



# While you wait...

## Virtual Meeting Tips

- Put your **questions in the Q&A** at the bottom of your Zoom screen
- Use the chat feature at the bottom of your Zoom screen for **comments** and conversation
- If you are having technical issues, please let us know in the chat and we will do our best to assist you

## New at NursingHome411

- Elder Justice Newsletter: “There’s Just No Time for This”
- Last month’s webinar: “Picking Patients for Profit: Admissions Discrimination in Nursing Homes”
- New Nursing Home Data: Star Ratings, Problem Facilities, and More!
- Calling on Sen. Schumer to Back the White House’s Proposed NH Reforms
  - NursingHome411 Podcasts on the White House Reforms
- LTCCC’s Family Council Toolkit
- Podcast: ‘I Do Not Want to Come Back Here’: Behind the Scenes of a Must-Watch VICE Documentary on the Nursing Home Industry

For materials from today’s webinar, visit  
[nursinghome411.org/webinar-staffing-recs/](https://nursinghome411.org/webinar-staffing-recs/)



## Today's Agenda

- **Current federal staffing requirements.**
- **New study on improving nursing home care from the National Academies of Science, Engineering, & Medicine (NASEM).**
- **Proposed White House reforms.**
- **Discussion on how YOU can respond to the request for public comments.**
- **Q & A.**



## Current Federal Nursing Home Staffing Standards

Richard Mollot, Long Term Care Community Coalition

[www.nursinghome411.org](http://www.nursinghome411.org)

## + The Long Term Care Community Coalition

- **LTCCC** is a nonprofit, nonpartisan organization dedicated to improving care & quality of life for the elderly & adult disabled in long term care (LTC).
- **What we do:**
  - Policy research & analysis;
  - Systems advocacy;
  - Public education;
  - Home to two local LTC Ombudsman Programs.

[www.nursinghome411.org](http://www.nursinghome411.org)

## + Background

As a result of the 1987 Nursing Home Reform Law, U.S. nursing homes are subject to a range of standards.

The purpose of these standards is to ensure that every individual receives the care and services he or she needs to **attain and maintain his or her highest practicable physical, emotional, and psycho-social well-being.**

While the federal law and its implementing regulations are strong, weak enforcement over the years has resulted in persistent, system-wide failures to ensure that residents are safe and able to live with dignity.

## + Federal “Requirements of Participation”

- Standards of care that facilities must meet in order to be eligible for public reimbursement (Medicare or Medicaid or, most often, both programs).
- Standards apply to all residents in the facility equally.
- Key principles:
  - \* Each resident is to receive care and services, based on individualized assessment and care plan, to attain and maintain “the highest practicable physical, mental, and psychosocial wellbeing.”
  - \* Regulations made clear: resident should not decline unless the decline was medically unavoidable for that resident.
  - \* Quality of life and dignity are essential components of the standards of care.

## + Regulatory Standards: Staffing

- The facility must have sufficient nursing staff *with the appropriate competencies and skills sets* to provide nursing and related services to *assure resident safety and* attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care *and considering the number, acuity and diagnoses of the facility's resident population....*
- *The facility must provide services by sufficient numbers of each of the following types of personnel on a 24-hour basis to provide nursing care to all residents in accordance with resident care plans...*
  - *[L]icensed nurses; and*
  - *Other nursing personnel, including but not limited to nurse aides.*
- *A facility must be administered in a manner that enables it to use its resources effectively and efficiently to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.*



# Regulatory Standards: Staffing

## LONG TERM CARE COMMUNITY COALITION

*Advancing Quality, Dignity & Justice*

### CONSUMER FACT SHEET: REQUIREMENTS FOR NURSING HOME CARE STAFF & ADMINISTRATION

Staffing is widely considered to be the most important factor in the quality of care provided in a nursing home. Too often, facilities fail to have sufficient staff or the staff does not have the appropriate knowledge and competencies to provide the care residents need. Thus, federal requirements for sufficient and competent staff are critical to support resident-centered advocacy to ensure that residents are safe and that they receive appropriate services. This is what we pay for and what every facility agrees to provide for all of its residents when it participates in Medicaid/Medicare.

