Public Reporting of Nursing Home Quality in California

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Presentation

- History of public reporting
- Review of Existing Sites
  - CMS Medicare Nursing Home Compare
  - CHCF California Nursing Home Search
  - CANHR Nursing Home Guide
  - CDPH Web Site
- Conclusions
Numerous studies (CMS, GAO, IOM etc.) have documented poor quality and weak enforcement of nursing homes.

- Serious quality problems in some nursing homes.
- Consumers receive little or no professional guidance when making decisions about long term care.
Consumer Information Strategy

- Assist in consumers in making decisions
- Inform professionals and advocates
- Use for monitoring quality
- Encourage facilities to improve quality
- Assist payers/purchasers in contracting decisions
**CMS Measure Categories**

- Includes information on all nursing homes in the US:
  - Facility characteristics
  - Federal deficiencies
    - Quality and life safety surveys & complaints
    - Shown by scope and severity
  - Staffing hours
    - RNs, LVNs, NAs, total hours
  - Quality Measures
CMS 19 NH Quality Measures

**Long Stay Measures**
- Pressure ulcers –high and low risk
- Incontinence –low risk
- Catheter
- UTI
- Physical restraints
- Weight loss
- Flu & pneumonia vaccinations
- Bedfast or in a chair most of time
- Loss of physical functioning

**Short Stay Measures**
- Ability to move got worse
- Depression
- Pain
- Flu vaccination
- Pneumonia vaccination
- Has delirium
- Pressure sores
- Moderate to severe pain
Strengths of CMS Site

- Compares facilities with state and US averages
- Allows searches by area
- Has a guide on choosing a Nursing Home
- Updated quarterly
- In English or Spanish
Weaknesses of CMS Site

- Lacks ratings of facilities
- Staffing for 2 weeks at annual survey
- Staffing data not adjusted for casemix
- Lacks state deficiency/complaint data
- Lacks financial and ownership data
- Lacks data on resident characteristics
CMS plans a 5 star rating system to be implemented in December 2008.

Has contract with Abt to establish the rating system with an advisory committee.

Will probably include:
- Federal deficiencies
- Risk adjusted staffing data
- Selected quality measures
California Nursing Home Search

Project goals included:
- Develop a free comprehensive panel of validated nursing home performance indicators for consumers
- Present publicly available quality performance data (including ratings) for every SNF in California
- Provide contextual information for consumers - descriptive and interpretive content for use in public reporting

Web site launched in 2002  www.calnhs.org

Relaunched in 2004 with data on:
- 1,400 nursing homes that serve over 330,000 residents a year & costing $7 billion
- 834 home health agencies serving 536,000 clients
- 172 hospice programs serving 48,000 clients
Intended Target Audiences

- Decision makers (consumers, family members)
- Counselors, discharge planners
- Providers
- Purchasers
- Advocates
- Policy Makers
- Unions
- Regulators
- Media
Reporting Categories

- Provider characteristics and ownership
- Resident characteristics
- Nurse staffing: Hours, turnover, wages
- Federal & state deficiencies, complaints and enforcement actions (5 years of data)
- Clinical quality – 9 measures
- Financial indicators: expenditures, charges, payer sources, financial status
Data Sources - 10 Public Data Sets

- Licensing and Certification
  - Electronic Licensing Management facility & citation data
- OSHPD
  - Annual Utilization Survey for Hospitals & LTC facilities
  - Cost Reports for Hospitals and LTC facilities
- CMS
  - ASPEN Data (federal deficiencies & complaints)
  - OSCAR data
  - RUGS data
  - MDS Quality Indicator data
- Accreditation data
Rating System: Staffing

🌟🌟🌟 Facilities that meet 4.1-4.5 total staffing hours per resident day, adjusted to a higher level for higher resident casemix

🌟🌟 Facilities with average staffing

🌟 Facilities with staffing below the 3.2 hours per resident day state law.
Star System Based on Research Findings

- Facilities with 4.1+ hours per resident day (hprd) had better nursing care processes (feeding assistance, helping residents out of bed, incontinence care)

- There is a staffing threshold (4.1 hprd) before differences in care processes can be identified

- Staffing levels below 4.1 hprd total have substantial probability of jeopardizing the health and safety of residents

