

THE LTC JOURNAL

The Long Term Care Community Coalition

Summer 2021

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A NOTE FROM LTCCC

LTCCC’s quarterly newsletters deliver information on research, news, and reports relevant to the long-term care community and highlight useful and interesting LTCCC resources and materials. Thank you for joining us in our mission to make a positive difference in the lives of long-term care residents!

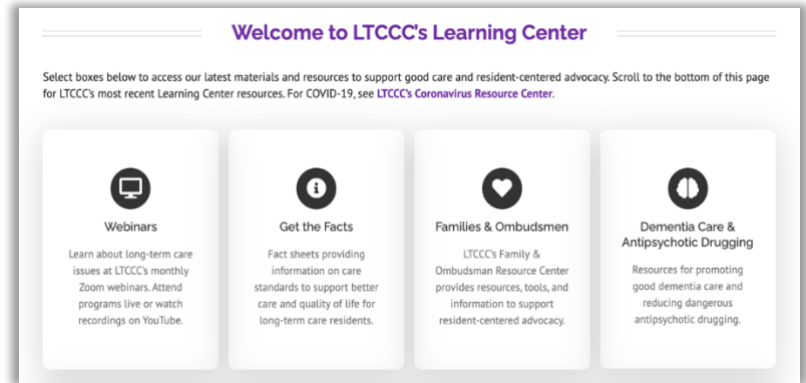


NEW AT NURSINGHOME411

LTCCC’s resources are **free** to use and **easy** to share. This section highlights resources recently published on our website, www.nursinghome411.org. **To receive updates & alerts on LTCCC’S new resources, visit www.nursinghome411.org/join/ or call 212-385-0355.**

A NEW-LOOK LEARNING CENTER

LTCCC has a new-look Learning Center with resources designed for resident-focused advocacy. The Learning Center displays types of materials, including [fact sheets](#), [dementia care tools](#), [record-keeping forms](#), and more to help residents, families, ombudsmen, and nursing home staff advocate for resident rights and protections. Learn more at nursinghome411.org/learn.



'WHY COMFORT MATTERS' AND MORE IN LTCCC'S MONTHLY WEBINARS

LTCCC conducts [free monthly Zoom webinars](#) on a variety of timely nursing home topics led by advocates and experts in long-term care. Our June webinar, "[Why Comfort Matters: Reducing Reliance on Antipsychotics for People Living with Dementia](#)," featured Tena Alonzo, a national pioneer in efforts to improve care for people with dementia. All webinars are available on [our YouTube channel](#) and on the [NursingHome411 webinar and events page](#). Visit nursinghome411.org/join/ to sign up for LTCCC alerts and invites to future programs.

THE TIME FOR CHANGE HAS COME: LTCCC'S RECOMMENDATIONS FOR CMS

The COVID-19 pandemic exposed longstanding problems in nursing homes that have remained unaddressed, even as cases dwindle. Across the United States, nursing homes continue to be understaffed, underenforced, and unaccountable for so much of the harm that they are required to prevent. The devastating outcomes for residents were not inevitable. The time for change has come.

To help meet and overcome these challenges, LTCCC published [a new policy brief with focused recommendations for addressing the longstanding gaps in nursing home quality assurance and accountability](#).

The brief focuses on steps that CMS can take to improve nursing home resident safety, dignity, & financial integrity. It highlights six policy issues that, if unaddressed, will inflict further harm on nursing home residents while burdening taxpayers with shouldering the costs of substandard or worthless services. Learn more at <https://nursinghome411.org/recs-safety-integrity/>.

