

The 1986 Inventory of Long-Term Care Places An Overview of Facilities for the Mentally Retarded

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Introduction

The 1986 Inventory of Long-Term Care Places (ILTCP) is a survey of two types of facilities: nursing homes and facilities for the mentally retarded. As used in this survey, the term "nursing homes" includes nursing care homes and such residential facilities as homes for the aged, personal care homes, and board and care homes. All of these facilities must maintain three beds or more. This report deals only with facilities for the mentally retarded.

The National Center for Health Statistics (NCHS), in cooperation with the National Center for Health Services Research and the Health Care Financing Administration (HCFA), employed the U.S. Bureau of the Census to conduct the 1986 ILTCP. The purpose of the survey was to provide a current sampling frame for two portions (nursing home and mental retardation (MR) facilities) of the Institutional Population Component of the 1987 National Medical Expenditure Survey (NMES). The NMES, which was to be conducted by National Center for Health Services Research in early 1987, was on a very tight schedule. The impact of these time restraints will be mentioned in later sections of this report.

History and background

The ILTCP had never been conducted prior to the 1986 survey. However, a similar survey, the National Master Facility Inventory (NMFI), had been conducted many times between 1967 and 1982.¹ Each NMFI included a survey of nursing

homes, but MR facilities had not been surveyed since the 1976 NMFI.² Types of questions asked in the ILTCP were similar enough to NMFI questions that a decision was made to publish the ILTCP data to update the 1982 NMFI nursing home data and to give baseline information on MR facilities. The ILTCP file was constructed by the Long-Term Care Statistics Branch of NCHS. Survey procedures are described in the Technical notes.

In creating the mailing list for the MR portion of the ILTCP, NCHS started with a file produced in 1982 by the University of Minnesota's Center for Residential and Community Services (CRCS). The 15,000 MR facilities on this file were matched against current State and local directories obtained by NCHS. Due to time constraints imposed on the ILTCP, NCHS was unable to contact all local sources identified by CRCS in its study. It is believed that most of any places missed would be small MR facilities (fewer than 16 beds).

The 1982 study, conducted by CRCS for HCFA, was very detailed and allowed for extensive followback.³ Because the primary purpose of the ILTCP was to establish a sampling frame for a major survey (NMES), the information collected on MR facilities was very general. It was intended for use in stratifying and categorizing MR facilities into broad categories. As a result, data collected in the 1986 ILTCP can be compared to the 1982 CRCS study only in the broadest of terms. This report will not present data on individual States. These data will appear in a forthcoming series report.

¹National Center for Health Statistics, D. Roper. 1986. Nursing and related care homes as reported from the 1982 National Master Facility Inventory Survey. *Vital and Health Statistics*. Series 14, No. 32. DHHS Pub. No. (PHS) 86-1827. Public Health Service, Washington: U.S. Government Printing Office.

²National Center for Health Statistics, J. F. Sutton and A. Sirrocco. 1980. Inpatient health facilities as reported from the 1976 MFI Survey. *Vital and Health Statistics*. Series 14, No. 23. DHEW Pub. No. (PHS) 80-1818. Public Health Service, Washington: U.S. Government Printing Office.

³Hill, B. K., and K. C. Lakin. 1984. *Classification of Residential Facilities for Mentally Retarded People*. Brief No. 24. Minneapolis: Center for Residential and Community Services, University of Minnesota.

Classification of MR facilities

Question 6 of the ILTCP questionnaire lists 14 types of facilities, 6 specifically for the mentally retarded. These six categories are intermediate care facility for the mentally retarded (ICF-MR), foster home, group residence, semi-independent living program, State institution, and other kind of MR place.

To make it easier for respondents to categorize their facilities, they were instructed to "check all that apply." Those whose facilities fell into more than one category were, therefore, not forced to check only one. If so restricted, the one category selected would very often have been "other kind of MR place" or, worse, "none of the above." In this regard, the strategy worked. Only 256 cases marked the "other MR" box without marking any other MR category. Table 1 summarizes responses to question 6.

Unfortunately, respondents from 2,020 places ultimately classified as MR facilities checked none of the six MR boxes. Many did not answer this question at all and others checked a box such as "sheltered or custodial care home."