Source: Schnelle et al., “Relationship of Nursing Home Staffing to Quality of Care” Health Services Research (2004)
Rating System: Deficiencies and Citations

⭐⭐⭐ Facilities that have no or minimal federal deficiencies or state citations and are in substantial compliance

⭐⭐ Facilities have deficiencies that have not caused harm or jeopardy or minor state citations

⭐ Facilities with deficiencies that caused harm or jeopardy or the potential for harm or jeopardy or serious state citations
Nursing Home Financial Issues

- Conducted studies of revenues, expenditures, profit margins, and financial stability
- Identified financial indictors as important to consumers
- Website rates facilities on direct and indirect care expenditures, wages, and benefits
Rating System: Other Measures

- Other Measures Include:
  - Retention and turnover
  - Quality of Life and Quality of Care
  - Complaints
  - Financial Measures (direct and indirect care expenses, wages, benefits)

- Scoring system based on relative performance compared with other facilities in California (at, above, below average)
Your Guide to Long-Term Care in California

Start Here

I Am Searching For:
Nursing Homes
- Home Health Care
- Hospice Services
- Congregate Living Health
- Residential Care Facilities
- Continuing Care Retirement
- Adult Day Health Care
- Adult Day Care

Located In:
City, County, Or Zip Code

Search

You can also try More Search Options for special services and payment options.

Evaluate Your Needs

Decide which type of care fits your needs.

- Type of Care Needed
- Quality of Care
- Personal Concerns

Explore Your Options

Get more information about the services available to you.

- Nursing Homes
- Home Health Care
- Hospice Services
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Staffing</th>
<th>Quality of Facility</th>
<th>Quality of Care</th>
<th>Finances and Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beverly Living Center - Bakersfield</td>
<td>★★★</td>
<td>★★</td>
<td>★★★★</td>
<td>★</td>
</tr>
<tr>
<td>Californian Care Center</td>
<td>★★</td>
<td>★</td>
<td>★★★★</td>
<td>★★★★</td>
</tr>
<tr>
<td>Crestwood Behavioral Health Center</td>
<td>NA</td>
<td>★★★★</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Emmanuel Convalescent - San Joaquin</td>
<td>★★</td>
<td>★★★★</td>
<td>★★</td>
<td>★★★★</td>
</tr>
<tr>
<td>Evergreen Bakersfield Healthcare Center</td>
<td>★★</td>
<td>★★★★</td>
<td>★★</td>
<td>★★★</td>
</tr>
<tr>
<td>Glenwood Gardens SNE</td>
<td>★★</td>
<td>★★</td>
<td>★★★★</td>
<td>★★★★</td>
</tr>
<tr>
<td>LifeHouse Parkview</td>
<td>★★</td>
<td>★★</td>
<td>★★★★</td>
<td>★★★★</td>
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<tr>
<td>Parkview Julian Convalescent</td>
<td>★★</td>
<td>★★★★</td>
<td>★★</td>
<td>★★★★</td>
</tr>
<tr>
<td>Pleasant Care Convalescent of Bakersfield</td>
<td>★★★★★</td>
<td>★★</td>
<td>★★★★</td>
<td>★★★★</td>
</tr>
<tr>
<td>Rosewood Health Facility</td>
<td>★★★</td>
<td>★★</td>
<td>★★★★</td>
<td>★★★★</td>
</tr>
<tr>
<td>Valley Convalescent Hospital</td>
<td>★★</td>
<td>★★</td>
<td>NA</td>
<td>★</td>
</tr>
</tbody>
</table>
Pleasant Care Convalescent of Bakersfield
730 34th Street  
Bakersfield, CA 93301  
661. 327.7687  
Administrator:  Mary Sue Franklin

This page shows a summary of key ratings for this facility. Use the drop-down menu to learn about staffing, quality of facility, quality of care, finances and costs, other facility characteristics, and types of residents.

