

Physical and Occupational Therapy Availability in Florida's Assisted Living Communities

BACKGROUND

Occupational and physical therapy are essential services that aid in the functional independence of older adults.¹ Occupational therapy works to maintain or recover an individual's ability to carry out everyday activities,² such as bathing, eating, and other activities of daily living (ADLs) and cooking, managing medication, and other instrumental activities of daily living (IADLs). Similarly, physical therapy uses exercises (e.g. range of motion) to maintain fitness, encourage muscle development, and help prevent falls.³ There are over 3,000 assisted living communities (ALCs) throughout the state of Florida; however, it is unclear as to how many provide occupational and physical therapy and how the availability of these services varies by ALC characteristics, such as license type, profit type (i.e. for-profit or non-profit), and bed count. Therefore, the purpose of this brief is to determine the availability of occupational and physical therapy in Florida's ALCs and how availability varies by ALC characteristics.

STUDY METHOD

Data on the services offered, license types, profit type, and size of Florida's ALCs were retrieved from the Agency for Health Care Administration (AHCA).^{*} ALCs may hold four different license types including a standard license, an extended congregate care (ECC) license, a limited mental health (LMH) license, and a limited nursing services (LNS) license.⁴ Please refer to June et al. (2020) for further description of these licenses.⁵

Profit type was classified as either for-profit or non-profit. Facilities were further dichotomized by the number of beds they had, where ALCs with 15 or fewer beds were classified as small and ALCs with more than 15 beds were classified as large. A cut off of 15 was used as ALCs with more than 15 residents require a higher resident to staff ratio than ALCs with less than 15 residents.⁵

FINDINGS

Out of the 3,090 ALCs in Florida, only 850 (27.5%) of these communities provided occupational therapy and 876 (28.3%) offered physical therapy. In terms of license type, 476 (27%) of ALCs operating under a standard license offered occupational therapy while 505 (29%) of standard licensed ALCs offer physical therapy. One-hundred and fifteen (46%) of ALCs holding an ECC license offered occupational therapy while 111 (44%) offered physical therapy. Of communities with an LNS license, 166 (35%) offered occupational therapy while 162 (34%) offered physical therapy. Only 130 (18%) of ALCs holding an LMH license offered physical therapy or occupational therapy. Regarding profit type, 79 (40%) of non-profit ALCs offered occupational therapy and 80 (41%) offered physical therapy, while 771 (27%) of for-profit ALCs offered occupational therapy and 796 (28%) offered physical therapy. In terms of size, 432 (37%) of large ALCs offered occupational therapy and 439 (38%) offered physical therapy, compared to 418 (22%) of small ALCs that offered occupational therapy and 437 (23%) offered physical therapy.

*Data was collected on February 6, 2020

POLICY IMPLICATIONS

Our examination of the availability of occupational and physical therapy services in Florida ALCs found that less than 30% of assisted livings offered either of these services. These findings suggest that, overall, residents living in Florida's ALCs are significantly underserved regarding services considered to be critical to successful aging. Prior research has found these therapies improve and maintain mobility, balance, and overall independence. Importantly, of the ALCs with specialty licenses to serve more impaired residents, less than half offered occupational or physical therapy. Non-profit ALCs were more likely to offer these therapies than for-profit ALCs. Additionally, larger ALCs were more likely than smaller ALCs to offer them. Older adults living in for-profit or smaller ALCs may be at a significant disadvantage compared to those living in non-profit or large ALCs. Policymakers should examine the differences between ALCs that do or do not offer these services, in particular the differences regarding size, given research that smaller ALCs are more likely to be home to more impaired residents with greater therapeutic needs.⁶ Policymakers should use this knowledge to increase the availability of these services to Florida's ALC residents.

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