The procedures used to classify a facility as MR were applied to all places, even those checking an MR box. Many different items from the questionnaire were used. Of almost equal importance to responses to question 6 were those to questions 5b ("Did the facility primarily serve only the mentally retarded/developmentally disabled, or the mentally retarded/mentally ill?"), 7d ("Did the facility have ICF-MR beds?"), and 11g ("Did the facility have MR residents?").

Responses were combined into matrices, incorporating another important factor: Was the name of the facility obtained from an MR source (the CRCS file or one of NCHS's State MR directories)? To qualify as an MR facility, a place had to be primarily oriented toward MR. As a result, a nursing home with a small MR wing would remain a nursing home.

Once classified as an MR facility, an institution was either subclassified as ICF-MR or MR—other. Table 1 shows how facilities classified themselves in question 6, but in this report the two classifications ICF-MR and MR—other are used.

Table 1. Number of mental retardation (MR) facilities by type of categories marked by respondents: United States, 1986

<i>Type of MR facility</i>	<i>Number of facilities</i>
Total facilities	14,639
Foster care	2,467
Group residence	5,977
Semi-independent living program	668
State institution	252
Other	256
Foster care and group residence	186
Group residence and semi-independent living program	440
Other combinations	285
Intermediate care facility for mental retardation (ICF-MR) only	2,088
No MR or ICF-MR category marked	2,020

NOTE: Each facility was allowed to check as many categories as applied. Many facilities checked ICF-MR plus 1 or more of the 5 basic MR categories listed. Therefore, the counts for the first 8 categories (and combinations of categories) shown above include those facilities that also checked the ICF-MR box.

Discussion

Facility characteristics

The survey found 14,639 MR facilities. These facilities had 269,954 beds and 250,472 residents. Based on actual counts plus imputations for missing data, an estimated 95 percent of the residents were mentally retarded. In other words, while a facility's primary function might be to serve the mentally retarded, it frequently serves other residents (for example, the mentally ill). All numbers and percents associated with the term "MR residents" in this report are based on the total resident count.

The average size of the MR facility was 18 beds, but the distribution showed almost 87 percent of all MR facilities with fewer than 16 beds (table 2). In fact, more than 72 percent had fewer than 10 beds. Despite this lopsided distribution, only 20 percent of MR residents were in facilities with fewer than 10 beds, and nearly half were in facilities with 100 beds or more (see table 3).

Table 3 lists the distribution of MR facilities and residents by geographic region. Although the South had the fewest MR facilities (16.3 percent), it had almost 27 percent of the residents, second only to the Midwest (30.8 percent). Table 3 depicts this distribution as the average number of residents per MR facility. There were an average of 28 residents in the South, 16 in the Northeast and Midwest, and 12 in the West. The overall U.S. average was 17 residents per MR facility.

The West had by far the fewest facilities with 100 beds or more. With 45 MR facilities, it trailed the Midwest (142), the South (136), and the Northeast (82).

Some regional differences can be explained by the relative sizes of resident population bases. The West had only 18 percent of all MR residents, but it also had only about 20 percent of the U.S. population. Similarly, the South had 27 percent of the MR residents and 34 percent of the population, the Midwest had 31 percent of the residents and 25 percent of the population, and the Northeast had 25 percent of the residents and 21 percent of the population.

As mentioned in the Introduction, during classification of facilities as MR or nursing homes, many nursing homes (8,276) were found to have MR residents. These nursing homes reported 39,527 MR residents, an average of almost 5 per home. Those nursing homes with 3–15 beds averaged 2 MR residents; those with 16–99 beds, 5 MR residents; and those with 100 beds or more, 10 MR residents.

