WEBINAR

TREATMENT AND WORKPLACE CONDITIONS FOR DIRECT CARE WORKERS

A Discussion with State Ombudsmen and **Program Representatives**











About Today's Discussion

 Please do not unmute your line unless you raise your hand, and we call on you.



 You can submit questions in the chat at anytime and we will try to address them during the discussion.



 We will provide Certificates of Participation for those that joined using their own registration and stayed on for at least 30 minutes.
 https://ltcombudsman.org/omb_support/training/certificates



 Please complete the evaluation using the link provided in chat at the end of the discussion.

Speakers



Adam Mosey, Director of Aging Policy, ADvancing States



Lori Smetanka, Executive Director, National Consumer Voice for Quality Long-Term Care (Consumer Voice)

Agenda

Introduction

Background

Consumer Voice

Discussion

Closing



Our Vision:

Older adults, individuals with disabilities, and their caregivers will have access to the resources they need to live well & thrive in every community.

Our Mission:

To design, improve, and sustain state systems delivering long-term services and supports for people who are older or have a disability, and their caregivers.





What is ConnectToCareJobs.com?

- A national website that provides individuals looking for jobs with an easy way to connect with potential employees
- Uses a matching algorithm to pair licensed and/or trained workers with employers that need their specific skills
- Expanding scope of CTCJ to include worker registry, credentialling, training and more!















Provides:



Employers with a way to fill critical staffing gaps quickly



Jobseekers with an easy way to connect with employers nationwide

Concept: Similar to the dating app Match.com, a facility enters their staffing needs into a portal and the website matches by people who have the skills.



States with actionable data about the workforce needs

Introduction

- Genesis of today's call was initiated by two SLTCOs
- This is an issue both in facilities but also in the community
- All sectors of the economy are struggling to find workers but health care/LTSS have been hit especially hard





Background

Why We're Here

- Trend #1 Health care worker shortages, especially for direct care workers (DCWs)
 - Nearly 20% of health care workers quit their jobs during the pandemic, exacerbating existing trends
 - US could face shortage of 124k physicians by 2034
 - Could also see deficit of 200-450k RNs by 2025



Why We're Here

- Trend #2: Health care workers, especially those in hospitals and LTC facilities, are at increased risk of workplace violence
 - Occurrences of serious workplace violence were four times more common in health care settings than in private industry
 - In 2015, nursing and residential care facilities were among the industries with the highest prevalence of nonfatal occupational violence
 - NHs with special units for residents with Alzheimer's were at an elevated risk

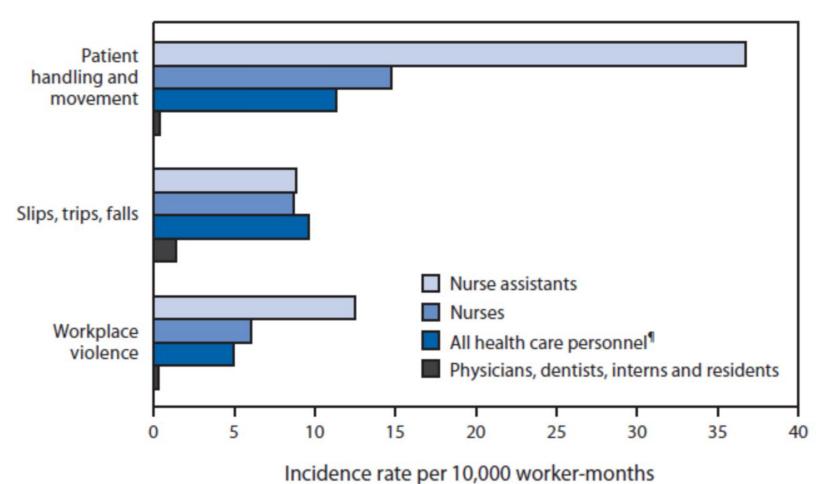


What the Research Says

- Different situations staff may encounter
 - Assaults on staff, resident-to-resident
 mistreatment, theft/exploitation, armed intruder
- Significant occupational hazards
 - Biological/infectious, chemical, environmechanical, physical, and psychosocial



What the Research Says Cont.







What the Research Says Cont.

