

# LONG TERM CARE COMMUNITY COALITION

*Advancing Quality, Dignity & Justice*

## **NEW POLICY BRIEFS IDENTIFY THE IMPACT OF LOW STAFFING AND FOR-PROFIT OWNERSHIP ON NURSING HOME QUALITY & SAFETY IN NEW YORK AND BEYOND**

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**June 27, 2019** – Under the federal Nursing Home Reform Law, each resident is entitled to services that help attain and maintain his or her highest practicable physical, mental, and psychosocial well-being. Sadly, many reports over the last several years have exposed ongoing violations of residents' rights and protections, highlighting how an already vulnerable population may be subject to avoidable pain, suffering, and humiliation. Too often, such cases of resident abuse, neglect, and substandard care appear to stem from issues with the nursing home's staffing levels and ownership.

In light of growing concerns about quality, ownership, and accountability, LTCCC is publishing two new policy briefs reviewing and assessing the impact that **low staffing** and **for-profit ownership** have on important indicators of nursing home quality and safety.

[An Assessment of the Impact of Low Staffing Levels on Quality of Nursing Home Care in New York](#). This policy brief provides a review and assessment of the relationships between staffing levels in New York State (NYS) and key indicators of nursing home quality and safety. Following are some of the important observations from this report:

- **Pressure Ulcers.** As the total staffing rate increases, the pressure ulcer rate tends to decrease. Within the majority of facilities, pressure ulcer rates are high and remain high until staffing levels reach four hours per resident per day (HPRD). Between 4-6 hours HPRD, pressure ulcer rates decrease rapidly.
- **Antipsychotic Drugging.** The data indicate a negative relationship between average total staffing HPRD and antipsychotic drugging. In other words, as total staffing goes up, antipsychotic drugging goes down. This is particularly true among the majority of nursing homes with between 2-6 total care staff HPRD.
- **Substantiated Complaints.** As the average RN staffing hours per resident per day increases, the number of substantiated complaints tends to decrease at a substantial rate through about 2.2 HPRD (encompassing approximately 97.5% of all nursing homes).

[Patients vs. Profits: An Assessment of the Impact of For-Profit Ownership on Nursing Home Staffing and Safety in New York](#). This policy brief provides insights into the extent to which nursing home ownership impacts performance on key criteria related to the quality and safety of nursing homes in NYS. Following are some of the important findings from this report:

- **Staffing.** For-profit nursing homes have twenty percent lower total care staffing hours per resident per day than government/non-profit facilities. Government/non-profit

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nursing homes provide, on average, close to twice as much RN care staffing as for-profit facilities.

- **Pressure Ulcers.** On average, for-profit nursing homes have approximately a twenty percent higher rate of pressure ulcers than government/non-profit facilities.
- **Antipsychotic drugging.** Overall, for-profit nursing homes have a slightly higher average of antipsychotic drugging rates compared to government/non-profit facilities. However, for-profit chains have a lower rate than both all for-profit and government/nonprofit nursing homes.
- **Substantiated Complaints.** For-profit nursing homes have, on average, twice as many substantiated complaints as government-owned and non-profit nursing homes.
- **Fines.** For-profit nursing homes have close to a sixty percent higher average total dollar amount in fines, with for-profit chains having the highest fines compared to all for-profit and government/non-profit facilities.

LTCCC is publishing the complementary data file, [NYS Nursing Home Staffing + Ownership Data](#), providing the data utilized in these studies. The data file provides information for every facility in New York. It is searchable by facility name, county, and city. **Both policy briefs and the data file are available on LTCCC's website, [nursinghome411.org/nys-nursing-homes-2019/](https://nursinghome411.org/nys-nursing-homes-2019/).**

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## SPECIAL NYS ISSUE OF THE *ELDER JUSTICE* NEWSLETTER

In addition to the new policy briefs, LTCCC is also publishing a special issue of our [Elder Justice: What "No Harm" Really Means for Residents](#) newsletter. This issue of *Elder Justice* provides an overview of so-called "no harm" deficiencies in communities across NYS and includes examples of NYS violations that state surveyors classified as causing neither harm nor immediate jeopardy to resident health, safety, or well-being.

### Examples of no-harm deficiencies from this issue include:

- A Richmond County facility giving a resident an antipsychotic drug without psychiatric follow-up and behavioral evidence to support continued use;
- A Delaware County facility failing to secure the resident in her wheelchair, resulting in a hematoma, lack of oxygen, bodily pain, and bruising;
- A Cayuga County facility failing to follow proper procedures when administering medications to a resident through his gastrostomy tube; and
- A Kings County facility failing to adequately meet multiple standards of care, contributing to a resident's death.

**Note:** For previous issues of *Elder Justice*, please visit: <https://nursinghome411.org/news-reports/elder-justice/>.