Checking nursing home MR residents by region would indicate whether mentally retarded persons in certain regions tend to be placed in nursing homes rather than MR facilities. Table 4 reveals no dramatic tendencies in this direction. It does show that the West, with the fewest MR residents in MR facilities, also had the fewest MR residents in nursing homes (4,871). Only 12 percent of all nursing home MR residents were in the West, which has 20 percent of the U.S. population. Proportions of MR residents in nursing homes in the South (32 percent) and the Northeast (19.6 percent), were virtually identical to their shares of the U.S. population. The Midwest had the most nursing home MR residents (14,240), the largest

Table 2. Number and percent distribution of mental retardation facilities by bed size and ownership, according to geographic region: United States, 1986

Bed size and type of ownership	Type of facilities									
	All geographic regions					All geographic regions				
	Northeast	Midwest	South	West	Northeast	Midwest	South	West		
	Number					Percent distribution				
Total	14,639	3,806	4,741	2,380	3,712	100.0	100.0	100.0	100.0	100.0
1-2 beds	1,350	445	471	135	299	9.2	11.7	9.9	5.7	8.1
3-5 beds	3,765	1,263	933	624	945	25.7	33.2	19.7	26.2	25.5
6-9 beds	5,491	1,072	1,926	772	1,721	37.5	28.2	40.6	32.4	46.4
10-15 beds	2,097	657	696	360	384	14.3	17.3	14.7	15.1	10.3
16-24 beds	604	112	247	137	108	4.1	2.9	5.2	5.8	2.9
25-49 beds	524	101	179	114	130	3.6	2.7	3.8	4.8	3.5
50-99 beds	403	74	147	102	80	2.8	1.9	3.1	4.3	2.2
100-199 beds	198	30	85	64	19	1.4	0.8	1.8	2.7	0.5
200-499 beds	126	25	39	45	17	0.9	0.7	0.8	1.9	0.5
500 beds or more	81	27	18	27	9	0.6	0.7	0.4	1.1	0.2
Type of ownership										
Profit	6,330	1,058	2,097	763	2,412	43.2	27.8	44.2	32.1	65.0
Nonprofit	6,396	2,071	2,126	1,146	1,053	43.7	54.4	44.8	48.2	28.4
Government	1,913	677	518	471	247	13.1	17.8	10.9	19.8	6.7

Table 3. Number and percent distribution of mental retardation facilities, beds, and residents, and average number of beds and residents by bed size, geographic region, and type of ownership: United States, 1986

Bed size, geographic region, and type of ownership	Facilities			Beds			Residents		
	Number			Percent distribution			Average number		
	Facilities	Beds	Residents	Facilities	Beds	Residents	Beds	Residents	
Total	14,639	269,954	250,472	100.0	100.0	100.0	18	17	
Bed size									
1-9 beds	10,606	54,417	50,049	72.4	20.2	20.0	5	5	
10-15 beds	2,097	24,991	23,444	14.3	9.3	9.4	12	11	
16-99 beds	1,531	58,050	54,090	10.5	21.5	21.6	38	35	
100 beds or more	405	132,496	122,889	2.8	49.1	49.1	327	303	
Geographic region									
Northeast	3,806	65,812	61,707	26.0	24.4	24.6	17	16	
Midwest	4,741	83,067	77,193	32.4	30.8	30.8	18	16	
South	2,380	71,887	66,767	16.3	26.6	26.7	30	28	
West	3,712	49,188	44,805	25.4	18.2	17.9	13	12	
Type of ownership									
Profit	6,330	66,536	60,560	43.2	24.6	24.2	11	10	
Nonprofit	6,396	78,935	75,193	43.7	29.2	30.0	12	12	
Government	1,913	124,483	114,719	13.1	46.1	45.8	65	60	

Table 4. Number and percent distribution of nursing homes with mental retardation (MR) residents and MR residents in nursing homes by geographic region: United States, 1986

Geographic region	Nursing homes with MR residents		Nursing homes with MR residents	
	Number	MR residents	Number	MR residents
	Percent distribution		Percent distribution	
Total	8,276	39,527	100.0	100.0
Northeast	1,686	7,753	20.7	19.6
Midwest	2,743	14,240	33.1	36.0
South	2,688	12,663	32.8	32.0
West	1,159	4,871	14.0	12.3

share of total nursing home residents (36 percent), and the greatest proportion of MR residents compared with its proportion of the U.S. population (36 versus 25 percent).

