

Uninspected and Neglected:

Nursing Home Inspection Agencies are Severely Understaffed, Putting Residents at Risk

A REPORT BY THE MAJORITY STAFF OF THE
U.S. SENATE COMMITTEE ON AGING

Uninspected and Neglected, an investigative report released by Senate Special Committee on Aging Chair Bob Casey, Jr., examines significant shortcomings of the Nation's nursing home oversight system and the negative impact on the health and safety of 1.1 million nursing home residents.

The investigation revealed that the state agencies responsible for monitoring nursing homes' compliance with Federal standards are in crisis. In letters and data provided by every state, the District of Columbia, and Puerto Rico, inspection agencies reported an inability to effectively conduct their jobs due to severe staffing shortages, high turnover rates, and flat-lined Federal funding.

As the number of people aged 65 or older is set to reach 80 million by 2040—twice the number in 2000—the Nation must provide states with resources necessary to properly oversee facilities so every nursing home resident receives safe, high quality care.

Key Findings

- 1. Severe staffing shortages hinder nursing home oversight.** More than half the Nation's survey agencies reported that staffing shortages strain their ability to conduct regular inspections and to respond to complaints in a timely manner. Thirty-one survey agencies have inspection staff vacancy rates of 20 percent or higher. Nine survey agencies have vacancy rates of 50 percent or higher.
- 2. Staff shortages negatively affect resident safety.** Nursing home residents suffer when understaffing at state agencies reduces their capacity to oversee health facilities in the Medicare and Medicaid programs. When inspections are delayed months or years beyond the statutory timelines, nursing homes are not subject to the comprehensive oversight best suited to uphold care quality and protect resident safety.
- 3. States have been forced to turn to contractors to fill gaps, despite high costs and potential conflicts of interest.** More than half the states have resorted to using contractors; the vast majority cite their high costs as a major drawback. Several states that do not use contractors cited the prohibitive costs as the major barrier. While conducting inspections on behalf of states, contractors are also working for nursing homes and CMS—creating potential conflicts of interest.
- 4. States, independent watchdogs, and CMS have warned for 20 years about the consequences of understaffing and underfunding nursing home oversight.** States and independent watchdogs have repeatedly raised the alarm about the consequences of underfunding on nursing home residents. Despite requests from both Democratic and Republican administrations, Congress has only increased annual appropriations for nursing home inspections by 2.5 percent since FY2015.

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Recommendations

- 1. Congress and states should invest in robust nursing home oversight.** Congress should increase funding for inspection activities, and states should provide adequate matching funds and offer competitive salaries for inspection staff.
- 2. CMS should regularly collect and report staffing information from state agencies.** Given the key role staffing plays in nursing home oversight, CMS should regularly track and publicly report on state agencies' capacity to conduct oversight of nursing homes and other federally certified health care providers.
- 3. CMS, states, and independent watchdogs should increase oversight of contract surveyors.** CMS should closely track state agencies' use of contractors and consider additional oversight of contract surveys to ensure quality. Federal and state watchdogs should consider including state agencies' use of contractors in their future audit plans.
- 4. States should consider more flexible hiring requirements for inspection staff.** States that rely exclusively or heavily on registered nurses to conduct survey work should consider utilization of interdisciplinary teams.
- 5. CMS should consider strategies to reduce burden on states for non-inspection tasks.** CMS should work with state agencies to identify non-inspection-related tasks that could be reduced in scope, eliminated, or taken on by the federal government.
- 6. Congress, states, and institutions of higher education should collaborate to expand opportunities to enter into and remain in the health care workforce.** Congress and states should increase funding for nursing educational programs and improve scholarship and loan repayment programs to expand access to nursing education.
- 7. Congress, states, and health care facilities should improve mental health resources for the health care workforce.** In recent years, Congress and states have dedicated some resources and funding to address mental health challenges for the health care workforce. More must be done to prevent burnout and provide support for inspection staff.
- 8. Congress should increase funding for the Long-Term Care Ombudsman Program.** Congress and states should invest in state long-term care ombudsmen, important advocates for residents of nursing homes and other long-term care settings.
- 9. CMS should strengthen the accuracy of Care Compare.** CMS should strengthen the process for reviewing inspection results reported on Care Compare by requiring state agencies to verify deficiencies reported.
- 10. Congress should increase funding to the Office of Inspector General for the Department of Health and Human Services.** Congress should invest in the OIG's oversight of nursing homes and other health programs to ensure taxpayer dollars are being wisely spent and beneficiaries of Medicare and Medicaid receive quality care.



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