Below are relevant standards with descriptions excerpted from the federal regulations, followed by some points for you to consider when you advocate on these issues. [Note: The brackets below provide, for reference, the applicable federal regulation (42 CFR) and the F-tag number used when a facility is cited for failing to meet the standard.]

#### I. Fundamental Requirements for Nursing Services [42 CFR 483.35 F-725]

The facility must have sufficient nursing staff *with the appropriate competencies and skills sets* to provide nursing and related services to *assure resident safety and* attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care *and considering the number, acuity and diagnoses of the facility's resident population...*

#### II. Sufficient Staffing Levels [42 CFR 483.35(a) F-725]

*The facility must provide services by sufficient numbers of each of the following types of personnel on a 24-hour basis to provide nursing care to all residents in accordance with resident care plans:*

- (i) ...licensed nurses; and (ii) Other nursing personnel, including but not limited to nurse aides.*

#### III. Nurse Aide Competency [42 CFR 483.35(d) F-728]

**General rule.** *A facility must not use any individual working in the facility as a nurse aide for more than 4 months, on a full-time basis, unless—*

*That individual is competent to provide nursing and nursing related services; and*

*That individual has completed a training and competency evaluation program, or a competency evaluation program approved by the State...; or*

*That individual has been deemed or determined competent [based on long-term experience and other federal requirements]...*

**Non-permanent employees.** *A facility must not use on a temporary, per diem, leased, or any basis other than a permanent employee any individual who does not meet the [above] requirements...*

#### Considerations for Resident-Centered Advocacy – Staffing Competency & Quantity:

1. Note the reference to the 1987 Nursing Home Reform Law's requirement that nursing home services **must** be sufficient to assure that residents attain and maintain their "highest practicable physical, mental and psychosocial well-being." This means that services must be tailored to what residents need, not what the facility wishes to provide based on its profit margins and financial goals.
2. Nursing services must be **both** sufficient and competent to fulfill the needs identified in each and **every** resident's assessment and care plan.
3. When a facility accepts a resident it is affirming that it has both enough staff to meet the care and service needs of that individual and that the staff it hires and retains are appropriately trained to carry out this promise. When a facility lacks sufficient staff to meet the needs of its residents it is breaking that promise and violating its agreement with the federal government.

#### IV. Nursing Home Administration [42 CFR 483.70 F835]

*A facility must be administered in a manner that enables it to use its resources effectively and efficiently to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.*

#### Considerations for Resident-Centered Advocacy – Administration:

Federal guidelines state that, to order for a facility to be cited for substandard administration the surveyor's "*investigation must demonstrate how the administration knew or should have known of the deficient practice and how the lack of administration involvement contributed to the deficient practice found.*"

This is important in two ways:

1. Is the administrator aware of the specific problem or concerned about which you are advocating? Depending on the nature of the problem, and how long it has continued, it may be worth bringing it to the attention of the administrator and/or senior staff.
2. Even if you do not know if the administrator has direct knowledge, there are numerous situations for which it is expected that an administrator is aware and accountable, including:
  - a. "*all alleged violations involving neglect, abuse, including injuries of unknown source, and/or misappropriation of resident property, by anyone furnishing services on behalf of the provider ...*"
  - b. *overall implementation of the facility policies/procedures, including to prohibit involuntary seclusion....*" and
  - c. any **reasonable suspicion of a crime against a resident.**

#### RESOURCES

[WWW.NURSINGHOME411.ORG](http://WWW.NURSINGHOME411.ORG). LTCCC's website includes materials on the relevant standards for nursing home care and a variety of resources on specific issues, such as dementia care, resident assessment and care planning, dignity and quality of life.