For-profit MR facilities (6,330) and nonprofit MR facilities (6,396) were equally distributed and combined for almost 87 percent of the total (table 5). The 1,913 government-owned places, which accounted for the remaining 13 percent, made up for their small number with size. These government-owned MR facilities included large State institutions and, as a result, accounted for almost 46 percent of all MR facility residents (table 6). They averaged 65 beds per facility, compared with 12 beds in nonprofit and 11 beds in for-profit facilities. Over 85 percent of residents in government-owned MR facilities were in facilities with 100 beds or more; in contrast, less than

Table 5. Number and percent distribution of mental retardation facilities by type of ownership and bed size, according to geographic region: United States, 1986

Type of ownership and bed size	Facilities									
	All geographic regions					All geographic regions				
	Northeast	Midwest	South	West	Northeast	Midwest	South	West		
	Number					Percent distribution				
Total	14,639	3,806	4,741	2,380	3,712	100.0	100.0	100.0	100.0	100.0
Profit										
Total	6,330	1,058	2,097	763	2,412	43.2	27.8	44.2	32.1	65.0
1-9 beds	4,884	877	1,536	515	1,956	33.4	23.0	32.4	21.6	52.7
10-15 beds	737	81	313	104	239	5.0	2.1	6.6	4.4	6.4
16-99 beds	630	92	217	114	207	4.3	2.4	4.6	4.8	5.6
100 beds or more	79	8	31	30	10	0.5	0.2	0.7	1.3	0.3
Nonprofit										
Total	6,396	2,071	2,126	1,146	1,053	43.7	54.4	44.8	48.2	28.4
1-9 beds	4,567	1,533	1,474	749	811	31.2	40.3	31.1	31.5	21.8
10-15 beds	1,062	373	350	203	136	7.3	9.8	7.4	8.5	3.7
16-99 beds	683	147	262	177	97	4.7	3.9	5.5	7.4	2.6
100 beds or more	84	18	40	17	9	0.6	0.5	0.8	0.7	0.2
Government										
Total	1,913	677	518	471	247	13.1	17.8	10.9	19.8	6.7
1-9 beds	1,155	370	320	267	198	7.9	9.7	6.7	11.2	5.3
10-15 beds	298	203	33	53	9	2.0	5.3	0.7	2.2	0.2
16-99 beds	218	48	94	62	14	1.5	1.3	2.0	2.6	0.4
100 beds or more	242	56	71	89	26	1.7	1.5	1.5	3.7	0.7

20 percent of residents in nonprofit and for-profit MR facilities were housed in facilities with 100 beds or more.

As mentioned earlier, the South, which had the fewest MR facilities, was second only to the Midwest in total beds. Government-owned facilities accounted for much of the total, even though the South did not have the most government-owned facilities (471 compared with 677 in the Northeast and 518 in the Midwest). The South did have the most government-owned facilities with 100 beds or more (89 compared with 26 in the West, 56 in the Northeast, and 71 in the Midwest) (table 5).

Intermediate care facilities

An ICF-MR is a facility that has met certification requirements set forth in medicaid regulations. Two ILTCP questions were asked about ICF-MR's. Question 6, box 03, was checked when respondents considered their facilities to be ICF-MR's; question 7d was answered only if a facility had ICF-MR beds. The ILTCP counted all places responding positively to either question as ICF-MR's. The result was a total of 4,193 ICF-MR's.

This self-classification might overstate the number of ICF-MR's, but a lack of time and money made it impossible to recontact these 4,193 places to verify their ICF-MR status. As an alternative method of verification, the count was compared with figures obtained from other sources.

The 1982 MR study conducted by CRCS found 1,854 ICF-MR's. This figure represented a tremendous growth from

the 574 ICF-MR's found in its 1977 study.⁴ The 1984-85 HCFA file for ICF-MR's contained 2,968 facilities. The growth rate indicated by these three studies makes the 1986 ILTCP figure (4,193) seem reasonable. As a further check, a comparison was made of the bed-size distributions in the three studies. For those ICF-MR's with 16 beds or more, the figures for 1977, 1982, 1984-85, and 1986 were 386, 652, 837, and 885, respectively. Survey totals for facilities with fewer than 16 beds were 188, 1,202, 2,131, and 3,308. Figures for the larger facilities (16 beds or more) represented yearly increases of about 11 percent from 1977 to 1982, 10 percent from 1982 through 1985, and 6 percent from 1985 to 1986. The figures for the smaller facilities (fewer than 16 beds) represented yearly increases of about 45, 30, and 33 percent, respectively. Once again, these rates seem reasonable.

