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## Candidate Outcome Indicators: Assisted Living Program

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Implementing an outcome monitoring process enables organizations to track progress in achieving the program's mission. With this information, program managers can better develop budgets, allocate resources and improve their services. This document includes the following suggestions for starting or improving outcome measurement efforts:

1. **Outcome sequence chart** – *Identifies key outcomes presented in the sequence that are normally expected to occur.* The chart illustrates how one outcome leads to the next and identifies specific indicators that might be used to track each outcome. Intermediate outcomes tend to be on the left, and end (or final) outcomes are on the right. The program description at the top of the chart is meant to encompass a range of similar programs.
2. **Candidate outcome indicators** – *Lists outcomes and associated indicators as a starting point for deciding which outcomes to track.* They were chosen based on a review of the program area and consultation with program experts. Only outcome indicators are included (not physical outputs, such as number of classes held; not efficiency, such as cost per counseling session; and not organization issues, such as success in fundraising or staffing). The focus is on program beneficiaries (clients, customers, citizens, participants) and what has been accomplished for them. A data source or collection procedure is suggested for each indicator.

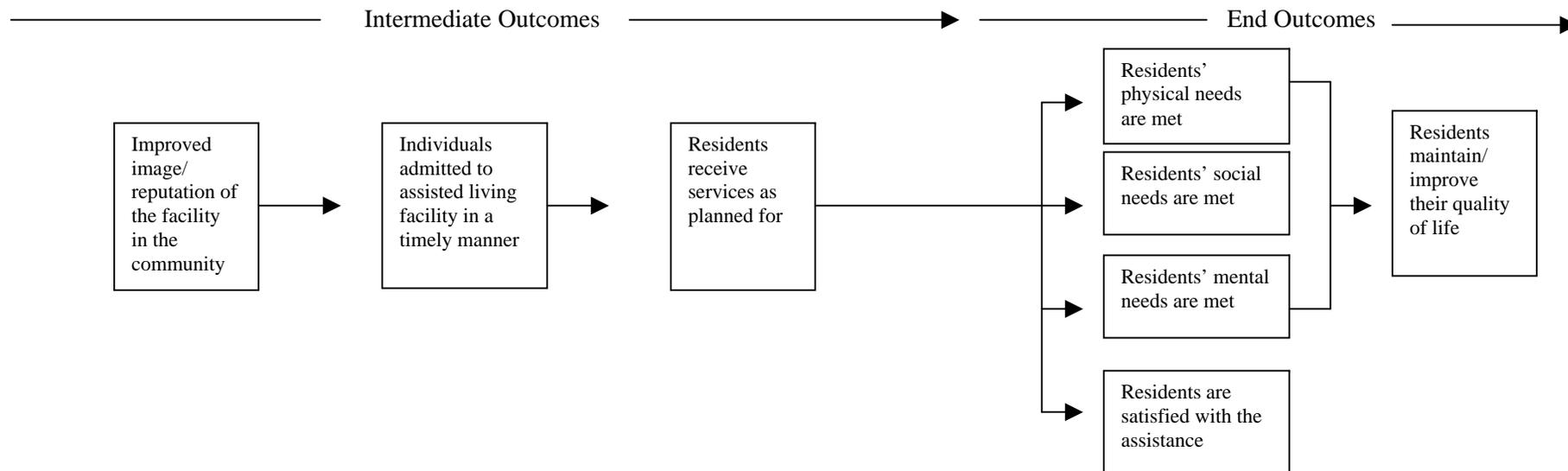
### Suggestions and Limitations for Use of the Materials

- Involve others in deciding which outcomes and indicators to track. Obtain input from staff, board members, and clients. As an early step, prepare your own version of an outcome sequence chart—one that you believe fits the needs of your program.
- Review the project report for additional ideas on relevant indicators and additional resources: *Building a Common Framework to Measure Nonprofit Performance.*
- Tabulate the outcome information by various categories of clients to see if outcomes are different for different clients (e.g., gender, age group, income level, handicap level, and race/ethnicity). Use that information to help better target your efforts.
- Start with a small number of the indicators, especially if you have had only very little experience with such data collection and have very limited resources. Add more outcomes and indicators to the performance measurement system later, as you find that information is likely to be useful.
- Outcome information seldom, if ever, tells *why* the outcomes have occurred. Many internal and external factors can contribute to any outcome. Instead, use the outcome data to identify *what* works well and what does not. Use the data to determine for which *categories of clients* your procedures and policies are working well and for which they are not working well. To the extent that the program is not working as well as expected, then attempt to find out the reasons. This investigation process leads to continuous learning and program improvement.

## Assisted Living Program Description

To maintain or improve the quality of life of relatively independent senior citizens and individuals with disabilities through addressing their physical, social, and mental needs by providing housing, meals, supervision, and assistance and such programming as recreational, fitness, and social activities in a way that promotes maximum self-determination and independence.

## Outcome Sequence Chart



## Indicators

1. Number of persons applying to the assisted living community.

2. The average size of the waiting list.

3. The average wait time for applicants on the waiting list.

4. The average percentage of the facilities' capacity used.

5. Number of residents found to be receiving services as planned during regular, systematic internal monitoring.

6-12. Number and percent of residents reporting satisfaction with housing, meals, supervision, health and personal care assistance, housekeeping assistance, and fitness activities. 13. Number of inspection deficiencies in physical facilities.

