



Nursing Home Quality & Accountability Task Force

Recommendations Report

May 26, 2023



Ohio Governor's
Nursing Home Quality
& Accountability
TASK FORCE



MIKE DEWINE
GOVERNOR OF OHIO

Letter from the Chair

Dear Ohioans,

On behalf of the Ohio Governor’s Nursing Home Quality & Accountability Task Force, I am proud to present this Recommendations Report. This report provides an overview of the Task Force’s work to recommend actionable solutions to improve the quality of care and quality of life provided at nursing homes throughout Ohio. A subsequent report from the Chair will further detail the challenges identified within the nursing home system and proposed strategies for improvement.

I am grateful to Governor Mike DeWine for his commitment to making Ohio the best place to age in the nation and for doing what is necessary to create a better life and a brighter future for Ohioans of all ages and backgrounds. The creation of this Task Force is bold, timely, and warranted.

It has been my privilege to lead this incredible group of experts representing the expansive voices of our state’s nursing home community. Members include advocates of nursing home residents and their loved ones, state regulators, and representatives of frontline staff and facility administrators. Together, a wide range of perspectives have been taken into consideration, keeping residents front-and-center when developing solutions. We operated at a rapid and deliberate pace to put forth the steps the State of Ohio can take to make a positive and lasting difference in the lives of the tens of thousands of Ohioans who reside in nursing homes. We intend to commence these actions immediately.

We traveled to every corner of the state in pursuit of these solutions. We held public listening sessions in Youngstown, Cincinnati, Dayton, Columbus, Bowling Green, Nelsonville, and Cleveland in the span of less than six weeks to meet face-to-face with nursing home residents, their family members, their caregivers, and others. We also hosted a special listening session for nursing home administrators, took part in three statewide virtual listening sessions – including one designed specifically for Ohioans with disabilities – and launched an online survey to make sure that all Ohioans had the opportunity to tell their story.

Time and again, brave Ohioans stepped forward to share their lived experiences. The energy and passion surrounding this conversation has been an inspiration, and I thank every Ohioan who shared these extremely personal insights. These contributions formed the foundation of this report as key themes began to emerge:

- Achieving the best quality is only possible with defined goals and a caring workforce.
- Federal regulations that ensure minimum standards must be better enforced.
- Our system of care needs recalibrated to empower the voices of residents and families.
- Information on long-term care must be more easily accessible and understandable.

I am confident that, with a cooperative, thoughtful, and timely approach to implementing the series of recommendations contained within this report, our friends and loved ones who receive and deliver care in nursing homes will thrive.



A handwritten signature in blue ink that reads "Ursel J. McElroy". The signature is fluid and cursive.

Ursel J. McElroy

Chair, Ohio Governor’s Nursing Home Quality & Accountability Task Force
Director, Ohio Department of Aging

Background

America's aging population is larger than ever before and growing faster than ever before. Here in Ohio, the number of people ages 60 and older is expected to grow 33% by 2030,¹ up from 2.8 million in 2020. This population will live longer than any generation prior, often with complex and multiple chronic conditions that will require care.²

The most vulnerable among this population – as well as many who are younger, but in need – rely on nursing homes to receive long-term care, rehabilitation, or intensive medical care after an acute incident. As Ohioans' needs change and grow, the system must evolve to meet those needs.

Today, consistent access to quality care and a high quality of life, delivered with compassion, inclusivity, and sensitivity, is eluding too many nursing home residents in Ohio. Addressing this urgent matter will require a collective and coordinated response in delivering, financing, and overseeing the dignified experience that Ohioans need and deserve.

Governor Mike DeWine has set forth the bold vision of making Ohio the best place to age in the nation. Creating the Nursing Home Quality & Accountability Task Force is part of achieving that vision. It was established on February 24, 2023, to evaluate and recommend short-term and long-term actions to make excellence the expectation in every nursing home in Ohio. The Task Force was charged with obtaining and summarizing resident, caregiver, and expert perspectives on strategies and actions necessary to create a system where every Ohioan entering a nursing home can expect a high quality of care and a high quality of life.