# Nursing Home Staffing Info – Updated Quarterly

**LONG TERM CARE COMMUNITY COALITION**

Who We Are | Learning Center | Data Center | Our Work | LTC in NY

## Nursing Home Staffing Q3 2021

Home » Nursing Home Data & Information » Staffing » Nursing Home Staffing Q3 2021

LTCCC's **Q3 2021 Staffing Report** provides user-friendly files for every state that contain facility-level data on: **1)** Nurse staff levels (RN, LPN, and CNA, including Admin & DON, NA in Training, Med Aide/Tech.); **2)** Important non-nursing staff levels, including administrators and activities staff; **3)** Contract workers. **4)** Summary staffing data at the state, CMS region, and national levels.

**Download your state's file by clicking the state in the first column of the table below.** Files can be modified to isolate locations and identify variables of interest. For example, a state file can be filtered and sorted to identify nursing homes in a selected county (or counties) with the highest or lowest RN staffing levels. See [LTCCC's staffing alert for Q3 2021 summary findings and other information](#).

**Q3 2021 Staffing Summary**

Total Nurse Staff HPRD	3.62
Total Direct Care Staff HPRD	3.34
Total RN HPRD	0.63
RN Care Staff HPRD (excl. Admin/DON)	0.43
Total MDS Census (Daily Avg.)	1,133,750

ALL U.S. NURSING HOME NURSE STAFF | ALL U.S. NURSING HOME NON-NURSE STAFFING | ALL U.S. NURSING HOME USE OF CONTRACT STAFF | SUMMARY DATA

Search:

State	Total Census	Total Nurse Staff HPRD	Rank: Total Nurse Staff HPRD	RN Staff HPRD	Rank: RN Staff HPRD
ALASKA	500	5.61	1	1.68	1
ALABAMA	19,399	3.68	27	0.57	40
ARKANSAS	14,870	3.86	18	0.37	49
ARIZONA	10,305	3.99	12	0.66	31
CALIFORNIA	90,442	4.17	7	0.56	41

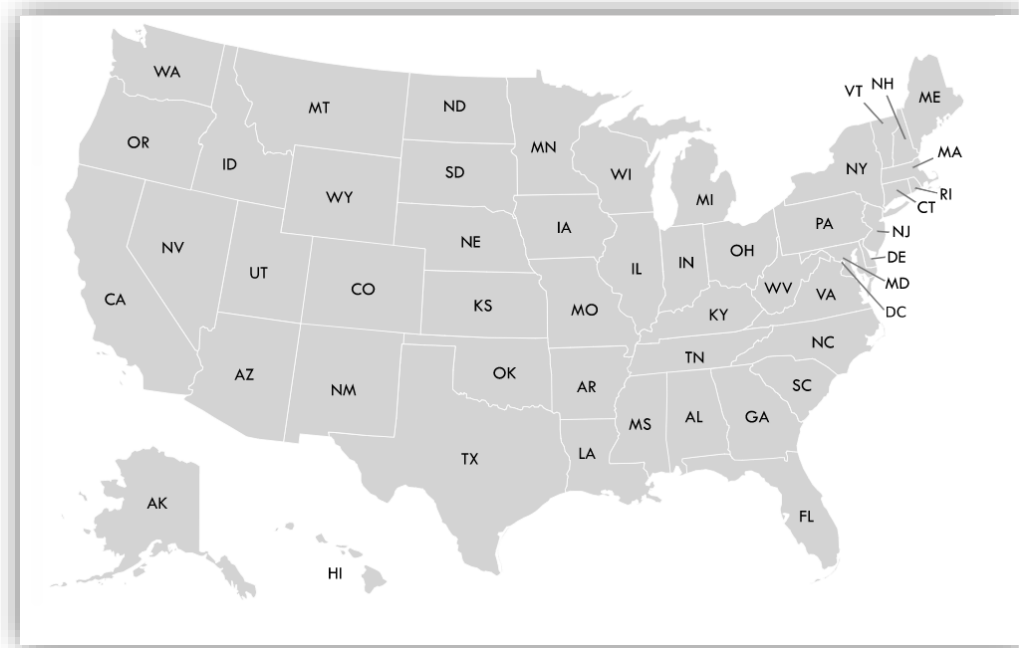
**Methodology Note**

Starting in Q1 2021, LTCCC's reporting of federal staffing data has been modified in two important ways. 1) Highlighting "Total Nurse Staff HPRD," a more expansive metric that includes all PBJ nurse staffing categories; and 2) Expanding "Total Direct Care Staff HPRD" to include Med Aide/Tech and NA TR, Med Aide/Tech



# LTCCC's state pages

- Use clickable map to find your state
- State pages contain state-specific
  - Staffing
  - Ratings
  - Ombudsman resources
  - And more...