Of these 4,193 ICF-MR's, the Midwest had the most with 1,572 (37.5 percent) and the West had the fewest with 606 (14.5 percent). (See table 7.) The West also had the lowest percent of ICF-MR beds (12.1 percent), so it did not compensate by having more of the larger facilities. On the contrary, the West had only 28 ICF-MR's with 100 beds or more, compared with 128 in the South, 98 in the Midwest, and 62 in the Northeast.

Only 12.8 percent of ICF-MR's in the Northeast were owned for profit, in sharp contrast with the West (49.5 per-

⁴Lakin, K. C., and B. K. Hill. 1984. *Expansion of the Medicaid ICF-MR Program Over a Five Year Period, 1977-1982*. Brief No. 25. Minneapolis: Center for Residential and Community Services, University of Minnesota.

Table 6. Number and percent distribution of mental retardation residents by type of ownership and bed size, according to geographic region: United States, 1986

Type of ownership and bed size	Residents									
	All geographic regions	Northeast	Midwest	South	West	All geographic regions	Northeast	Midwest	South	West
	Number					Percent distribution				
Total	250,472	61,707	77,193	66,767	44,805	100.0	100.0	100.0	100.0	100.0
Profit										
Total	60,560	7,874	21,362	11,612	19,712	24.2	12.8	27.7	17.4	44.0
1-9 beds	20,127	2,918	6,640	2,147	8,422	8.0	4.7	8.6	3.2	18.8
10-15 beds	8,289	899	3,560	1,184	2,646	3.3	1.5	4.6	1.8	5.9
16-99 beds	21,390	2,748	6,971	4,236	7,435	8.5	4.5	9.0	6.3	16.6
100 beds or more	10,754	1,309	4,191	4,045	1,209	4.3	2.1	5.4	6.1	2.7
Nonprofit										
Total	75,193	20,818	28,054	15,667	10,654	30.0	33.7	36.3	23.5	23.8
1-9 beds	24,447	7,601	8,264	4,212	4,370	9.8	12.3	10.7	6.3	9.8
10-15 beds	11,922	4,190	4,039	2,212	1,481	4.8	6.8	5.2	3.3	3.3
16-99 beds	24,322	5,662	9,210	5,999	3,451	9.7	9.2	11.9	9.0	7.7
100 beds or more	14,502	3,365	6,541	3,244	1,352	5.8	5.5	8.5	4.9	3.0
Government										
Total	114,719	33,015	27,777	39,488	14,439	45.8	53.5	36.0	59.1	32.2
1-9 beds	5,475	1,981	1,401	1,325	768	2.2	3.2	1.8	2.0	1.7
10-15 beds	3,233	2,186	359	579	109	1.3	3.5	0.5	0.9	0.2
16-99 beds	8,378	1,702	3,563	2,419	694	3.3	2.8	4.6	3.6	1.5
100 beds or more	97,633	27,146	22,454	35,165	12,868	39.0	44.0	29.1	52.7	28.7

Table 7. Number and percent distribution of intermediate care facilities for the mentally retarded by type of ownership and bed size, according to geographic region: United States, 1986

