



SESSION 5

Examples of General Benchmarks to Help Make Strategic Property Planning Decisions

When applied to strategic property planning, benchmarking is basically a way to compare key information or data relevant to the specific circumstances of a religious institute to an outside standard, such as a specific percentage, or to an independent source of information, such as cost of care information available through NRRO. Because no “industry” standards exist that pertain uniquely to circumstances religious institutes frequently confront, religious institutes are left to develop their own reasonable benchmarking standards to apply to their own unique circumstances.

POTENTIAL BENCHMARK	DESCRIPTION AND EXAMPLES
<i>Percentage of occupancy of bedrooms available for member retirement</i>	<p>The occupancy percentage for bedrooms dedicated to member living is derived by dividing the current number of members residing in a given space (e.g., building on a large campus) by the capacity of that same space (i.e., the maximum number of bedrooms in the space that are appropriate and available for member living).</p> <p>Example: If 30 members reside in a building in which bedrooms are available for 50 members, then the occupancy percentage would be 30 divided by 50 or 60%.</p> <p><i>Potential reasonable benchmark:</i> <i>A decision by the institute regarding future ownership of a specific facility should be seriously considered in the year in which occupancy is projected to be less than 50%.</i></p>
<i>Cost of care for members</i>	<p>The cost of care per member is affected by many variables, including the projected number of institute members. Cost of care can be defined in several ways, including cost of care as reported annually to NRRO (if the institute reports to NRRO), cost of care as calculated and projected by TRENDS or the institute’s own method of calculation.</p> <p><i>Potential reasonable benchmark:</i> <i>A decision by the institute regarding future ownership of a specific facility should be considered in the year in which the cost of care is increased or is projected to increase by 20% or more from a base year.</i></p>