[nursinghome411.org/states](https://nursinghome411.org/states)

# + Example: State staffing data

**Filter by County**

- Atlantic
- Bergen
- Burlington
- Camden

**Staff HPRD (Hours Per Resident Day)** is the nursing home's daily staff hours divided by its MDS census. *Example: A nursing home averaging 300 total nurse staff hours and 100 residents per day would have a 3.0 Total Nurse Staff HPRD (300/100 = 3.0).*

**Total Hours** are the nursing home's average daily staff hours in a given category for the quarter. *Example: A nursing home with 22.5 RN care staff hours provides 22.5 RN care staff hours per day.*

Select plus signs (+) above to expand data categories.

State	Provider	City	County	MDS Census	Total Nurse Staff HPRD	Total Direct Care Staff HPRD	Total RN Staff HPRD	Total RN Care Staff HPRD (excl. Admin/DON)	Total Nurse Staff Hours	Total Contract Hours	Provider Number	Category
NJ	ABIGAIL HOUSE FOR NURSING & REHABILITATION	CAMDEN	Camden	160.10	2.64	2.46	0.30	0.21	422.42	62.63	315267	Nurse
NJ	ABINGDON CARE & REHABILITATION CENTER	GREEN BROOK	Somerset	111.61	2.94	2.74	0.52	0.32	327.86	0.00	315141	Contract
NJ	ADVANCED SUBACUTE REHABILITATION CENTER AT SEWELL	SEWELL	Gloucester	104.16	4.05	3.80	0.52	0.36	421.79	69.21	315516	Non-Nurse
NJ	ALAMEDA CENTER FOR REHABILITATION AND HEALTHCARE	PERTH AMBOY	Middlesex	206.73	2.89	2.60	0.44	0.18	598.10	6.27	315180	Summary Data
NJ	ALARIS HEALTH AT BELGROVE	KEARNY	Hudson	57.39	4.65	4.26	1.51	1.12	266.77	11.58	315366	Notes & Glossary
NJ	ALARIS HEALTH AT CASTLE HILL	UNION CITY	Hudson	132.49	3.45	3.12	0.87	0.57	457.28	1.89	315344	
NJ	ALARIS HEALTH AT CEDAR GROVE	CEDAR GROVE	Essex	139.55	3.48	3.17	1.02	0.71	485.19	0.00	315357	
NJ	ALARIS HEALTH AT ESSEX	IRVINGTON	Essex	107.95	3.92	3.59	0.78	0.46	423.22	2.36	315359	
NJ	ALARIS HEALTH AT HAMILTON PARK	JERSEY CITY	Hudson	133.25	4.22	4.03	0.95	0.76	561.79	5.93	315300	