1. <https://www.ohio.edu/news/2023/02/how-ohio-university-improving-health-ohios-aging-population>
2. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5732407/>
<https://www.census.gov/content/dam/Census/library/publications/2020/demo/p25-1145.pdf>

In this report, the Task Force has developed an actionable plan with recommendations that will maximize the near-term impact on the resident experience across Ohio's nursing homes. The recommendations provided in this report can be implemented in conjunction with the strategies laid out in [Ohio's 2023-2026 State Plan on Aging](#). These recommendations will require collaboration across a variety of stakeholders including, but not limited to:

- The Ohio Department of Aging– to elevate the resident voice and enable excellence in care and experience through the provision of wraparound support services.
- The Ohio Department of Health– to ensure compliance, holding facilities accountable for delivering a high quality of care and experience.
- The Ohio Department of Medicaid– to enable access to high-quality care through financing and quality incentive structures.
- Nursing home associations, providers, and staff– to deliver best-in-class care and experiences to residents.
- Residents and families– to provide feedback about their care and experiences within facilities and other state-led programs.
- Advocacy organizations– to represent the needs of older and disabled Ohioans.

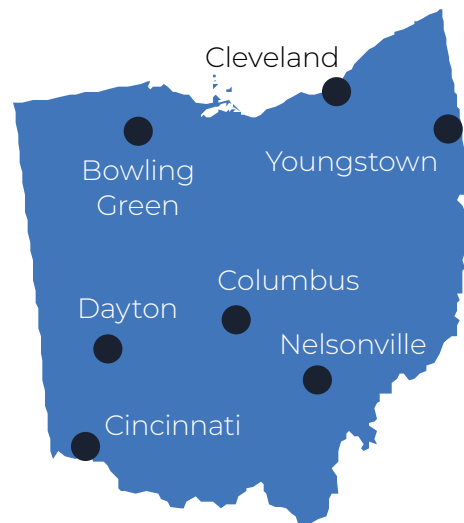


Throughout the process of preparing these recommendations, the Task Force anchored its work to the pillars of a North Star for Ohio’s nursing home care: Quality of Life, Quality of Care, Resident Rights, and System Performance. Most importantly, the North Star puts residents at the center of Ohio’s nursing home system.

North Star for Ohio’s nursing home care



Over the past three months, the Task Force hosted 11 community listening sessions in seven locations across the state to hear Ohioans’ stories, understand their concerns, and ultimately elevate their voices. The Task Force held a virtual listening session for people with disabilities, a listening session for nursing home administrators, participated in two tele-townhall events, and launched a call center and online survey. The Task Force also used a variety of approaches to gather qualitative and quantitative information by reviewing best practices in other states, talking with subject-matter experts – including interviews with past and present residents – and analyzing data from reputable sources.





Across these diverse sources of input, several themes have been consistent:

- The quality of Ohio’s nursing homes spans a wide spectrum with opportunities to raise the bar for quality of care and quality of life.
- The definition of quality must keep pace with the evolving needs of residents, including the widespread need for dementia care.
- Ohio’s nursing homes are facing a critical labor shortage, and without sufficient staff, care cannot happen at the level residents deserve.
- Nursing home staff sometimes lack the skills and training to care for residents with special needs or the soft skills to interact with all residents compassionately, inclusively, and with sensitivity.
- Ohioans want heightened attention and support at points when they are most vulnerable, such as at the time of admission, transitions between sites of care, or when their nursing home changes ownership.
- Ohioans do not believe the current survey and enforcement process is meeting their needs, and star ratings do not necessarily reflect their lived experiences.
- Current systems do not empower residents or elevate their voices, and communication between residents, families, nursing home staff, and state authorities is complex, confusing, or lacking altogether.
- Data is not easily accessible or understandable, which hampers the abilities of all parties to make informed decisions.

Based on these insights, our recommendations span four key dimensions:

- 1 Enabling excellence:** Provide proactive state support for nursing home performance that enables nursing homes to offer high-quality care and raises the bar for excellence.
- 2 Ensuring oversight and accountability:** Move from nursing home-agnostic to nursing home-specific survey and regulation processes that are tailored based on the needs of individual nursing homes.
- 3 Empowering residents:** Emphasize resident and family voices in decision-making across the nursing home system.
- 4 Facilitating data-backed decisions:** Move from disjointed data to an insight-generating command center that collects, aggregates, and analyzes data to inform decision-making.