<table>
<thead>
<tr>
<th>VIEW PROFILE BASED ON:</th>
<th>Summary</th>
</tr>
</thead>
</table>
| **Staffing**  
Reporting Period: 06/01/2006 - 05/31/2006 | ★★★★ |
| Nursing staff | ★★★ |
| Nursing staff turnover | ★★★★ |
| Nursing staff wages | ★★★ |
| **Quality of Facility**  
Last Survey Date: 07/02/2007 | ★★★ |
| Federal deficiencies | ★ |
| State deficiencies | ★★★ |
| Complaints | ★ |
| **Quality of Care**  
(06/25/2007) | ★★★ |
| Quality of life | ★★★ |
| Clinical care | ★★★★ |
| **Finances and Costs**  
(Reporting Period: 06/01/2006 - 05/31/2006) | ★★★ |
| Direct care expenditures | ★★★ |
| Other care expenditures | ★ |
Comparison of calnhs.org vs. CMS’ Nursing Home Compare

- Is California focused (no out-of-state data)
- Includes three star ratings
- Includes federal and state deficiency data
- Staffing data is risk adjusted
- Includes hospice rating
- Includes information on congregate living, residential care, adult day health
- Not available in Spanish
Future Plans

- Rename: CalSeniorCareGuide.org
- Redesign for consumer audience
- Revise the search process on the website
- Change to a 5 category rating system (similar to CMS)
- Continue quarterly updates of website
- Expand consumer support information
- Launch additional marketing, education, and outreach efforts
California Advocates for NH Reform (www.canhr.org) – Est 1983

- How to choose a nursing home
- Nursing home regulations
- Residential care/assisted living
- Alternatives
- Medi-Cal
- Filing a complaint
- Links
- Spanish and Chinese
CANHR (www.nursinghomeguide.org)

- Provider characteristics and ownership
  - Detailed ownership history
- Services available
- Resident characteristics
- Staffing data – all types of staff
  - Hours and wages
- Federal & state deficiencies, complaints and enforcement actions
  - Five years of data
  - Detailed descriptions of citations
- Financial indicators
  - Expenditures by categories and payer sources
California Licensing and Certification

- www.cdph.ca.gov/programs/Pages/LnC.aspx & hfcis.cdph.ca.gov/default.aspx
- SNFs, ICFs, ICF-DD, ICF-DDH, ICF-DDN, CLHF, PDHRCF, Hospitals, Acute Psych
- Provider characteristics and Ownership history
- Services approved
- Federal & state deficiencies (5 years)
- Complaints and incident reports
- Enforcement actions
Impact of Consumer Information

- Assist in consumers in making decisions
  - Calnhs.org has 100,000+ visitors per month
- Inform professionals and advocates
  - Informal positive feedback but not wide spread use
- Assist payers/purchasers in contracting decisions
  - Payers/purchasers do use quality indicators
- Encourage facilities to improve quality
Nursing Hours per Resident Day in CA Nursing Facilities, 2001-2006
Nursing Staffing Turnover in CA Nursing Facilities, 2001-2006

Percent Turnover

2001 2002 2003 2004 2005 2006

NA Nursing

90.87 76.73 80.79 68.67 64.63 67.68
Percent of CA Nursing Facilities in Federal Compliance, 2001-2006

- **2001**: 16% Serious Violation, 63% Non-Compliance, 22% Substantial Compliance
- **2002**: 16% Serious Violation, 60% Non-Compliance, 25% Substantial Compliance
- **2003**: 8% Serious Violation, 72% Non-Compliance, 20% Substantial Compliance
- **2004**: 10% Serious Violation, 73% Non-Compliance, 17% Substantial Compliance
- **2005**: 14% Serious Violation, 73% Non-Compliance, 13% Substantial Compliance
- **2006**: 22% Serious Violation, 66% Non-Compliance, 12% Substantial Compliance
Two quality measures improved (restraints and pain), 1 got worse (pressure sores) and 2 had no improvement (Mukamel et al., 2008, HSR)

Providers report efforts to improve quality measures (Mukamel et al., 2007)

Eight QMs improved and 6 QMs got worse (Castle & Engberg 2007)
Issues

- Website measures primarily rely on available secondary data.
- Reliability of staffing and quality measures is problematic.
- Risk adjustment of quality measures needs improvement.
- Web access to LTC information is expanding rapidly along with consumer use.
- LTC websites have a wide variety of users.
- Use by hospital discharge planners and professionals is limited.
**Consumer Information Recommendations**

- Expand and improve website information
- Improve the reliability of the data
- Educate the public to use website quality information
- Educate discharge planners and professionals to use available information