CNAs are 23x more likely to experience aggressive behavior working in LTC facilities than in other settings

Possible Solutions

- Increased staffing levels
- Better administrative support
- Comprehensive training to identify the root cause(s) and provide individualized care
- Mental health resources to support DCWs
- Creating an environment where workers feel they can speak up



Lori Smetanka, Executive Director, Consumer Voice



 Advocates for policies that support quality care and quality of life

- Empowers and educates consumers
- Trains and supports advocates
- Promotes the critical role of staff and best practices





Administration's Proposed Reforms

- Support Nursing Homes That Provide Safe, Adequate, Dignified Care
- 2. Enhance Accountability and Oversight
- 3. Increase Transparency
- 4. Create Pathways to Good-Paying Jobs
- Ensure Pandemic and Emergency Preparedness in Nursing Homes

4/27/22, 1:26 PM

FACT SHEET: Protecting Seniors by Improving Safety and Quality of Care in the Nation's Nursing Homes | The White House

BRIEFING ROOM

FACT SHEET: Protecting Seniors by Improving Safety and Quality of Care in the Nation's Nursing Homes

FEBRUARY 28, 2022 • STATEMENTS AND RELEASES

All people deserve to be treated with dignity and respect and to have access to quality medical care. The President is committed to ensuring that all Americans, including older Americans and people with disabilities, live in a society that is accessible, inclusive, and equitable. To accomplish that goal, the Administration continues to be committed to home- and community-based services and ensuring that in no case should a health care facility be causing a patient harm. The President believes we must improve the quality of our nursing homes so that seniors, people with disabilities, and others living in nursing homes get the reliable, high-quality care they deserve. That's why he is announcing a set of reforms—developed by and implemented through the Department of Health and Human Services (HHS)—that will improve the safety and quality of nursing home care, hold nursing homes accountable for the care they provide, and make the quality of care and facility ownership more transparent so that potential residents and their loved ones can make informed decisions about care.

To do this, the reforms the President is announcing will ensure that:

- every nursing home provides a sufficient number of staff who are adequately trained to provide high-quality care;
- poorly performing nursing homes are held accountable for improper and unsafe care and immediately improve their services or are cut off from taxpayer dollars; and
- the public has better information about nursing home conditions so that they can find the best available options.

The pandemic has highlighted the tragic impact of substandard conditions at nursing homes, which are home to many of our most at-risk community members. More than 1.4 million people live in over 15,500 Medicare- and Medicaid-certified nursing homes across the nation. In the past two years, more than 200,000 residents and staff in nursing homes have died from COVID-19—nearly a quarter of all COVID-19 deaths in the United States.

https://www.whitehouse.gov/briefing-room/statements-releases/2022/02/28/fact-sheet-protecting-seniors-and-people-with-disabilities-by-improving-saf... 1/8



Minimum staffing standard

Promote single occupancy rooms

Reduce Unnecessary Medications

Fund inspection activities

Expand financial penalties and other enforcement actions

Support state efforts around staffing and workforce

QIO support for nursing homes

Transparency of ownership and finances

Enhance nursing home compare

Examine private equity

Ensure affordable nurse aide training

Emergency preparedness and pandemic requirements

Increase accountability for chain owners

COVID testing, vaccines, boosters in nursing homes

On-site infection preventionist requirements

Launch national career pathways campaign

Integrate lessons learned using equity lens

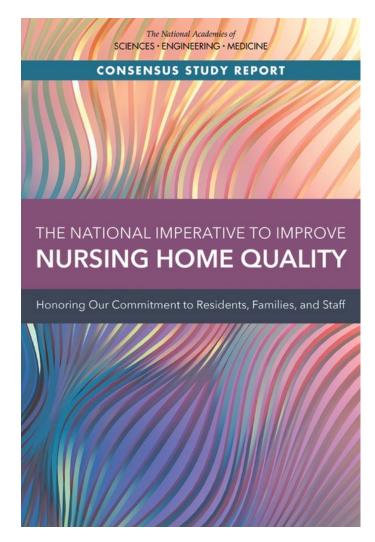


Administration Staffing Reforms

- Staffing Study
- Minimum Staffing Standard
- Supporting Staff
 - Affordable Training
 - Support States' Efforts
 - National Nursing Career Pathways Campaign







https://www.nationalacademies.org/our-work/the-quality-of-care-in-nursing-homes

"immediate action is necessary to initiate fundamental change"

Calls for:

Minimum staffing standards • education and competency requirements • increased transparency and accountability for finances, operations, ownership • a specific percentage of payments designated for direct care • increased funding for the LTCOP • enforcement on owners with poor quality care across facilities • a health equity strategy for nursing homes • advance, empower workers



NASEM Staffing Recommendations

Minimum Staffing Standard

24 Hour Registered Nurse

Qualified Full-Time Social Worker

Qualified Infection Control Preventionist



NASEM Cont'd-Investment in Staff

Wages and Benefits

Training

Career Advancement

Empowerment of CNAs



NPRM PPS, Value-Based Purchasing; Request For Information on Revising the Requirements for LTCFs to Establish Mandatory Minimum Staffing Requirements

Federal Register, Vol. 87, No. 73, Friday, April 15, 2022, pp.22720

https://www.govinfo.gov/content/pkg/FR-2022-04-15/pdf/2022-07906.pdf

Submit Comments:

https://www.regulations.gov

Refer to file code CMS-1765-P

Federal Register / Vol. 87, No. 73 / Friday, April 15, 2022 / Proposed Rules

Medicaid Services (CMS). Department of Health and Human Services (HHS) ACTION: Proposed rule; request for

update: Payment rates; forecast error (PDPM) parity adjustment, the SNF It also proposes to establish a permanent related to long-term care (LTC) facilities. CMS requests comments on these proposals as well as on related subjects and announces the application of a risk adjustment for the SNF Readmission Measure for COVID-19 beginning in FY