Four key dimensions



As the Task Force developed these recommendations, each idea was evaluated through four cross-cutting lenses to recognize variation in need and resourcing across the state: critical access facilities, elder justice, equity, and workforce resilience.



1: Enabling excellence



“ I love my job. I love the residents, but it is hard. It is hard. I go home crying sometimes. ”

—State Tested Nurse Aide, Nelsonville

“ I stayed in my mother’s room from 4:00 p.m. to 2:00 a.m. without a single staff member checking in on her. ”

—Daughter of resident, Youngstown

“ I go home crying at the end of every day because I wasn’t able to provide what my residents need. They are my family, and I am letting them down. ”

— State Tested Nurse Aide, Panelist at Task Force meeting

1.A: Developing a quality excellence model

Recommendations

- 1.1 Develop a quality strategy for Ohio that moves nursing home care beyond baseline compliance and toward an integrated and resident-focused standard of excellence.
- 1.2 Ensure payment models are in place that provide sufficient resources to support high quality of care and quality of life in nursing homes.
- 1.3 Incentivize nursing homes to improve care and achieve defined, high-quality outcomes through innovative payment models.
- 1.4 Provide targeted clinical and technical assistance to nursing homes to help them reach the standard for excellence set by the new quality strategy for Ohio.
- 1.5 Recognize nursing homes that improve quality significantly or exceed the new standard for excellent quality of care and quality of life.



Immediate actions

- Convene subject-matter experts to further consider critical components and measures for the quality strategy and future payment models.
- Add workforce staffing levels to the existing Medicaid quality measures.
- Make the Regional Rapid Response Assistance Program (R³AP) permanent as the nursing home technical assistance program composed of clinical experts in post-acute and long-term care.
- Develop survey readiness resources to help nursing homes prepare for the survey process, avoid incidents, and sustain compliance.

Potential impact

These recommendations will support a coordinated effort among the federal government, state government, nursing home operators, allied professions, advocates, and community partners to define a clear expectation of excellence in Ohio's nursing homes. A unified strategy with transparent goals and a way to measure progress on these efforts equips decision-makers to more effectively allocate resources – particularly financial incentives and technical assistance – toward areas of greatest importance to residents.

1.B: Developing a workforce excellence model

Recommendations

- 1.6 Build new and strengthen existing community partnerships to grow the clinical workforce in nursing homes, including with schools and community centers.
- 1.7 Fund, test, and deploy technology and additional training to increase the efficacy and efficiency of critical nursing home workforce roles.
- 1.8 Articulate the value of being an State Tested Nurse Aides, and improve the financial and non-financial benefits to attract and retain more talent.
- 1.9 Align occupational naming conventions by adopting nationally accepted “Certified Nurse Aide” instead of “State Tested Nurse Aide.”

“ The environment is consistently loud and dirty. Staff are on their phones while residents’ call lights go off. ”

—Family member of resident, Columbus

Immediate actions

- Conduct asset mapping to determine where the current talent supply is being produced throughout the state and identify potential community partnerships to source the pipeline of future nursing home staff.
- Develop multilingual marketing campaigns about critical nursing home roles.
- Define an explicit career pathway model for the nursing home profession – including within the role – and provide related training opportunities.
- Identify specific technologies and tools to pilot in select nursing homes to alleviate workforce burden.
- Evaluate the Nurse Aide Training and Competency Evaluation (NATCEP) program for rigor and opportunities to include different forms of communication and levels of English proficiency.
- Design training for State Tested Nurse Aides on engaging with people with disabilities or dementia and from different cultural backgrounds, rewarding nursing homes and staff for completing the training.
- Codify change of “State Tested Nurse Aide” to “Certified Nurse Aide.”

