

chapter 2

## WHAT IS A NURSING HOME?

Nursing homes have only been around since the 1950s, but most likely you or someone close to you has spent time in a nursing home. Over the past several decades, nursing homes have become big business. The vast majority of all nursing homes are for-profit entities, and many of these are large corporations with nursing facilities in multiple states. Nursing homes generally provide three types of services:

- rehabilitation for people who are injured, sick, or disabled;
- skilled nursing and medical care;
- custodial care (help with eating, dressing, bathing, toileting, and moving about).

Like hospitals, nursing homes never close — service must be available 24 hours a day, 365 days a year with trained, licensed nursing staff always present. A nursing facility is required to maintain interdisciplinary staffing at several levels, including licensed nursing facility administrators and physician medical directors, directors of nursing services, nurses trained to provide skilled nursing care, social workers, and activities directors. They are also required to hire as staff or retain as consultants:

- A pharmacist;
- Therapists in a variety of specialties, including physical, occupational and speech therapy;
- Food service personnel, including a dietary supervisor; and

## **The Virginia Nursing Home Survival Guide**

- An interdisciplinary assessment and assurance committee.

Nursing homes must be licensed under state law; more than 80% of nursing homes also choose to participate in Medicare and Medicaid, which require nursing homes to meet strict federal certification standards on quality of care, quality of life, and residents' rights. For the purposes of this book and in general consumer usage, all licensed nursing facilities are considered skilled care facilities. However, the federal government refers to non-Medicare-certified facilities as "nursing facilities" and to Medicare-certified facilities as "skilled nursing facilities" or "SNFs." The Virginia Department of Health calls facilities that do not participate in Medicaid or Medicare "non-participating facilities."

Either an entire facility or a portion of a facility can be licensed as a nursing facility. A Continuing Care Retirement Community (CCRC) offers skilled nursing facility services for its residents in a special section of the CCRC. Some hospitals may also provide skilled nursing care in a long-term care unit.

Nursing facilities use personnel at a variety of training levels, which allows patient care needs to be matched to appropriate training levels. Licensed nursing care levels in Virginia include: Licensed Practical Nurse (LPN); Registered Nurse (RN); Clinical Nurse Specialist (CNS); and Registered Nurse Practitioner (RNP).

In addition to the types of licensed and registered nurses listed above, nursing facilities may use Certified Nurse Aides, or CNAs, to provide certain basic services, although they are not licensed or registered nurses. CNAs may provide assistance with Activities of Daily Living (ADLs) such as bathing, dressing, eating, toileting, transferring, and bowel/bladder incontinence, as well as assistance with Instrumental ADLs (IADLs) which include housekeeping duties such as laundry and meal preparation. In Virginia, CNAs

## **The Virginia Nursing Home Survival Guide**

must: (1) complete a 120-hour training program; (2) pass a competency test within four months of being hired to work in a licensed nursing facility; and (3) be registered with the Virginia Nurse Aide Registry. To maintain its license in Virginia, a nursing facility must provide 24-hour licensed nursing care, and an RN must be on duty for at least one 8-hour shift every day of the week. Virginia licensing requirements also mandate that, at a minimum, each resident be seen by a physician at least once every 30 days for the first 90 days of care, and at least once every 60 days thereafter. Medicare-certified SNFs require a physician visit not later than 14 days after admission, and every 30 days thereafter. Additional physician visits in both nursing homes and skilled nursing facilities are according to residents' needs.

### **NURSING HOME GOALS**

The goals of all nursing facilities are to: (1) rehabilitate the resident to maximum potential and enable the resident to return to independent living arrangements if possible; (2) maintain maximum rehabilitation as long as possible within the realities of age and disease; (3) delay deterioration in physical and emotional well-being; and (4) support the resident and family, physically and emotionally, when health declines to the point of death.

## The Virginia Nursing Home Survival Guide

state annual inspection reports detailing the facility's major and minor deficiencies; nursing homes are required to make these reports available upon request. Virtually every nursing home will have some deficiencies; after all, working with extremely disabled and impaired persons is very difficult. Your local Area Agency on Aging should also have resources and helpful aids for assisting you in finding and comparing nursing homes. If you have Internet access, probably the most helpful of all resources is Medicare's Nursing Home Quality Compare Website at [www.medicare.gov/NHCompare](http://www.medicare.gov/NHCompare) — here, you can obtain detailed inspection information about each nursing facility that interests you, comparing various government-rated “quality measures” such as: *Percent of Residents Who Have Moderate to Severe Pain, Percent of High-Risk Residents Who Have Pressure Sores, Percent of Residents Who Were Physically Restrained, and Percent of Residents Who Spend Most of Their Time in Bed or in a Chair.* The NHCompare Web site also rates the care and services that each facility provides to its residents, and allows you to view how each facility stacks up in staffing hours for each type of health care worker against the Virginia and national averages. All of the above resources, including all Virginia Area Agencies on Aging and numerous other helpful resources, are listed in **Appendix B** (page 129) and **Appendix C** (page 134).

Step three is to tour those facilities you have identified in step two. Don't schedule your visits in advance. Just show up during regular business hours. You should be able to meet with an administrative staff member, who should be able to answer all your questions. You will also want to tour a second time, in the evening or on the weekend, to see if there is a drastic difference in the atmosphere of the facility or the care being provided. It is important to tour at least two facilities so you can see the difference in the physical plant and the staff.

## The Virginia Nursing Home Survival Guide

While you are touring the facility, pay attention to your gut feeling. Ask yourself:

- Do I feel welcome?
- How long did I have to wait to meet with someone?
- Did the admissions director ask about my family member's wants and needs?
- Is the facility clean?
- Are there any strong odors?
- Is the staff friendly?
- Do they seem to genuinely care for the residents?
- Do the staff seem to get along with each other?

Listen and observe. You can learn a lot just by watching and paying attention. And ask questions. You want to be sure that the facility is giving proactive care, not just reacting to crisis. Here are a few examples of the types of questions the staff should be able to answer:

- How do you ensure that call lights are answered promptly, regardless of your staffing?
- If my father is not able to move or turn himself, how do you ensure that he is turned and does not develop bedsores?
- How do you make sure that someone is assisted with the activities of daily living like dressing, toileting and transferring?
- Can residents bring in their own supplies?
- Can residents use any pharmacy they wish?

### **The Virginia Nursing Home Survival Guide**

- How many direct care staff members do you have on each shift? Does this number exceed the minimal number that state regulations require, or do you just meet the minimum standard?
- What sources of payment do you accept?
- How long has the medical director been with your facility?
- How were your last state survey results? (Get a copy.)
- How did you correct any deficiencies and what process did you put in place to make sure you do not make these mistakes again?
- Has the state prohibited this facility from accepting new residents at any time during the last 2 years?
- What is your policy on family care planning conferences? Will you adjust your schedule to make sure that I can attend the meeting?
- Do you have a list of references I can talk with?
- Can my loved one come in for a meal to see if he/she fits in and likes the facility?

Beginning on page 14, you will find a comprehensive Nursing Home Evaluation Tool you can use when touring facilities. This tool will help you keep track of which facility you like best. You should make a separate copy of the blank form for each facility you plan to visit.