LTCCC's Regulatory Policy Priorities:

- Address Pervasive and Longstanding Inadequate Staffing
- Improve Enforcement of Minimum Standards of Care
- Improve Transparency on Nursing Home Quality and Safety
- Improve Ownership and Financial Accountability
- Correct Other Operational Biases Toward Facilities
- Improve the Use of CMP Funds by the State & CMS

In addition to our specific recommendations for CMS, LTCCC has joined with other advocates in the development of a [Framework for Nursing Home Reform Post COVID-19](#) which identifies and addresses the major legal and regulatory challenges to ensuring that nursing homes are safe and humane places

to live and work. Visit <https://nursinghome411.org/joint-framework-reform/> to read the Framework and be sure to check out our home page, www.nursinghome411.org for updates on efforts to reform nursing home care.

FAMILY COUNCIL MEETINGS IN THE NURSINGHOME411 ZOOM ROOM

LTCCC is pleased to support nursing home family councils and family member settings with our **free** NursingHome411 Zoom Room. Reserve a room—no time limits!—by visiting bit.ly/fam-council.

THE NURSINGHOME411 PODCAST: A JAIL WITHIN A JAIL

LTCCC’s “NursingHome411 Podcast” features topical interviews, issue-oriented programming, and audio versions of our webinars. A recent episode, “[A Jail Within a Jail](#)” featured an interview with the co-directors of “[Fire Through Dry Grass](#),” a resident-led documentary capturing life inside a NYC nursing home during COVID. Listen to the Nursing Home 411 Podcast on our website at <https://nursinghome411.org/podcast/>, and on [Spotify](#), [Apple Podcasts](#), and [Google Podcasts](#).

We thank the [Fan Fox & Leslie R. Samuels Foundation](#) and [The New York State Health Foundation](#) for supporting the development of these resources.

NEWS & BRIEFS

OIG: CMS’S NURSING HOME STAFFING DATA FALL SHORT



Nursing home staffing levels and competency are essential to resident safety, well-being, and dignity. Unfortunately, inadequate staffing is a persistent and pervasive problem. Thus, having access to accurate information on nursing and other nursing home staff is important, since it helps consumers, regulators, and policymakers evaluate the quality and safety of nursing homes in their communities.

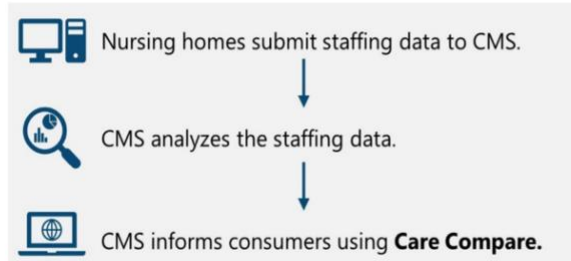
To address this issue, LTCCC and other organizations have long advocated for greater transparency about nursing home staffing. Many of our recommendations were incorporated into the Affordable Care Act (so-called “ObamaCare”) in 2010.

Since that time, CMS has taken meaningful steps to improve the public reporting of nursing home staffing data. However, a new [report by the Office of Inspector General](#) says more can be done to ensure that information is accurate and that it reaches consumers.

Key findings of this report include:

- CMS provides consumers with most – *but not all* – required information about staffing in nursing homes;
- CMS lacks a robust process for ensuring the reliability of non-nurse staffing data, such as physical therapists; and
- CMS has opportunities to better target and strengthen oversight of nursing home staffing.

Exhibit 1: CMS uses nursing home staffing data to inform consumers.



After analyzing pre-pandemic staffing data from April 1, 2018, to March 31, 2019, OIG recommended four actions to CMS:

1. Provide data to consumers on nurse staff turnover and tenure, as required by federal law;
2. Ensure the accuracy of non-nurse staffing data used on [Care Compare](#);
3. Consider residents' level of need when identifying nursing homes for weekend inspections; and
4. Take additional steps to strengthen oversight of nursing home staffing.

Note on staffing data: LTCCC publishes quarterly staffing data for every U.S. nursing home. The latest federal data from the fourth quarter of 2020 indicate that **three in every four U.S. facilities failed to meet the minimum staffing threshold** (4.10 total care staff hours per resident day (HRPD), including 0.75 RN HRPD) indicated by a landmark 2001 federal study. [Check out LTCCC's Q4 2020 staffing report](#) and download easy-to-use files for every state.

