

Stimulus Funds Hit Health Care

New Programs Aim To Bolster Health Workforce Training

The U.S. Department of Labor (DOL) has launched a \$220 million initiative aimed at preparing workers for careers in health care and other high-growth industries, including long term care, nursing, allied health, and health information technology.

Under the program, public entities and private, nonprofit organizations will be eligible to receive grants through a competitive process that is funded through the American Recovery and Reinvestment Act of 2009 (ARRA), the economic stimulus plan enacted by Congress earlier this year.

Approximately \$25 million of total funds will be reserved for projects serving communities impacted by automotive industry restructuring.

“An important part of our nation’s continued economic recovery is ensuring that workers have the necessary skills to enter high-growth industries,” said Secretary of Labor Hilda Solis. “Health care continues to offer workers opportunities to enter career-track jobs, earn good wages, and make a positive impact on the communities in which they live and work.”

In related news, the U.S. Department of Health and Human Services (HHS) has put up \$200 million for an initiative aimed at boosting training programs for health care professionals through grants, loans, loan repayment, and scholarships.

The project, which seeks to train approximately 8,000 students and credentialed health professionals by the end of 2010, is also funded through ARRA.

According to HHS, a total of \$500 million was allotted to the Health Resources and Services Administration (HRSA) to address workforce shortages.

A portion of the funds will go to scholarships, loans, and loan repayment awards for students, health professionals, and faculty—including \$39 million for nurses and nurse faculty, \$40 million to disadvantaged students in a “wide range” of health professions, and \$1.2 million to health professions faculty from disadvantaged backgrounds.

Fifty million dollars will be given to training programs for the purpose of “purchasing equipment needed to expand programs and improve quality of training,” HHS said in a statement.

Primary care training programs will ▶

Five-Star Rating Correlates Poorly With Satisfaction Results

There is little or no correlation between a nursing facility’s rating under the Centers for Medicare & Medicaid Services’ (CMS) Five-Star Quality Rating System and resident and family member satisfaction, says a study by Holleran, a research firm in Lancaster, Pa.



In an analysis of data from more than 12,000 nursing facility residents and family members across 32 states, Holleran found little to no association between the one (“much below average”) through five (“much above average”) ratings given by CMS and the resident and family member satisfaction ratings. Residents and family members from the highest CMS-rated facilities do not differ in their satisfaction levels from residents and family members in facilities rated “average” by the controversial CMS rating system, Hol-

leran said in a statement. “We did find some similarities between the one and two ratings given by CMS, but what the CMS rating system fails to do is accurately capture any clear differences between a two and a three, a three and a four, and so on,” said Lisa Scott Lehman, Holleran’s managing partner.

“We found a number of outliers as well, where a facility garnered extremely high satisfaction ratings, but was rated a one or two by CMS. There is obviously a disconnect somewhere.”

In addition, nursing facilities rated as below average by CMS are still garnering satisfaction ratings in the mid-80s percentile, the statement said. “These results suggest that there are key missing elements in the Five-Star rating system and that the very constituents

served by the nursing homes report favorable satisfaction ratings.”

Holleran’s data reflect resident and family member satisfaction across skilled nursing facilities primarily in the not-for-profit sector of senior living.

Despite the majority of not-for-profit data, Bruce Yarwood, American Health Care Association president and chief executive officer, said the overall construct of the research and analysis is “directly applicable to all long term care providers.”

“We believe customer satisfaction—and how a resident and family members judge the actual care being provided in a particular facility—is a key indicator of the quality of care and quality of life experienced by residents and should be integrated into the Five Star system,” Yarwood said.

—Meg LaPorte

get \$47.6 million to support the training of residents, medical students, physician assistants, dentists, and others who practice in underserved areas, while another \$1.5 million will support state professional licensing boards in “reducing barriers to telemedicine.”

“Health care reform cannot happen without an adequate supply of well-trained, well-distributed providers,” HHS Secretary Kathleen Sebelius said in a

statement. “These ARRA funds provide targeted investments in primary care, nursing, faculty development, and equipment purchases that will shore up the workforce as we prepare for reform.” The funds will be awarded through a competitive process overseen by HRSA.

“Our health professions programs have been significantly under-funded these past few years,” said HRSA Administrator Mary Wakefield, RN. “These funds

will help us begin to rebuild the infrastructure that is so essential to producing the number of skilled health professionals the nation needs.”

Another \$300 million of HRSA funds will go to the National Health Service Corps, which provides scholarships and loan repayment for primary care providers who serve in health professional shortage areas.

—Meg LaPorte

LTC Reform Policy Options Offered

Researchers Target Home And Community Services For Expansion

Expanding home- and community-based services (HCBS) for Medicaid recipients is a major focus of a report released recently by researchers at Georgetown University in an effort to include long term care in the larger health care reform debate.

Released by the SCAN Foundation, the report offers four distinct policy options for improving access to long term care for people of low-income and limited financial resources and strengthening long term care protections for the broader population.

“With recent polling data indicating widespread public support for long term care reform, the options presented in the...report provide federal policy makers a succinct guidebook for enacting meaningful reform that will benefit the growing population of people aged 65 and older,” said Bruce Chernof, MD, president and chief executive officer of The SCAN Foundation.

According to a summary of the report, the first two options would improve long term care for people with low incomes and limited financial resources and modernize Medicaid by tailoring services better to individual needs and using resources more effectively.

The third and fourth options are aimed at strengthening long term

care protections for the broader population—one with better coordination of medical and long term care for Medicare enrollees and the other by

establishing insurance protection for people of all ages and incomes.

Following are some additional details about the first two options: ▶

Oversized Puppy Brings A Smile



Resident Bernice Westlund gets a hug from Clifford the Big Red Dog during the grand opening of the Gables Care Center at Boutwells Landing, a full-continuum senior care community in Stillwater, Minn. The center features eight neighborhoods with private suites built around common rooms, including kitchen, living, family, and dining rooms, where residents are served by staff, who, among other things, make tailored breakfasts, administer medication, and lead chat circles to help residents plan their days.