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## The National Imperative to Improve Nursing Home Quality: Honoring Our Commitment to Residents, Families, and Staff

Nursing homes play a unique dual role in the long-term care continuum, serving as a place where people receive needed health care and a place they call home.

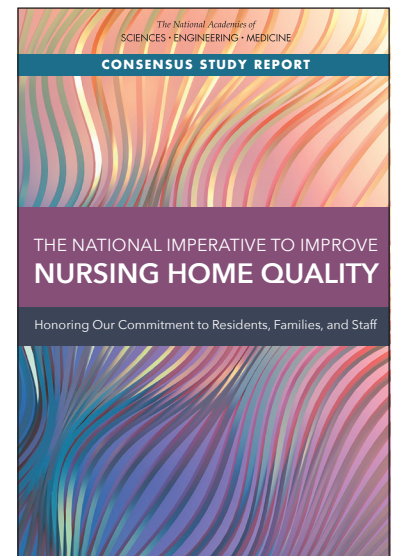
The 1986 Institute of Medicine report *Improving the Quality of Care in Nursing Homes* identified a range of challenges to the quality of care in nursing homes. While many important improvements have been made since the enactment of the Omnibus Budget Reconciliation Act of 1987, the provision of high-quality comprehensive care to all nursing home residents remains an elusive goal.

Ineffective responses to the complex challenges of nursing home care have resulted in a system that often fails to ensure the well-being and safety of nursing home residents—an unacceptable situation, documented by research, that has long been apparent to those who research, work in, or have loved ones in nursing homes.

The devastating impact of the COVID-19 pandemic on nursing home residents and staff has renewed attention to the long-standing weaknesses that impede the provision of high-quality nursing home care. In this context, with support from a coalition of sponsors, the National Academies of Sciences, Engineering, and Medicine formed the Committee on the Quality of Care in Nursing Homes to examine how the United States delivers, finances, regulates, and measures the quality of nursing home care.

The committee's investigation led to several key conclusions about the current state of nursing home care, which does not align with the committee's vision of high-quality nursing home care (see Box 1).

1. The way in which the United States finances, delivers, and regulates care in nursing home settings is ineffective, inefficient, fragmented, and unsustainable.
2. Immediate action to initiate fundamental change is necessary.
3. Federal and state governments, nursing homes, providers, payers, researchers, and others need to make clear a shared commitment to the care of nursing home residents.



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4. Extreme care needs to be taken to ensure that quality improvement initiatives are implemented using strategies that do not exacerbate disparities in resources, quality of care, or resident outcomes.
5. High-quality research is needed to advance the quality of care in nursing homes.
6. The nursing home sector has suffered for many decades from underinvestment in ensuring the quality of care in nursing homes and a lack of accountability in how resources are allocated.
7. All relevant federal agencies need to have authority and resources from the U.S. Congress to implement the recommendations of this report.

The committee identified seven broad goals, which provide the overarching framework for a comprehensive approach to improving the quality of care in nursing homes. The committee developed an interrelated set of recommendations to achieve each of these goals.

### **GOAL ONE: DELIVER COMPREHENSIVE, PERSON-CENTERED, EQUITABLE CARE THAT ENSURES THE HEALTH, QUALITY OF LIFE, AND SAFETY OF NURSING HOME RESIDENTS; PROMOTES RESIDENT AUTONOMY; AND MANAGES RISKS**

Attention to quality improvement in nursing home care delivery across a wide range of areas is required, from ensuring that federally mandated, person-centered care is a reality for all nursing home residents to ensuring resident safety in the event of a public health emergency or natural disaster. Moreover, nursing homes should be redesigned as smaller, more home-like environments with single occupancy rooms and private bathrooms to improve resident safety and enhance quality of life.

### **GOAL TWO: ENSURE A WELL-PREPARED, EMPOWERED, AND APPROPRIATELY COMPENSATED WORKFORCE**

The committee recommends transforming the professionalism of the nursing home workforce through a range of actions. Specifically:

- Nursing home owners and administrators should ensure competitive wage and benefits.
- The U.S. Department of Health and Human Services (HHS) should immediately implement minimum staffing standards and determine minimum and optimum staffing standards for all direct care staff.
- The Centers for Medicare & Medicaid Services (CMS) should establish minimum education and national competency requirements.
- Nursing homes and state and federal governments should advance the role of and empower certified nursing assistants (CNAs) by providing free training and career advancement opportunities and by funding training grants and models of care to expand the role of the CNA.
- Nursing homes should support family caregivers to the extent that residents desire their chosen family members to be involved.

