

Predictors of Emergency Commitment for Nursing Home Residents: The Role of Resident and Facility Characteristics

BACKGROUND

Over the past two decades, increased attention has been directed at mental health services provided to nursing home (NH) residents. The federal Omnibus Budget Reconciliation Act (1987), also known as the Nursing Home Reform Act, targeted the potential problem of transinstitutionalization (transfer of persons with serious mental illness [SMI] from state hospitals into NHs). This legislation focused on residents who either do not require nursing home level of care or whose needs cannot be met in this environment. To date, the implementation of OBRA has been exceedingly slow, and there is anecdotal evidence of persons with mental illness receiving inadequate quality of care and being inappropriately placed in NHs

The overall prevalence of mental disorders for NH residents is estimated at 65%. Almost half of NH residents are diagnosed with dementia, 40% suffer from depression, and between 3% and 20% suffer from anxiety. The ability of nursing homes (NHs) to manage mental health needs of their residents is crucial to providing high-quality care. An important element of this is preventing exacerbations of psychiatric conditions that trigger discharge from the nursing home due to an emergency commitment (EC) for an involuntary psychiatric examination. The objective of this study was to examine the relationship between resident and facility characteristics and the risk of EC for involuntary psychiatric examination among Medicaid-enrolled nursing home (NH) residents in Florida.

STUDY METHOD

This retrospective cohort study employed 2.5 years (December 31, 2002, through June 30, 2005) of Medicaid enrollment and fee-for-service, pharmacy, and involuntary commitment data to examine resident characteristics. NH characteristics were obtained from the Online Survey Certification and Reporting (OSCAR)

database. The last available OSCAR survey prior to the beginning of the study period was used. These data provided information on facility structure (e.g., size, staffing ratio), organization (e.g. chain membership, for-versus not-for-profit status), citations for deficiencies in quality of care, and other characteristics. The study included data from 584 of the 704 Medicaid-Certified nursing homes in the state of Florida. Participants included 32,604 Medicaid eligible nursing home residents.

Individual and Facility Characteristics in Relation to Risk of EC

Characteristic	OR	95% CI	p-value
Individual-level Predictors			
Age, ref. = under 65 years	0.41	0.31-0.55	<.001
Sex, ref. = male	0.39	0.30-0.51	<.001
White, ref. = non-White	1.11	0.85-1.45	.435
Dementia, ref. = no	1.92	1.49-2.47	<.001
Major psychotic disorder, ref. = no	11.43	8.62-15.16	<.001
Bipolar disorder, ref. = no	10.56	5.76-19.33	<.001
Affective disorder, ref. = no	3.29	2.23-4.85	<.001
Alcohol use disorder, ref. = no	1.31	0.79-2.18	.296
Drug use disorder, ref. = no	2.36	1.22-4.56	.011
Charlson index score, ref. = 0	1.04	0.78-1.37	.805

FINDINGS

Emergency commitment of nursing home residents is not an uncommon experience. Younger age, male gender, having dementia, having a serious mental illness, and residing in a for-profit facility were all independently associated with greater risk of EC. Being 65 years of age and older lowered the risk of EC by 59%, whereas having dementia about doubled the risk. While most residents were prescribed psychotropic medication, less than half received non-pharmacological behavioral health outpatient services before or after their involuntary psychiatric examination.

POLICY IMPLICATIONS

The findings indicate that EC of nursing home residents is not an uncommon experience. Research is needed to better understand the complex relationships between facility and resident characteristics and risk of EC among nursing home residents and to determine if the patterns of EC found in this study can be observed in other states and over a longer timeframe. Results underscore a need for an examination of the preparedness of NHs to meet the psychiatric emergency service needs of residents and for increased education and communication on risk factors and consequences of EC among nursing home residents.

Findings also suggest a need to review state Medicaid and federal Medicare policies with regards to reimbursement for acute, maintenance, and preventive behavioral health care in nursing home settings. In theory, strategies for addressing the psychiatric emergency service needs of nursing home residents, such as improving access to and quality of psychiatric care within the nursing home, should work to reduce the need for EC.

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Facility Characteristics by EC Status

	Any emergency commitment								
	Total	Yes		No		# of ECs			
	N=584	N = 187	N = 397						
Characteristic	N	N	% ^a	N	% ^a	p	Mean	SD	p
Ownership Type									
For-Profit	452	151	33.4	301	66.6		1.8	1.3	
Not for profit	132	36	27.3	96	72.7	.184	1.7	1.5	.650
Multi Facility Ownership									
Member of a Chain	373	117	31.4	256	68.6		1.7	1.3	
Not Member of a Chain	211	70	33.2	141	66.8	.653	2.0	1.4	.252
Size									
Below 120 Beds	180	41	22.8	139	77.2		1.8	1.4	
120 Beds and Above	404	146	36.1	258	63.9	.001	1.8	1.3	.966
Medicaid characteristics									
Average private pay, %	23	20	-	25	-		-	-	
Medicaid Beds above Median	290	125	42.5	169	57.5	<.001	1.9	1.4	.118
Medicare Beds above Median	298	70	24.5	216	75.5	<.001	1.5	0.0	.010
Quality characteristics									
Total citations, above median	277	100	32.6	207	67.4	.763	1.8	1.3	.850
Had a QoL Citation	317	108	34.1	209	65.9	.248	1.8	1.4	.981
Had a QoC citation	391	128	32.7	263	67.3	.598	1.9	1.5	.024
Had citation for abuse/neglect	101	33	32.7	68	67.3	.877	1.8	1.2	.878
Nurse staffing ratio above median	292	7	60.4	179	45.1	.006	1.9	1.3	.689
Occupancy Characteristics									
Average yearly occupancy, %	87	87	-	87	-		-	-	
Below 95%	410	126	30.7	284	69.3	.306	1.8	1.3	.028
Ratio of persons with SMI over facility bed size									
Low (Below 33%)	194	35	18.0	159	82.0		1.5	0.7	
Medium (34% to 67%)	194	62	32.0	132	68.0		1.5	1.2	
High (Above 67%)	196	90	45.9	106	54.1	<.001	2.1	1.5	.005