NJ	ALARIS HEALTH AT JERSEY CITY	JERSEY CITY	Hudson	107.33	3.81	3.43	0.84	0.46	409.05	7.70	315083	
NJ	ALARIS HEALTH AT KEARNY	KEARNY	Hudson	95.54	4.03	3.75	1.04	0.75	385.14	4.35	315192	
NJ	ALARIS HEALTH AT RIVERTON	RAHWAY	Union	65.87	3.84	3.28	1.17	0.63	252.95	1.74	315198	
NJ	ALARIS HEALTH AT ST MARY'S	ORANGE	Essex	135.30	4.33	4.22	1.02	0.91	585.46	28.78	315352	
NJ	ALARIS HEALTH AT THE CHATEAU	ROCHELLE PARK	Bergen	194.63	4.37	4.02	1.24	0.90	849.65	29.13	315494	
NJ	ALARIS HEALTH AT THE FOUNTAINS	SECAUCUS	Hudson	242.42	3.19	3.05	0.72	0.57	774.30	165.56	315476	
NJ	ALARIS HEALTH AT WEST ORANGE	WEST ORANGE	Essex	102.77	4.28	3.84	1.10	0.75	440.15	0.00	315449	
NJ	ALLAIRE REHAB & NURSING	FREEHOLD	Monmouth	123.47	3.85	3.57	0.46	0.18	474.96	45.66	315387	
NJ	ALLEGRIA AT THE FOUNTAINS	ATCO	Camden	52.87	3.15	2.68	0.30	0.08	166.73	63.18	315297	
NJ	ALLENDALE REHABILITATION AND HEALTHCARE CENTER	ALLENDALE	Bergen	76.89	5.06	4.80	1.01	0.82	389.41	6.26	315497	
NJ	AMBOY CARE CENTER	PERTH AMBOY	Middlesex	106.17	3.23	2.98	0.30	0.23	343.13	0.00	315305	
NJ	ANCHOR CARE AND REHABILITATION CENTER	HAZLET	Monmouth	138.41	2.30	2.11	0.57	0.38	317.96	117.22	315314	
NJ	APPLEWOOD ESTATES	FREEHOLD	Monmouth	35.17	5.44	5.09	1.21	0.86	191.43	0.00	315292	
NJ	ARBOR AT LAUREL CIRCLE, THE	BRIDGEWATER	Somerset	63.70	3.09	2.65	0.89	0.53	196.91	0.00	315445	
NJ	ARBOR GLEN CENTER	CEDAR GROVE	Essex	99.63	3.37	3.21	0.76	0.59	336.15	7.12	315036	
NJ	ARBOR RIDGE REHABILITATION AND HEALTHCARE CENTER	WAYNE	Passaic	115.46	2.86	2.48	0.68	0.35	329.94	12.48	315234	
NJ	ARISTACARE AT CEDAR OAKS	SOUTH PLAINFIELD	Middlesex	190.73	3.23	3.08	0.42	0.28	616.55	95.19	315214	
NJ	ARISTACARE AT CHERRY HILL	CHERRY HILL	Camden	102.20	2.79	2.48	0.26	0.15	285.61	19.05	315245	
NJ	ARISTACARE AT DELAIRE	LINDEN	Union	156.70	3.60	3.39	0.19	0.14	563.34	49.79	315200	
NJ	ARISTACARE AT MANCHESTER	MANCHESTER	Orange	149.00	3.12	2.91	0.28	0.15	464.51	99.96	315196	



