

## Use credible sources to evaluate nursing facilities

By Steve Ackerson 10:18 p.m. CDT October 12, 2014



(Photo: The Register)

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The Des Moines Register's editorial "There's No 'Gotcha' Now, But What About Public?" [Sept. 30] provided biased, incomplete and false information about the evaluation, oversight and quality in Iowa's nursing facilities.

If a facility gave such an incomplete account in a resident's medical record, it would be deservedly cited and fined for non-compliance by state and federal regulators. It's a shame the Register is not subject to the same level of scrutiny.

The editorial cites the "Nursing Home Report Card" from Families for Better Care, a Florida-based "non-profit citizen advocacy group." The group's 2012 IRS Form 990 (<http://tinyurl.com/o9mgqaf>) reveals it is primarily funded by Florida-based law firm Wilkes & McHugh — nationally known for suing nursing homes.

Alabama and Florida news investigations confirm the group has just one employee and does not invite public participation.

The Register would better serve citizens by using legitimate, trusted resources for evaluating nursing facilities. The Centers for Medicare and Medicaid Services (CMS) Nursing Home Compare Website and the AARP study, "Raising Expectations, 2014: A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers," are credible scorecards for long-term care services.

Nursing Home Compare's July report gave 90 percent of Iowa nursing facilities 3-, 4- or 5-star ratings using federal quality measures and ranked Iowa among the top 10 in five quality measures.

AARP's study ranks Iowa 13th in long-term services and supports; fourth for quality of life and quality of care; and 10th-best in staff turnover. With staff turnover, the Register failed to mention 10 to 15 percent of nursing facilities' workforce is seasonal high school and college students — many of whom are working toward health care degrees.

The personal stories cited are tragic and deeply concerning for every long-term care employee. In a profession that provides over 8 million days of resident care each year, the unfortunate reality is that regrettable errors or omissions may occur.

In any adverse event, the facility and the Department of Inspections and Appeals work together to immediately resolve issues and prevent further risk of harm, as verified by the department's on-site inspections.

These isolated incidents should not reflect on all nursing facilities, any more than all schools, hospital emergency and operating rooms, or child care settings should be judged by a single bad outcome.

Fine amounts have not been reduced for nursing facilities cited for isolated, egregious accidents and errors or repeatedly found in non-compliance. CMS reported that in 2013 the Department of Inspections and Appeals spent nearly twice as much time as the national and regional average when investigating a nursing facility complaint.

The majority of facilities being fined serve a high number of state Medicaid residents. Ongoing financial roadblocks are what impede these facilities' quality improvement efforts. The state pays providers a daily rate \$20 below the national average for Medicaid nursing facility care, and payment is often delayed for up to three years. These factors mean Iowa's facilities receive around \$7,300 below the national average each year for every Medicaid resident in their care.

People who want to advocate for better care should ask state legislators to improve funding for Medicaid nursing facilities. Adequate funding — and not the Register's ongoing finger-pointing — will help providers reach quality improvement goals.

Visit your local nursing facility and see for yourself the commitment and quality care provided by every employee. If you see anything of concern, contact the facility administrator or the state long-term care ombudsman's office.

Providing quality care to frail and elderly Iowans is a responsibility nursing facilities take very seriously. We believe the public deserves credible, honest sources for evaluating the care being provided.

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