Type of ownership and bed size	Facilities									
	All geographic regions	Northeast	Midwest	South	West	All geographic regions	Northeast	Midwest	South	West
	Number					Percent distribution				
Total	4,193	1,182	1,572	833	606	100.0	100.0	100.0	100.0	100.0
Profit										
Total	1,313	151	605	257	300	31.3	12.8	38.5	30.8	49.5
1-9 beds	855	118	382	138	217	20.4	10.0	24.3	16.6	35.8
10-15 beds	215	17	125	48	25	5.1	1.4	8.0	5.8	4.1
16-99 beds	195	15	82	44	54	4.7	1.3	5.2	5.3	8.9
100 beds or more	48	1	16	27	4	1.1	0.1	1.0	3.2	0.1
Nonprofit										
Total	1,992	652	783	330	227	47.5	55.2	49.8	39.6	37.5
1-9 beds	1,297	423	502	194	178	30.9	35.8	31.9	23.3	29.4
10-15 beds	415	173	156	58	28	9.9	14.6	9.9	7.0	4.6
16-99 beds	235	49	103	64	19	5.6	4.1	6.6	7.7	3.1
100 beds or more	45	7	22	14	2	1.1	0.6	1.4	1.7	0.3
Government										
Total	888	379	184	246	79	21.2	32.1	11.7	29.5	13.0
1-9 beds	364	167	69	80	48	8.7	14.1	4.4	9.6	7.9
10-15 beds	162	122	4	35	1	3.9	10.3	0.3	4.2	0.2
16-99 beds	139	36	51	44	8	3.3	3.0	3.2	5.3	1.3
100 beds or more	223	54	60	87	22	5.3	4.6	3.8	10.4	3.6

cent), Midwest (38.5 percent), and South (30.8 percent). Government-owned ICF-MR's represented a small portion of all ICF-MR's in the Midwest (11.7 percent) and West (13.0 percent), but formed a substantial portion of those in the Northwest (32.1 percent) and South (29.5 percent). (See table 7.)

The differences in capacity among ownership types were dramatic. Average bed capacity for all ICF-MR's was 39. Government-owned homes averaged 124 beds; for-profit, 18; and nonprofit, 16 (table 8). In each region, government-owned homes were much larger, but actual average bed sizes were quite different. For instance, the South had the highest and the Northeast had by far the lowest average bed capacities in government-owned homes. Government and nonprofit facilities in the Northeast were half the size of those in the South; their for-profit facilities were only a third the size. The Midwest and West had ICF-MR's much nearer in size to those in the South for all three ownership groups, but the sheer number of facilities with 100 beds or more in the South resulted in its overall average bed size being twice those of the Midwest and West (see table 8).

It is also interesting to note that the South, in addition to having more government-owned ICF-MR's with 100 beds or more than any other region, had more for-profit ICF-MR's with 100 beds or more than the other three regions combined (27 compared with a combined total of 21). The Midwest, on the other hand, had almost as many nonprofit ICF-MR's with 100 beds or more as the other three regions combined (22 compared with a combined total of 23).

Resident characteristics

There were 250,472 residents occupying the 269,954 beds in MR facilities, for an occupancy rate of 92.8 percent. Regional occupancy rates were quite close, ranging from 91.1 percent in the West to 93.8 percent in the Northeast (92.9 percent in the Midwest and 92.9 percent in the South). These rates translated into approximately 4,100 empty beds in the Northeast, 4,400 in the West, 5,100 in the South, and 5,900 in the Midwest.

There were 1.04 residents in MR facilities per 1,000 persons in the U.S. population. The Midwest had the highest rate, 1.30, followed by the Northeast (1.24), the West (0.92), and the South (0.81).

Age groups were reported for 237,145 of the 250,472 total residents in MR facilities (95 percent). As table 9 indicates, three-fourths of these residents were between 22 and 64 years

of age. The group 65 years and over was the smallest (17,963), and represented only 7.6 percent of the total. In fact, in non-profit MR facilities, its members made up only 3.6 percent of total residents.

In each age group, there were many more residents in government-owned facilities than in profit or nonprofit facilities. This was not surprising because many more residents in general were in government-owned facilities. A comparison of profit and nonprofit facilities indicated that residents 65 years and over were more than 2½ times more likely to be in for-profit facilities. This contrasts directly with the other two age groups, which have many more residents in nonprofit facilities (see table 9). Comparing these age groups and ownership categories with region, bed size, and MR facility type failed to produce any meaningful explanation for this situation.

Only 10.3 percent of MR residents 65 years and over were in the West. Each of the other regions had 2½–3 times as many MR residents in this age group. The West also had fewer residents 22–64 and under 22 years of age, but the differences were much less than those found for MR residents 65 years and over.