A FAST TRACK TO HOMELESS SHELTERS

Unwanted transfers or discharges from a nursing home can be devastating for residents. A new report released by New York City-based Mobilization for Justice, [Involuntary Nursing Home Discharges: A Fast Track from Nursing Homes to Homeless Shelters](#), reveals the gross unfairness and harm that can be caused by systemic failures to protect residents' rights in the nursing home discharge notice and hearing process.

Key findings include:

- The New York State Department of Health (DOH) fails to enforce standards for discharge and fails to require nursing homes to follow proper procedures;
- Discharge notices are difficult for residents to understand and, too often, omit legally required information. For many, this makes appeal requests accessible;
- Residents generally lack access to legal counsel and are often unable to participate effectively in the hearings on their own behalf;
- Administrative Law Judges too often apply erroneous legal standards; and
- The DOH fails to publish involuntary discharge decisions as required by federal law.

"[F]or far too many residents, discharge hearings have become a fast track to homeless shelters."

- Mobilization for Justice

WORLD HEALTH ORGANIZATION: WE CAN AND MUST PREVENT AGEISM

Too often, older people are seen as “uniformly frail and vulnerable” and subject to prejudice and discrimination. In response to a global campaign to combat ageism, the World Health Organization developed the [Global Report on Ageism](#) and provided a framework for action. The report’s main message is that we can and must take action to prevent ageism.

The goals of the report are to:

- Raise awareness about the global nature, scale, impact, and determinants of ageism;
- Draw attention to the need to prevent ageism; and
- Engage and increase awareness among all sectors and stakeholders to stimulate action.

The report stresses the ubiquity of ageism and offers specific recommendations combat its harmful and far-reaching consequences. As the report states, “To prevent harm, reduce injustice and foster intergenerational solidarity we need to reduce ageism against people of all ages.”

LTC RESEARCH



REDUCING HOSPITALIZATIONS FOR NURSING HOME RESIDENTS

Unnecessary hospitalizations of nursing home residents can be reduced with full-time advanced practice registered nurses (APRNs) on staff, according to a study in [The Journal of Nutrition, Health & Aging](#) following residents in 16 nursing homes over six years. The APRNs, along with guidance from multidisciplinary teams, provided early interventions for conditions such as dehydration commonly found in nursing homes. The Centers for Medicare & Medicaid Services provided the \$35 million in funding for the full-time nurse program, [according to McKnight’s](#), which first reported on the study.

WHEN IT COMES TO FRAILTY, LOOK TO PHYSICAL THERAPY

At-risk older adults receiving rehabilitative physical therapy may reap more benefits than those receiving personal care or home nurse services, according to research in [The Journal of Post-Acute and Long-Term Care Medicine](#). The study, which examined older adults enrolled in home and community-based services in Connecticut, found that those who used home care services were less likely to show improvement in frailty (a state of physical vulnerability associated with greater disability and increased healthcare utilization among older adults). Early identification of frailty may allow for enhanced care planning and better allocation of services and resources. “Having personal care or home nurse services could potentially contribute to functional dependence and frailty decline, while rehabilitative services such as physical therapy could provide targeted supports that protect against decline,” writes Tiffany Tsay, the lead author of the study, [according to McKnight’s](#).

“Having personal care or home nurse services could potentially contribute to functional dependence and frailty decline.”

- Tiffany Tsay, MPH

Note: When the new Patient-Driven Payment Model (PDPM) reimbursement system was implemented in 2019, [therapy minutes steeply declined](#).