# Find and compare staffing data for your county...

**NJ-Staffing-2021-Q3.xlsx**

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General

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A1 fx State

Filter by County

- Essex
- Gloucester
- Hudson
- Hunterdon

Staff HPRD (Hours Per Resident Day) is the nursing home's daily staff hours divided by its MDS census. Example: A nursing home averaging 300 total nurse staff hours and 100 residents per day would have a 3.0 Total Nurse Staff HPRD (300/100 = 3.0).

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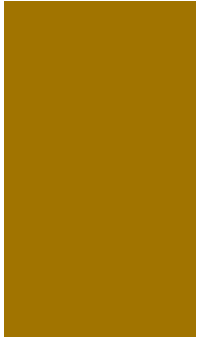
Select plus signs (+) above to expand data categories.

State	Provider	City	County	MDS Census	Total Nurse Staff HPRD	Total Direct Care Staff HPRD	Total RN Staff HPRD	Total RN Care Staff Admin/DON	Total RN Care Staff Hours	Total Nurse Staff Hours	Total Contract Hours	Pr N
25	NJ	ARBOR GLEN CENTER	CEDAR GROVE	Essex	99.63	3.37	3.21	0.76	0.59	336.15	7.12	3
58	NJ	BROADWAY HOUSE FOR CONTINUING	NEWARK	Essex	63.48	3.19	2.79	0.81	0.48	202.50	35.60	3
59	NJ	BROOKHAVEN HEALTH CARE CENTER	EAST ORANGE	Essex	111.52	3.67	3.37	0.72	0.47	409.15	0.00	3
62	NJ	CANTERBURY AT CEDAR GROVE	CEDAR GROVE	Essex	102.86	3.41	3.31	0.82	0.72	351.12	0.00	3
70	NJ	CARE ONE AT LIVINGSTON	LIVINGSTON	Essex	86.37	3.40	3.19	0.52	0.34	293.45	11.71	3
92	NJ	CLARA MAASS MEDICAL CENTER	BELLEVILLE	Essex	18.16	4.71	4.68	2.64	2.61	85.60	2.26	3
101	NJ	COMPLETE CARE AT CEDAR GROVE	CEDAR GROVE	Essex	122.60	2.98	2.52	0.60	0.21	365.83	31.73	3
118	NJ	COMPLETE CARE AT SUMMIT RIDGE	WEST ORANGE	Essex	125.75	3.76	3.39	0.52	0.24	472.48	87.26	3
138	NJ	DAUGHTERS OF ISRAEL PLEASANT VALLEY HOME	WEST ORANGE	Essex	141.64	3.25	2.98	0.74	0.47	460.81	5.22	3
154	NJ	FAMILY OF CARING HEALTHCARE AT MONTCLAIR	MONTCLAIR	Essex	51.41	4.52	4.30	1.06	0.84	232.56	16.19	3
158	NJ	FOREST HILL HEALTHCARE CENTER	NEWARK	Essex	72.66	3.66	3.58	0.69	0.60	265.83	0.00	3
165	NJ	GREEN HILL	WEST ORANGE	Essex	51.48	3.82	2.89	1.00	0.82	196.46	2.57	3
170	NJ	HACKENSACK MERIDIAN HEALTH WEST CALDWELL C	WEST CALDWELL	Essex	117.46	3.87	3.36	0.99	0.62	454.37	0.00	3
189	NJ	INGLEMOOR REHABILITATION AND CARE CENTER OF LIVING	LIVINGSTON	Essex	91.50	4.55	4.38	0.99	0.82	416.12	1.62	3
196	NJ	JOB HAINES HOME FOR AGED PEOP	BLOOMFIELD	Essex	41.43	6.36	6.07	1.65	1.46	263.46	0.00	3
212	NJ	LUTHERAN SOCIAL MINISTRIES CRANES MILL	WEST CALDWELL	Essex	27.93	3.99	3.48	1.03	0.53	111.36	16.21	3
234	NJ	MONTCLAIR CARE CENTER	MONTCLAIR	Essex	48.70	4.01	3.51	0.52	0.02	195.25	14.88	3
241	NJ	NEW COMMUNITY EXTENDED CARE FACILITY	NEWARK	Essex	40.34	7.39	7.07	1.01	0.85	297.96	1.77	3
242	NJ	NEW GROVE MANOR	EAST ORANGE	Essex	140.55	3.41	3.33	0.33	0.25	479.16	7.01	3
245	NJ	NEW VISTA NURSING & REHABILITATION CTR	NEWARK	Essex	248.66	4.13	3.67	0.91	0.54	1,026.59	0.00	3
252	NJ	PARK CRESCENT HEALTHCARE & REHABILITATION CENTER	EAST ORANGE	Essex	166.11	3.39	3.05	0.51	0.18	563.49	9.77	3
296	NJ	SINAI POST ACUTE NURSING AND REHAB CENTER	NEWARK	Essex	351.95	2.72	2.54	0.26	0.09	958.44	21.94	3
306	NJ	SPRING HILLS POST ACUTE LIVINGSTON	LIVINGSTON	Essex	60.62	5.53	4.96	1.06	0.50	335.20	0.00	3
310	NJ	ST CATHERINE OF SIENA	CALDWELL	Essex	26.99	4.05	4.05	0.69	0.69	109.31	0.00	3
317	NJ	STRATFORD MANOR REHABILITATION AND CARE CENTER	WEST ORANGE	Essex	121.38	3.13	2.87	0.39	0.20	380.49	0.18	3
342	NJ	WHITE HOUSE HLTHCR & REHAB CTR	ORANGE	Essex	136.87	3.66	3.53	0.54	0.41	501.61	35.92	3
346	NJ	WINCHESTER GARDENS HEALTH CARE CENTER	MAPLEWOOD	Essex	18.83	6.33	5.82	2.09	1.59	119.11	14.97	3
347	NJ	WINDSOR GARDENS CARE CENTER	EAST ORANGE	Essex	128.64	3.07	2.99	0.54	0.46	394.59	0.00	3