DATES: To be assured consideration

Comments, including mass comment

submissions, must be submitted in one choose only one of the ways listed):

to https://www.regulations.gov. Follow written comments to the following address ONLY: Centers for Medicare & CMS-1765-P, P.O. Box 8016, Baltimore,

Please allow sufficient time for mailed

following address ONLY: Centers for Medicare & Medicaid Services,

Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850. For information on viewing public comments, see the beginning of the SUPPLEMENTARY INFORMATION section. COD CULTUCE INCODMATION CONTACT:

PDPM@cms.hhs.gov for issues related to Heidi Magladry (410) 786–6034 for nursing facility quality reporting program. Alexandre Laberge, (410) 786–8625,

for information related to the skilled nursing facility value-based purchasing

SUPPLEMENTARY INFORMATION: Inspection of Public Comments: All comments received before the close of the comment period are available for viewing by the public, including any personally identifiable or confidential business information that is included in received before the close of the comment period on the following www.regulations.gov. Follow the search public comments, CMS will not post on institutions or suggest that the individual will take actions to harm the individual. CMS continues to encourage comments. We will post acceptable comments from multiple unique commenters even if the content is

Availability of Certain Tables Exclusively Through the Internet on the CMS Website

As discussed in the FY 2014 SNF PPS forth the Wage Index for Urban Areas Rased on CRSA Labor Market Areas and the Wage Index Based on CBSA Labor Market Areas for Rural Areas are no longer published in the Federal Register. Instead, these tables are internet on the CMS website. The wage index tables for this proposed rule car home page, at https://www.cms.gov/ Medicare/Medicare-Fee-for-Service-Payment/SNFPPS/WageIndex.html Readers who experience any man

wage index tables should contact Kia Burwell at (410) 786–7816. To assist readers in referencing sections contained in this docu

I. Executive Summary

- L Executive Summary
 A. Purposs
 B. Summary of Major Provisions
 C. Summary of Cost and Benefits
 D. Advancing Bealth Information Exchange
 II. Background on SNP PPS
 D. B. Initial Transition for the SNP PPS
 C. Required Annual Rate Updates
 III. Proposed SNP PPS Rate Setting
 Methodology and FY 2023 Update

- Methodology and FY 2023 Updat A. Fodoral Base Rates B. SNF Market Basket Update
- C. Case-Mix Adjustment
- Mage Index Adjustment
 SNF Value-Based Purchasing Progr
 F. Adjusted Rate Computation Examp
 J. Additional Aspects of the SNF PPS
 A. SNF Level of Care—Administrative
 Pressumption
- C. Payment for SNF-Lovel Swing-Boo
- Services

 D. Revisions to the Regulation Text V. Other SNF PPS Issues
- A. Proposed Permanent Cap on Wage Ind
- D. Request for Information: Infection

- Isolation
 V. Skillod Nursing Facility Quality
 Raporting Program (SNP QRP)
 A. Background and Statutory Authority
 B. General Considerations Used for the
 Selection of Measures for the SNP QRP
 C. SNF QRP Quality Measure Proposals
 Beginning With the FY 2025 SNF QRP
 D. SNF QRP Quality Measures Under

- Submission Under the SNE ORP

- B. SNF VBP Program Measures
 C. SNF VBP Performance Period and
 Baseline Period Proposals
 D. Performance Standards
- SNF VRP Porformanco Scor

COMMENTS DUE: JUNE 10, 2022



Webinar – May 25, 3:00pm ET

- Review and discuss the issues where feedback is requested in the CMS Request for Information
- For national, state, local advocates on submitting comments to CMS

Register at:

https://us02web.zoom.us/webinar/register/WN cPBrsGHYSDCZ5eZrfO7cng

Sign up with Consumer Voice's <u>Action Network</u> to receive the registration link

Opportunities for Advocacy

- Support the Need for Reforms, including Staffing Requirements
 - Why are Reforms Needed?
 - Impact on Residents
 - Personal Stories
 - How to Share the Info:
 - Letters to the Editor
 - Social Media
 - Blogs
 - Letters/Emails to Members of Congress

https://theconsumervoice.org/events/march-forth-together



Consumer Voice Resources

https://theconsumervoice.org/issues/issue details/staffing





https://theconsumervoice.org/pursuingquality





Thank you!

www.theconsumervoice.org

Connect with us:







Discussion

Discussion Questions

- How does this research compare with your experience in LTC facilities?
- Do you have an example of a LTC facility creating an environment that supports the retention of DCWs?
- What observations can you share regarding how workplace issues for DCWs impacts resident care?



Questions?







THANK YOU!

Adam Mosey
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