The group 22–64 years of age was consistent across region and ownership categories, representing in almost every instance approximately three-fourths of the total (see table 9). In every region, residents in the age group under 22 years made up a larger percent of total residents than the group 65 years and over. The largest percent differences were in nonprofit facilities and in the South and West.

Other survey questions asked about the number of black and Hispanic residents in the facility the night before the survey. Only 4.4 percent of all facilities and 4.0 percent of MR facilities left one or both of these questions blank.

Approximately 12 percent of all MR facility residents were black persons and 4 percent were of Hispanic origin. Of the 29,442 black residents, almost half (14,538) were in the South; nearly half (4,856) of the 10,181 Hispanic residents were in the West (see table 10).

The distribution of Hispanic residents among small (fewer than 16 beds), medium (16–99 beds), and large (100 beds or more) MR facilities was virtually identical to the distribution of all residents among these facilities (see tables 10 and 3). Black residents, however, were somewhat more likely to reside in large (100 beds or more) MR facilities (58.2 percent of black residents, compared with 49.1 percent of all residents and 47.9 percent of nonblack residents). This tendency occurred in every region except the West, where 28.7 percent of all black

Table 8. Average bed capacity in intermediate care facilities for the mentally retarded by type of ownership and geographic region: United States, 1986

Type of ownership	Beds				
	All geographic regions	Northeast	Midwest	South	West
Total average	39	35	31	67	33
Profit	18	9	16	29	17
Nonprofit	16	12	17	23	11
Government	124	83	137	165	158

Table 9. Number and percent distribution of residents in mental retardation facilities for which an age group was reported by type of ownership and age group, according to geographic region: United States, 1986

Type of ownership and age group	Residents									
	All geographic regions					All geographic regions				
	Northeast	Midwest	South	West	Northeast	Midwest	South	West		
	Number					Percent distribution				
All types of ownership										
Total	237,145	57,183	73,095	64,470	42,397	100.0	100.0	100.0	100.0	100.0
Under 22 years	38,841	7,320	10,609	12,365	8,547	16.4	12.8	14.5	19.2	20.2
22-64 years	180,341	44,453	56,525	47,370	31,993	76.0	77.7	77.3	73.5	75.5
65 years and over	17,963	5,410	5,961	4,735	1,857	7.6	9.5	8.2	7.3	4.4
Profit										
Total	56,084	7,378	19,814	10,818	18,074	100.0	100.0	100.0	100.0	100.0
Under 22 years	8,873	1,322	2,538	1,444	3,569	15.8	17.9	12.8	13.3	19.7
22-64 years	40,728	4,643	14,851	7,956	13,278	72.6	62.9	75.0	73.5	73.5
65 years and over	6,483	1,413	2,425	1,418	1,227	11.6	19.2	12.2	13.1	6.8
Nonprofit										
Total	71,039	19,552	26,336	15,097	10,054	100.0	100.0	100.0	100.0	100.0
Under 22 years	14,159	3,846	4,618	3,405	2,290	19.9	19.7	17.5	22.6	22.8
22-64 years	54,353	15,085	20,381	11,353	7,534	76.5	77.2	77.4	75.2	74.9
65 years and over	2,527	621	1,337	339	230	3.6	3.2	5.1	2.2	2.3
Government										
Total	110,022	30,253	26,945	38,555	14,269	100.0	100.0	100.0	100.0	100.0
Under 22 years	15,809	2,152	3,453	7,516	2,688	14.4	7.1	12.8	19.5	18.8
22-64 years	85,260	24,725	21,293	28,061	11,181	77.5	81.7	79.0	72.8	78.4
65 years and over	8,953	3,376	2,199	2,978	400	8.1	11.2	8.2	7.7	2.8

Table 10. Number and percent distribution of black and Hispanic residents in mental retardation facilities by race, Hispanic origin, and bed size, according to geographic region: United States, 1986