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General

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A1 State

**Filter by County**

- Cumberland
- Gloucester
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- Hunterdon

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Select plus signs (+) above to expand data categories.

17	NJ	FAMILY OF CARING HEALTHCARE AT MONTCLAIR	MONTCLAIR	Essex	51.41	Total Nurse Staff		Total RN Staff		Total RN Care Staff		16.19
						HPRD	Staff HPRD	HPRD	Admin/DON	Hours	Hours	
118	NJ	ALARIS HEALTH AT WEST ORANGE	WEST ORANGE	Essex	102.77	4.28	3.84	1.10	0.75	440.15	0.00	3.0
138	NJ	MONTCLAIR CARE CENTER	MONTCLAIR	Essex	48.70	4.01	3.51	0.52	0.02	195.25	14.88	3.0
154	NJ	GREEN HILL	WEST ORANGE	Essex	51.48	3.82	2.89	1.00	0.82	196.46	2.57	3.0
165	NJ	COMPLETE CARE AT SUMMIT RIDGE	WEST ORANGE	Essex	125.75	3.76	3.39	0.52	0.24	472.48	87.26	3.0
234	NJ	DAUGHTERS OF ISRAEL PLEASANT VALLEY HOME	WEST ORANGE	Essex	141.64	3.25	2.98	0.74	0.47	460.81	5.22	3.0
317	NJ	STRATFORD MANOR REHABILITATION AND CARE CENTER	WEST ORANGE	Essex	121.38	3.13	2.87	0.39	0.20	380.49	0.18	3.0

Ready 7 of 349 records found

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Resources



# Learning Center

Select boxes below to access our latest materials and resources to support good care and resident-centered advocacy. Scroll to the bottom of this page for LTCCC's most recent Learning Center resources. For COVID-19, see [LTCCC's Coronavirus Resource Center](#).

 <h3>Webinars</h3> <p>Learn about long-term care issues at LTCCC's monthly Zoom webinars. Attend programs live or watch recordings on YouTube.</p>	 <h3>Get the Facts</h3> <p>Fact sheets providing information on care standards to support better care and quality of life for long-term care residents.</p>	 <h3>Families &amp; Ombudsmen</h3> <p>LTCCC's Family &amp; Ombudsman Resource Center provides resources, tools, and information to support resident-centered advocacy.</p>	 <h3>Dementia Care &amp; Antipsychotic Drugging</h3> <p>Resources for promoting good dementia care and reducing dangerous antipsychotic drugging.</p>
 <h3>Podcasts</h3> <p>Listen to interviews and conversations with a variety of leading experts in long-term care.</p>	 <h3>Abuse &amp; Neglect</h3> <p>Information and resources to help identify and address nursing home resident abuse and neglect.</p>	 <h3>Resident Advocacy</h3> <p>Forms and printouts to help you advocate for residents in long-term care and promote resident rights.</p>	 <h3>Assisted Living</h3> <p>Guidebooks, reports, fact sheets, and other resources to advocate for residents in assisted living.</p>

[www.nursinghome411.org/learning-center/](http://www.nursinghome411.org/learning-center/)



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for

- Staffing and quality info for every U.S. nursing home,
- Guides & fact sheets on important resident care standards,
- Webinars and podcasts with useful information and insights; and
- Tools for resident-centered advocacy, including the Dementia Care Advocacy Toolkit.