“ They are so kind, doing so much, and working so hard to take care of me, but there’s just not enough of them! ”

—Resident, Cleveland

Potential impact

These recommendations will help increase the workforce supply and reduce demands on the worker. Communicating and improving the appeal of direct care staff roles will improve staff stability and experience by addressing barriers to entry, career and compensation prospects, and workplace culture. Additional training in dementia care and other specialties will equip staff to meet residents’ needs. Ultimately, providing these pathways will increase the capacity for staff to deliver the high-quality care and experience they aspire to.

2: Ensuring oversight and accountability



“ Submitting a complaint is like dropping a piece of paper in the ocean and hoping it gets to the right person. ”

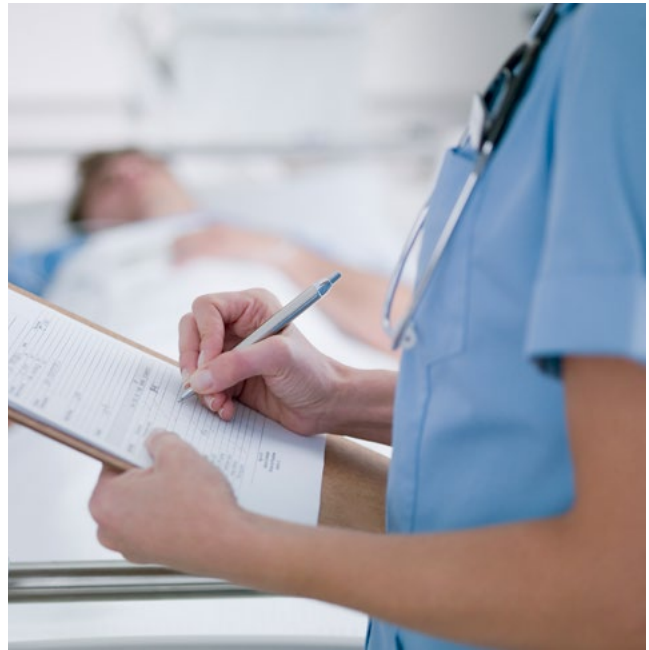
—Resident, Columbus

“ Surveyors are burnt out. We’re all tired of typing out every report from scratch. Why can’t we use templates? I know other states do it. ”

—Nursing Home Surveyor, Cincinnati

Recommendations

- 2.1 Expand staff in the Ohio Department of Health for nursing home surveyors to meet federal survey requirements and state quality standards.
- 2.2 Develop more efficient and effective nursing home oversight processes with standardized training and technology support.
- 2.3 Tailor survey and licensure processes to devote resources to high-need nursing homes and those at risk of experiencing a disruption or decline in care.
- 2.4 Use the full spectrum of federal enforcement remedies that reflect the nature, scope, and severity of deficiencies, including nursing home closure when necessary.
- 2.5 Create intermediate enforcement remedies for the nursing home licensure process that are distinct from existing penalties and consider nursing home staff efforts.
- 2.6 Build a transparent, best-in-class complaint platform to ensure consumers can track their complaint status regarding a nursing home.



Immediate actions

- Begin hiring surveyors to fill critical gaps; review past survey data to identify required subject-matter experts for survey teams.
- Create a joint training program on survey processes to include long-term care ombudsmen, nursing home staff, and surveyors.
- Identify and pilot existing technologies to improve survey workforce efficiency.
- Develop training and protocols for enforcement officers to appropriately deploy intermediate remedies and On-Site Post Survey Reviews based on citation findings.
- Outline parameters, using data analysis to identify high-risk, high-need, and high-performing nursing homes for tailored survey and enforcement.
- Define intermediate licensure enforcement remedies.
- Identify resources to design, test, and launch a web-based complaint platform that enables consumers to track the status of any filed complaints.

Potential impact

These recommendations will enhance capacity and consistency to identify and address deficiencies within nursing homes in an effective, efficient, and timely way. By tailoring the survey and licensure processes, and integrating innovative technologies, finite resources will be directed toward nursing homes most in need of oversight. Employing a full spectrum of appropriate enforcement remedies will lead to sustained compliance. Residents and families will also benefit from greater transparency into the complaint process, improving engagement and trust in the nursing home system.

