

Assisted Living Occupancy Levels Fall Just 1 Percent

The average occupancy rate in assisted living fell more than 1 percent, to 83.5 percent, during the first quarter of 2003, according to key financial indicators released in July by the National Investment Center for the Seniors Housing and Care Industries (NIC). The average occupancy rate reported by NIC for the fourth quarter of 2002 was 85 percent.

NIC analysts consider the drop in occupancy could be due to seasonal factors, noting that this is the fourth year a drop has been recorded from fourth to first quarters. National circumstances, such as the poor economy and the war with Iraq, could also have delayed decisions to move into assisted living, NIC said.

The financial and performance indicators are reported quarterly to NIC by the lenders, owners, operators, and appraisal professionals in the seniors living profession. Anthony Mullen, executive-in-residence for the Johns Hopkins/NIC Seniors Housing and Care Program, noted that permanent debt performance for assisted living was going well. "Assisted living with less than 1 percent delinquency is actually exceptional," says Mullen.

ASCP Compiles Educational Resource For Assisted Living

The American Society of Consultant Pharmacists (ASCP) has issued a compilation of reports related to medication management practices in assisted living residences in hopes of offering providers one source of guidance on the issue.

"The goal is to provide comprehensive guidance to providers and state regulators in medication management," says Thomas Clark, ASCP's director of professional affairs.

All facility staff should understand that medication is a double-edged sword, Clark says. It can help residents

with chronic conditions to maintain their independence, but medications also produce side effects that staff should be aware of.

"Too often, when older adults demonstrate new problems, it is attributed to age," says Clark. "But it could be attributable to medication issues."

Clark says symptoms such as incontinence, delirium, and falls could be

caused or exacerbated by medication issues. He suggests that pharmacists could explore the role of medication in these common geriatric conditions. ASCP also calls for each facility to review its medication management policies and procedures and ensure that all staff understand and follow the guidelines.

—Amy Waye