MORE LTC RESEARCH HIGHLIGHTS

- **On nursing home finances...** “Despite statements [by nursing home industry lobbyists] suggesting severe financial problems for the nursing home industry, the data on publicly traded companies do **not** show insolvencies, bankruptcies, and severe losses of overall industry revenues” -[Journal of the American Geriatrics Society](#). [Emphasis added.]
- **On racism in long-term care...** “Addressing the impact of systemic racism on long-term care necessitates significant and transformative reforms. The first step is to acknowledge pervasive systemic racism as a root cause of the racial and ethnic disparities in settings, care quality, and outcomes” -[Journal of the American Medical Directors Association](#).
- **On reduced oversight during pandemic...** “With uncertainty about the trajectory of COVID-19, not to mention the possibility of future infectious disease outbreaks, CMS must develop contingency plans that allow in-person monitoring activities to occur in scenarios where access to facilities might be limited. As a first step, the federal government should ensure that SSAs [State Survey Agencies] have access to adequate PPE and testing, just as it should for nursing home personnel and residents” -[Journal of the American Geriatrics Society](#).
- **On antipsychotic drug data...** “CMS’s use of the MDS as the sole data source to count the number of nursing home residents using antipsychotic drugs may not always provide complete information. This means some residents’ use of antipsychotics may not have been detected by CMS’s quality measure intended to monitor these drugs. ... Further, nearly one-third of residents who were reported in the MDS as having schizophrenia—a diagnosis that excludes them from CMS’s measure of antipsychotic drug use—did not have any Medicare service claims for that diagnosis.” -[Office of Inspector General](#).
- **On quality ratings and COVID-19...** “[W]e found a consistent relationship between higher quality ratings for all domains of the Five-Star Quality Rating System and lower COVID-19 incidence, mortality, and the number of high-incidence weeks. The findings suggest that nursing homes can adopt practices associated with improved quality that are empirically associated with a lower COVID incidence” -[Journal of the American Geriatrics Society](#).

LTCCC IN THE MEDIA

LTCCC is a leading voice in media advocating for residents in nursing homes and other long-term care facilities. Following are some of the recent news reports in which LTCCC has appeared:



- [The Atlanta Journal-Constitution](#) covered a federal case against SavaSeniorCare that ended in a \$11.2 million settlement. “We applaud the DOJ for taking these important steps to hold a nursing home corporation accountable when there are serious allegations of substandard care and fraud,” said Richard J. Mollot, executive director of The Long Term Care Community Coalition.
- A [Queens Daily Eagle](#) report highlights data collected by LTCCC that show the high vacancy rates in long-term care facilities in New York that stemmed from the COVID-19 pandemic. The data show that “[n]o other county in New York saw more deaths in these facilities than Queens.”

- LTCCCC’s ombudsman program directors Judy Farrell (Tri County) and Gloria Murray (Hudson Valley) led a virtual town hall, “[The Best \(om\)Buds of Hudson Valley & Tri County](#),” where they provided important information about advocating for residents in nursing homes, assisted living, and other adult settings. The program was featured in the [Putnam County News and Recorder](#). To learn more about ombudsman volunteering opportunities, visit <http://nursinghome411.org/volunteer>.
- Mollot spoke to the [NBC NY I-Team](#) about the cruelty of nursing homes continuing heavy restrictions on visitation at this point in the pandemic. Citing a study from last year about loneliness or neglect, Mollot said, “[a]ll of that is where family members and loved ones come in.”
- The [Indy Star](#) covered [Indiana legislation, signed by the Governor on April 29, 2021](#), that provides nursing homes with wide-ranging liability protections. “It is hard to imagine anything more callous or negligent than state leaders putting the financial interests of a powerful industry over the basic safety and dignity of vulnerable nursing home residents,” said Mollot.

“It is hard to imagine anything more callous or negligent than state leaders putting the financial interests of a powerful industry over the basic safety and dignity of vulnerable nursing home residents.”

- Richard Mollot, LTCCC

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Note: This document is the work of LTCCC. It does not necessarily reflect the views of the Department of Health, nor has the Department verified the accuracy of its content.