

Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1998 Through 2004

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AANHR NOTE: Dr. Charlene Harrington is the recognized authority on nursing home care. She has established a nation-wide reputation for her studies of nursing home quality over the past ten-plus years.

Should you want to read the entire report it is available at:

http://www.nccnhr.org/public/245_1267_11874.cfm.

The following information is from Dr. Harrington's survey based on the latest OSCAR data. Note the section on staffing and the final paragraph is the summary and is highlighted in red.

A new report has been completed by the University of California, San Francisco, showing trends in U.S. nursing homes by state for the 1998 through 2004. The data are from the federal On-Line Survey and Certification System (OSCAR) reports that are completed at the time of the annual nursing home surveys by state Licensing and Certification programs for the U.S. Centers for Medicare and Medicaid Services. The highlights of the new report for all US nursing homes show that in the 1998 through 2004 period:

Facility Characteristics

- The number of nursing homes certified to take both Medicare and Medicaid residents increased by 6 percent (from 87.5 to 93.1 percent). Comment: This may increase the access of residents to Medicare and Medicaid payments.
- The number of nursing homes operated by hospitals declined by 34 percent (from 14 to 9.2 percent) of total homes. Comment: These hospital-based facilities are nursing homes that have the highest staffing and the most Medicare residents, which appear to have been impacted by the implementation of the Medicare prospective payment system in 1998.
- Residents whose care was paid by Medicare increased by 24 percent (from 9.3 to 12.2 percent of all residents), residents whose care was paid by Medicaid declined by 2.5 percent, and resident care paid by private payers and other sources declined by 5.5 percent. Comment: Medicare is assuming an increasing role in paying for nursing home residents and reducing care paid by Medicaid and private payers.
- Nursing home occupancy rates declined by 5 percent (from 87.4 percent to 82.7 percent). Comment: Declining occupancy rates are occurring at a time when the population is aging. Nursing homes with low occupancy rates may have financial problems.

Staffing

- The average number of registered nurse (RNs) hours per resident day declined by 25 percent (from 0.8 hours to 0.6 hours). The number of nursing assistants (NAs) hours increased to make up for the reduction in registered nurse hours. Comment: This shows a dramatic decline in the skill and training of staff occurred after the implementation in 1998 of the Medicare prospective payment system, which does not require nursing facilities to provide the level of care they are paid for. Studies have shown facilities with more RN staffing have higher quality of care on average.

Resident Characteristics

- The percent of residents with dementia increased by 8 percent (from 41.6 to 45 percent of residents) and the percent with other psychiatric diagnoses increased by 45 percent (from 13.2 to 19.1 percent of residents). Comment: The number of nursing home residents needing psychological and behavioral management is increasing.
- The percent of residents with limitations in activities of daily living and with special nursing needs remained fairly stable over the time period. Comment: Although most nursing home residents have a number of care needs, the need for physical assistance and special care is not substantially increasing.
- The percent of residents who were in bed most of the time declined by 43 percent and residents in physical restraints declined by 39 percent. At the same time, the percent of residents who were chair bound increased by 13 percent, who had contractures (immobile joints) increased by 26 percent, and residents with pressure sores increased by 6 percent. Comment: This shows some improvements in time spent in bed and the use of physical restraints but the increase in residents who are chair bound, have contractures, and have pressure sores is of concern because it may indicate poor quality of nursing care.

Quality of Care

- The average number of deficiencies increased by 43 percent (from 5.2 to 9.2 per facility). Comment: This suggests that the quality of compliance with federal regulations is deteriorating or that state survey agencies are issuing more deficiencies.
- At the same time, the percent of facilities that were issued serious deficiencies for causing harm or jeopardy declined by almost half (from 30 percent in 1998 to 15.5 percent in 2004). Comment: This suggests that either quality is improving or states are less likely to give serious deficiencies. Because there is little evidence of improved quality, it may be more likely that state survey agencies have changed the process of issuing serious deficiencies.
- Wide variations in the average number of deficiencies are issued by state survey agencies, ranging from 18.2 deficiencies in the District of Columbia and 15.6 in California to only 4.8 deficiencies in Wisconsin in 2004. Comment: This suggests that federal compliance with regulation varies across states and/or state enforcement varies widely. Many studies have found variations in state enforcement activities which has yet to be reduced by federal oversight.
- The violation of food sanitation regulations by 32 percent of all US nursing homes continues to be the most common problem identified by state agency surveyors. Comment: One third of all nursing homes have sanitary problems.

- Quality of care is the second most common violation of federal regulations, increasing from 17 percent to 26 percent of all US nursing homes. Comment: One fourth of all nursing homes have quality of care problems.

These trends in nursing homes should be of concern to policy makers, nursing home providers, and consumer advocates because they do not show major improvements over the past seven years. Moreover, they show wide variations in staffing, residents, quality of care and enforcement across states that have not improved.