14-15. Number and percent of residents reporting satisfaction with transportation and recreational activities.

16-17. Number and percent of residents reporting satisfaction with educational/cognitive activities and counseling/therapy if used.

18. Number and percent of residents who maintain/improve their quality of life.

Sources Consulted: National Center for Assisted Living (NCAL), Assisted Living: Independence, Choice and Dignity (2001); Joint Commission on Accreditation of Healthcare Organizations, 2005 Assisted Living Standards (2005); American Health Care Association/National Center for Assisted Living, Planning Ahead: A Consumer's Guide to Assisted Living Facilities (2003).

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	Common Outcome	Program Specific Outcome	Indicator	Data Collection Strategy	Note	Outcome Stage
1	Improved image/reputation of the organization	Prospective residents see facility has a good image/ reputation.	Number of individuals applying to the assisted living community during the reporting period.	Internal program records		Intermediate
2	Increased enrollment	Applicants admitted to facility in a timely manner.	Number and percent of applicants admitted to facility during reporting period.	Internal program records	Program may also calculate the percentage of the facility's capacity used by dividing the average enrollment by the number of beds.	Intermediate
3	Improved wait time	Applicants admitted to facility in a timely manner.	The average wait time for applicants on the waiting list during the reporting period.	Internal program records		Intermediate
4	Improved responsiveness to participants' needs	Residents develop individualized service plan with staff.	Number and percent of residents with a current individualized service plan during the reporting period.	Internal program records		Intermediate
5	Increased service provision	Residents receive appropriate services in-house and by outside providers.	Number of residents found to be receiving services as planned during regular, systematic internal monitoring during the reporting period.	Internal program records	Monitoring to determine whether residents are getting correct prescriptions, diet, needed specialized help, etc.	Intermediate
6	Physical well-being	Physical needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with housing.	Resident/significant other survey	See Notes #1-4 below.	Intermediate/End
7	Physical well-being	Physical needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with meals.	Resident/significant other survey		Intermediate/End
8	Physical well-being	Physical needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with health care assistance.	Resident/significant other survey	Survey may include questions about the administration of medication, availability of a doctor, etc.	Intermediate/End
9	Physical well-being	Physical needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with the level of supervision (see note).	Resident/significant other survey	Supervision appropriate to ensure the health and safety of the resident.	Intermediate/End

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	Common Outcome	Program Specific Outcome	Indicator	Data Collection Strategy	Note	Outcome Stage
10	Physical well-being	Physical needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with personal care assistance (see note).	Resident/significant other survey	Personal care assistance includes help with activities of daily living (ADLs) including feeding, bathing, dressing, toileting, etc.	Intermediate/ End
11	Physical well-being	Physical needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with housekeeping assistance (see note).	Resident/significant other survey	Housekeeping assistance may include maintenance and laundry service.	Intermediate/ End
12	Physical well-being	Physical needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with fitness activities (see note).	Resident/significant other survey	Fitness activities may include exercise and wellness programs.	Intermediate/ End
13	Physical well-being	Physical needs of residents met	Number of deficiencies in the assisted living facility identified by external inspections.	State or other external inspections	Inspections identify deficiencies in such things as the safety and cleanliness of the facility.	Intermediate/ End
14	Social/Physical well-being	Social needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with transportation services.	Resident/significant other survey		Intermediate/ End
15	Social well-being	Social needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with recreational activities.	Resident/significant other survey		Intermediate/ End
16	Mental well-being	Mental needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with educational/cognitive activities.	Resident/significant other survey		Intermediate/ End
17	Mental well-being	Mental needs of residents met	Number and percent of residents (or others reporting on their behalf) reporting satisfaction with counseling/therapy if used.	Resident/significant other survey		Intermediate/ End

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	Common Outcome	Program Specific Outcome	Indicator	Data Collection Strategy	Note	Outcome Stage
18	Mental well-being/Quality of life	Residents maintain/improve their quality of life	Number and percent of residents reporting satisfaction with their quality of life.	Resident/significant other survey	Quality of life is a subjective term making it difficult to set any standards against which it can be measured. Residents (or significant others in their stead) will have to rate themselves relative to their own experience.	End

Note #1: Resident surveys should be conducted periodically (for example, quarterly) to provide before and after points of comparison.

Note #2: The same resident survey can obtain information for many different indicators, specifically indicators 6-12 and 14-18.

Note #3: People may differ with designations presented here of "intermediate" or "end" outcome stage. While these designations are generally the common order of events for this program area, some organizations may order events differently. The important issue is what should be measured and its relative significance, not how it is labeled.

Note #4: A significant other is a relative or other person in close enough contact with the resident to be able to respond meaningfully about services the resident receives. Surveying the significant other is of particular importance when the resident is not able to respond for his or herself.

### Sources Consulted:

National Center for Assisted Living (NCAL), *Assisted Living: Independence, Choice and Dignity* (2001)

Joint Commission on Accreditation of Healthcare Organizations, *2005 Assisted Living Standards* (2005)

American Health Care Association/National Center for Assisted Living, *Planning Ahead: A Consumer's Guide to Assisted Living Facilities* (2003)  
(Accessed May 2005 at <http://www.longtermcareliving.com/planningAhead/assisted/assisted2.htm>)