3: Empowering residents



“ The process of getting help is so difficult. It’s exhausting – I just want to be a daughter. ”

—Daughter of resident, Bowling Green

“ It feels like you’re signing your life away when you fill out those forms, and you are. ”

—Daughter of resident, Nelsonville

“ I’m an attorney and I was confused by the paperwork. It shouldn’t be this difficult. ”

—Daughter of resident, Nelsonville

“ I had never heard of residents’ rights until this Listening Session. ”

—Brother of resident, Dayton

Recommendations

- 3.1 Provide accessible advance care planning materials in plain language, and establish a corps of experts to help Ohioans of all ages navigate the process through post-acute and long-term care.
- 3.2 Provide accessible and simple information upon nursing home admission and during times of significant change to orient residents to their rights and acclimate them to their environment and methods of communicating their needs.
- 3.3 Empower nursing home residents to freely assemble as a council that proactively includes the views of those with cognitive and physical barriers to assembling.
- 3.4 Educate consumers on the role of a long-term care ombudsman to advocate for the health, safety, welfare, and rights of nursing home residents and how to access their support.
- 3.5 Expand staff and standardize operations and training in the State Long-Term Care Ombudsman Program, emphasizing special attention to isolated residents.



Immediate actions

- Enhance the Long-Term Care Consultation Program to include resources for post-acute care and consolidate existing long-term care resources.
- Conduct media campaigns to inform Ohioans of the importance of advance care planning.
- Design and share simple nursing home admissions orientation template with hospitals, nursing homes, and long-term care ombudsmen to support constructive communication with consumers during a transition of care to or from a nursing home.
- Create and distribute plain-language resources informing nursing home residents about the role of the long-term care ombudsman, resident councils, and how to access help.
- Begin hiring long-term care ombudsmen to fill critical gaps; enhance and standardize training to include working with individuals living with a disability or dementia.

Potential impact

These recommendations will support informed decision-making and choice in post-acute and long-term care by providing access to critical, easy-to-understand information. By increasing awareness and expanding the capacity of the State Long-Term Care Ombudsman Program, residents will be more educated about their rights and have support to pursue options to address any violations. Elevating resident councils within nursing homes will empower residents to advocate for the care and environment they desire, lessening fears of reprisal.

4: Facilitating data-backed decisions



“ It is hard to find information on facilities, even looking on the Internet. ”

—Daughter of resident,
Bowling Green

“ When [she] needed to leave, my brother and I struggled to find a place for our mom. Everybody said to look at websites. [We] ended up putting her in the wrong facility, assisted living instead of a nursing home. ”

—Family of resident, Dayton

Recommendations

- 4.1 Build an accessible, understandable, public-facing portal with dashboards providing nursing home-specific information for consumers and nursing home staff.
- 4.2 Build accessible, informative, and visual dashboards that support state leaders' decisions.
- 4.3 Collect data from residents and families with more frequency and modernized data collection processes.

Immediate actions

- Engage the State of Ohio's technology and data platform, InnovateOhio, to help gather disparate departmental data sources and accelerate interdepartmental data use agreements (subject to regulatory guardrails).
- Identify resources to design, test, and launch the public-facing dashboard.
- Develop and test strategies for collecting data more often through short, real-time surveys of residents and their families.

Potential impact

These recommendations will improve access and functionality of Ohio's data sources, while augmenting them with new data and insights. Increased data transparency into nursing home information will empower consumers to compare and choose nursing homes most suitable for their needs. Equipping state leaders with system-wide and nursing home-specific views of performance will help identify inequities and critical access needs, while informing decision-making about resource allocation and targeted supports.



Conclusion

Convening the Ohio Governor’s Nursing Home Quality & Accountability Task Force has been a necessary step to evolving nursing home care in Ohio. The volume and breadth of the recommendations reflect the systemic changes needed for meaningful transformation. While the demographics, needs, and preferences of those seeking and supporting nursing home care may fluctuate, making excellence the expectation must be constant and at the forefront of decision-making and care delivery.

The forthcoming report from the Chair will provide richer detail on the proposed execution and measurement of progress on the Task Force recommendations.



Task Force Members

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