Race and Hispanic origin and bed size	Residents									
	All geographic regions					All geographic regions				
	Northeast	Midwest	South	West	Northeast	Midwest	South	West		
	Number					Percent distribution				
Black residents										
Total	29,442	5,634	6,438	14,538	2,832	100.0	100.0	100.0	100.0	100.0
1-9 beds	4,885	900	1,225	1,693	1,067	16.6	16.0	19.0	11.6	37.7
10-15 beds	1,950	732	342	592	284	6.6	13.0	5.3	4.1	10.0
16-99 beds	5,485	1,037	1,311	2,468	669	18.6	18.4	20.4	17.0	23.6
100 beds or more	17,122	2,965	3,560	9,785	812	58.2	52.6	55.3	67.3	28.7
Hispanic residents										
Total	10,181	1,578	1,079	2,668	4,856	100.0	100.0	100.0	100.0	100.0
1-9 beds	2,210	273	148	156	1,633	21.7	17.3	13.7	5.8	33.6
10-15 beds	937	324	57	162	394	9.2	20.5	5.3	6.1	8.1
16-99 beds	2,333	285	295	404	1,349	22.9	18.1	27.3	15.1	27.8
100 beds or more	4,701	696	579	1,946	1,480	46.2	44.1	53.7	72.9	30.5

residents (compared with 34.4 percent of all residents and 34.8 percent of nonblack residents) were in the large MR facilities.

Black residents were more likely to reside in government-owned MR facilities (54.3 percent) than in for-profit (22.1 percent) or nonprofit (23.6 percent) facilities (see table 11). Government-owned facilities had 45.8 percent of all residents (44.7 percent for nonblack residents). This tendency was true in every region except the West, where black residents were

more likely to be in for-profit facilities (56.3 compared with 44.0 percent for all residents and 43.2 percent for nonblack residents) (tables 11 and 6).

Hispanic residents were more likely to live in for-profit facilities (34.3 compared with 24.2 percent for all residents and 23.7 percent for non-Hispanic residents) and less likely to be in nonprofit facilities (22.7 compared with 30.0 percent for all residents and 30.3 percent for non-Hispanic residents).

Table 11. Number and percent distribution of black and Hispanic residents in mental retardation facilities by race and Hispanic origin and type of ownership, according to geographic region: United States, 1986

Race and Hispanic origin and type of ownership	Residents										
	All geographic regions					All geographic regions					
	Northeast	Midwest	South	West	Northeast	Midwest	South	West			
		Number					Percent distribution				
Black residents											
Total	29,442	5,634	6,438	14,538	2,832	100.0	100.0	100.0	100.0	100.0	
Profit	6,503	935	1,547	2,427	1,594	22.1	16.6	24.0	16.7	56.3	
Nonprofit	6,938	1,786	1,858	2,809	485	23.6	31.7	28.9	19.3	17.1	
Government	16,001	2,913	3,033	9,302	753	54.3	51.7	47.1	64.0	26.6	
Hispanic residents											
Total	10,181	1,578	1,079	2,668	4,856	100.0	100.0	100.0	100.0	100.0	
Profit	3,495	184	314	486	2,511	34.3	11.7	29.1	18.2	51.7	
Nonprofit	2,316	647	303	465	901	22.7	41.0	28.1	17.4	18.6	
Government	4,370	747	462	1,717	1,444	42.9	47.3	42.8	64.4	29.7	

Technical notes

The survey identified a number of mental retardation (MR) facilities that were actually units of large mental health facilities. Treating all beds and residents in such facilities as MR beds and residents would significantly inflate MR counts. The data for these facilities were, therefore, altered by (1) changing total beds to equal the larger of either beds in intermediate care facilities for the mentally retarded or total MR residents and (2) changing total residents to equal total MR residents.

The U.S. Bureau of the Census began the first questionnaire mailout on February 14, 1986. A reminder letter followed

a week later. On March 14, a second questionnaire was sent to all nonresponding facilities, and on April 4 a third mailing was sent to remaining nonrespondents.

Nearly 3,300 postmaster returns were received and reviewed to determine which respondents would be eligible for telephone and personal interview followup. Approximately 1,900 respondents were found to be out of scope, and about 1,400 were declared eligible for field followup. Field followup was completed in July 1986. The final overall response rate was 96 percent.

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