



For Immediate Release
Thursday, Oct. 29, 2009

Grassley Advances Improvements to Nursing Home Quality of Care

WASHINGTON – At Sen. Chuck Grassley’s urging, the health care reform legislation that came out of the Finance Committee earlier this month and is advancing in the Senate contains a series of provisions Grassley co-authored to improve the quality of care in nursing homes.

“Improving the quality of care in nursing homes requires constant oversight and action,” Grassley said. “It’s something I’ve been committed to for a long time. There’s been good progress, but there’s more work to do. More transparency, better enforcement and improved staff training will help. These legislative changes will improve the quality of life of nursing home residents and empower the family members and loved ones of those residents.”

Grassley is the co-author, along with Sen. Herb Kohl, of legislation to build on recent improvements in nursing home quality. Grassley succeeded in having the legislation included in the major health care reform bill advancing in the Senate, starting in the Committee on Finance, where he is ranking member and former chairman. The Finance Committee has jurisdiction over the federal health care programs that cover nursing home care.

Grassley said the nursing home provisions included in the health care reform legislation include key improvements such as enabling state and federal regulators to identify all persons and entities with a significant ownership interest in a nursing home, or that play an important role in the management, financing and operation of a home.

“Too often, bad actors hide under layers of other entities designed to cloak and confuse,” Grassley said. “This leaves residents and their families without clear information about who is ultimately responsible for ensuring that a resident is consistently provided with high quality care.”

Another key improvement provides for improved reporting of real-time nurse staffing information so that accurate comparisons can be made across nursing homes.

“Nursing homes differ widely in terms of the number of specialized staff available to residents as well as the number of registered nurses and certified nursing assistants who provide much of the hands-on care,” Grassley said. “How a nursing home is staffed can greatly affect the care it provides, especially when dealing with complex conditions such as Alzheimer’s. This provision requires better tracking of this information and requires that this information is available to prospective residents and their families.”

Grassley focused intently on nursing home quality of care as chairman of the Special Committee on Aging, a standing committee that conducts oversight of issues related to the health, safety, and financial well-being of older Americans. Grassley held a two-day hearing in July 1998 that received national attention for its spotlight of abuse and neglect in nursing homes. He oversaw the implementation of the federal government’s Nursing Home Quality Initiative, launched in response to the issues raised by Grassley’s hearing and oversight work. He held a series of subsequent hearings in the Aging Committee and then the Finance Committee to focus on needed improvements and findings from the Government Accountability Office, with which he has worked extensively to monitor the quality of nursing home care.

“I’ll continue to work to make sure America’s nursing home residents receive the safe and quality care they deserve,” Grassley said. “Increasing transparency, improving enforcement tools, and strengthening training requirements will do a lot of good for this vulnerable population.”

The Grassley-Kohl provisions included in the health care reform bill would:

- Enable state and federal regulators to identify all persons and entities with a significant ownership interest in a nursing home, or that play an important role in the management, financing and operation of a home.
- Strengthen accountability requirements for individual facilities and nursing home chains by requiring them to develop compliance and ethics plans to guard against civil, criminal and administrative violations.
- Provide for improved reporting of real-time nurse staffing information so that accurate comparisons can be made across nursing homes.
- Require nursing homes to develop internal quality assurance and performance improvement standards to monitor and improve the quality of care provided to residents.
- Improve and expand the website “Nursing Home Compare” to include information about and links to recent health and safety inspection reports. This builds on ongoing efforts to make this resource as consumer friendly as possible.
- Require CMS to develop a standardized complaint form so that residents and families can readily voice their concerns. Also bring uniformity and structure to the complaint process by requiring states to establish organized processes that include complainant notification and response deadlines.

- Provide transparency on a nursing home’s expenditures on direct care by modifying skilled nursing facility cost reports to require that they separately account for staffing.
- Authorize the Secretary to reduce civil monetary penalties for those facilities that self-report health deficiencies, in cases where the violations do not result in actual harm, immediate jeopardy, or the death of a resident.
- Equip the Secretary with tools to address corporate-level quality and safety problems in nursing home chains by providing the Department of Health and Human Services with the authority to develop a national independent monitor pilot program to analyze and address chain-wide problems.
- Provide greater protection to residents of nursing homes that voluntarily close by requiring facilities to provide ample advance notice of closure as well as the development of a transfer plan, taking into account resident preference, which is submitted to the state.
- Authorize demonstration projects for nursing home “culture change” and for improving resident care through health information technology.
- Improve staff training to include dementia management and abuse prevention training as part of pre-employment training.