive impairment?
DROP	RCC Q35. Of the residents currently living at this residential care community, about how many use a manual, electric, or motorized wheelchair or scooter?

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DROP	RCC Q36a. Of the residents who were discharged from an overnight hospital stay in the last 90 days, about how many of those residents were re-admitted to the hospital for an over night stay within 30 days of their hospital discharge?
DROP	RCC Q38. In the last 12 months, about how many residents moved into this residential care community? Count all residents who moved in--including respite care residents, residents who later died, and residents who are no longer enrolled--regardless of the reason.
DROP	RCC Q39. In the last 12 months, about how many residents living in this residential care community died? Include respite care residents.
DROP	RCC Q40. In the last 12 months, about how many residents, including respite care residents, permanently moved out of this residential care community? Exclude deaths.
DROP	RCC Q40a. Where did each of these residents go immediately after they moved out? Enter "0" for any categories with no residents. a. Another assisted living or similar residential care community (e.g., adult care or personal care residence) b. Hospital c. Nursing home d. Private residence (house of apartment) e. Some other place
DROP	RCC Q42 For each item (a-s) below, please indicate in Column 1 whether or not this residential care community collects or tracks this information about residents. If this community does collect or track the information, please indicate in Column 2 whether or not this community has the computerized capability to collect or track it.
REVISE--response categories. (RCC Q15)	RCC Q19 Services offered 1=Not provided 2=Provided only by community employees 3=Provided only by others through arrangement 4=Provided by both community employees and others through arrangement
REVISE- response categories to distinguish between community screening and use of outside screening (RCC Q12)	RCC Q21. As a part of the admission process, does this community screen residents for depression with a standardized tool such as the Geriatric Depression Scale, Beck Depression Inventory, or the Center for Epidemiological Studies-Depression (CES-D) scale? Yes, No
ADD-response categories cardiovascular disease and diabetes (RCC Q21)	RCC Q32. Of the residents living in this residential care community, about how many have been diagnosed with each of the following conditions? a. Alzheimer's disease or other dementias b. Developmental disability, such as mental retardation, autism, or Down's syndrome? c. Severe mental illness, such as schizophrenia and psychosis d. Depression
ADD response category hospital. (2014 RCC Q29)	RCC Q43. Does this residential care community's computerized system support electronic health information exchange with each of the following providers? a. Physician b. Pharmacy

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ADD question on full-time and part-time hours. (2014 RCC Q16a,b)	NA
ADD question on falls (2014 RCC Q25)	NA