### **GOAL THREE: INCREASE TRANSPARENCY AND ACCOUNTABILITY OF FINANCES, OPERATIONS, AND OWNERSHIP**

The committee calls for HHS to:

- Collect, audit, and make publicly available detailed facility-level data on the finances, operations, and ownership of all nursing homes; and

#### **BOX 1 Vision of High-Quality Nursing Home Care**

*Nursing home residents receive care in a safe environment that honors their values and preferences, addresses goals of care, promotes equity, and assesses benefits and risks of care and treatments.*

To achieve this vision, nursing homes should deliver comprehensive, person-centered, interdisciplinary, team-based care that meets or exceeds established quality standards and supports strong connections to health care and social services systems and resources, family, friends, and the community more broadly.

- Ensure that data allow for the evaluation and tracking of care quality by common owner or management company and the assessment of the impact of ownership models and related-party transactions.

#### **GOAL FOUR: CREATE A MORE RATIONAL AND ROBUST FINANCING SYSTEM**

- HHS should study the establishment of a federal long-term care benefit.<sup>1</sup>
- CMS should ensure financing levels are adequate to cover the delivery of comprehensive nursing home care to all.
- HHS should require a specific percentage of nursing home payments be designated for direct care services.
- To enhance the value of care provided in nursing homes, CMS should extend current bundled payment initiatives to all conditions for short-stay post-acute care, while conducting demonstration projects to explore the use of alternative payment models for long-term nursing home care.

#### **GOAL FIVE: DESIGN A MORE EFFECTIVE AND RESPONSIVE SYSTEM OF QUALITY ASSURANCE**

- CMS should provide state survey agencies with necessary resources.
- CMS should refine and expand oversight performance metrics of survey agencies and use existing strategies of enforcement where states have consistently fallen short of standards.
- CMS should develop and evaluate strategies to enhance nursing home quality assurance efforts.
- The Administration for Community Living should advocate for increased funding for the Long-Term Care Ombudsman Program.
- Federal and state oversight agencies should impose oversight and enforcement actions on owners with poor quality care across facilities.
- States should eliminate certificate-of-need requirements and construction moratoria to encourage the entry of innovative care models.

#### **GOAL SIX: EXPAND AND ENHANCE QUALITY MEASUREMENT AND CONTINUOUS QUALITY IMPROVEMENT**

- CMS should add the Consumer Assessment of Healthcare Providers and Systems measures of resident and family experience to Care Compare.
- HHS should expand and enhance existing quality measures on Care Compare.
- HHS should fund the development and adoption of new measures to Care Compare, including in the areas of palliative care and end-of-life care, implementation of the care plan, receipt of care that aligns with the resident's goals, staff well-being, psychosocial and behavioral health, emergency preparedness, and health information technology adoption and interoperability.
- HHS should develop an overall health equity strategy for nursing homes.
- CMS should allocate funds for grants for state governments to develop and operate technical assistance programs with an ongoing and consistent focus on nursing homes.

#### **GOAL SEVEN: ADOPT HEALTH INFORMATION TECHNOLOGY IN ALL NURSING HOMES**

- The Office of the National Coordinator for Health Information Technology and CMS should provide financial incentives to nursing homes to support the adoption of certified electronic health records.

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<sup>1</sup> One committee member declined to endorse this recommendation.

## CONCLUSION

The COVID-19 pandemic provided powerful evidence of the deleterious impact of inaction and inattention to long-standing nursing home quality concerns. At the same time, the pandemic can serve as a potent catalyst to drive urgently needed innovations to improve the quality of nursing home care. Implementing the committee's integrated set of recommendations will move the nation closer to making high-quality, person-centered, and equitable care a reality for all nursing home residents, their chosen families, and the nursing home workforce.

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