



*Statement of*  
**Bruce Yarwood**  
**President & CEO**  
**American Health Care Association**

*for the*  
**U.S. Senate Special Committee on Aging**

*Hearing on*  
**“Abuse of Our Elders: How We Can Stop It”**

**July 18, 2007**

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As representatives of nearly 11,000 non-profit and proprietary facilities that provide professional, compassionate long term care and services for frail, elderly, and disabled citizens living in nursing facilities, assisted living residences, subacute centers, and homes for persons with mental retardation and developmental disabilities, we at the American Health Care Association (AHCA) know that patient safety and security is paramount for long term care providers. That is why AHCA has championed a wide range of initiatives to enhance the quality of care in long term care facilities nationwide, and ensure that the nation’s frail, elderly, and disabled are safe while in our care. While instances of abuse are rare, AHCA believes that abuse cannot, and should not be tolerated.

The long term care profession has made tremendous strides in improving both the quality of care and quality of life for the nearly three million Americans who require critical skilled nursing care and services every year. Mr. Chairman, I am proud to say that our commitment to quality long term care has never been greater.

The most effective ways to enhance the safety and security of all long term care residents are through family involvement in patient care, ongoing staff education, careful screening of potential employees, and responsible abuse prevention programs.

AHCA has long been a supporter of a national, interstate background check system that enables long term care providers to conduct effective and fair criminal history background checks on potential nursing home employees. Recently, [AHCA endorsed](#) the introduction of Chairman Kohl’s *Patient Safety and Abuse Prevention Act of 2007*, stating that, “nursing homes are caring for our nation’s frailest and most vulnerable population – and they need a system that helps them

prevent hiring those people with criminal record histories who may harm our residents without imposing undue administrative or financial burdens. We appreciate the requirement in your legislation that such background checks be reimbursed by the Medicare and/or Medicare programs.”

Specifically, the *Patient Safety and Abuse Prevention Act of 2007* would build upon the success of the provisions enacted as part of the *Medicare Modernization Act (MMA)*, which created a three-year pilot program to examine ways in which states can implement systems to cost-effectively screen applicants for employment in long term care facilities.

We concur with Chairman Kohl’s recent statement that, “the vast majority of long term care workers are selfless and dedicated.” Still, we recognize that there is a serious workforce shortage in our nation’s entire healthcare system – and particularly in long term care. Not only do we need to check the full criminal background of every potential employee, but we need to ensure that all long term care providers have the ability to recruit the highest quality caregivers to provide critical care and services to America’s seniors and people with disabilities.

As the Centers for Medicare & Medicaid Services (CMS) and others have repeatedly acknowledged, the continuing improvement of care quality in our nation’s skilled nursing facilities depends upon adequate, stable funding levels. AHCA also understands the critical need for annual cost of living increases – not only to improving quality, but to ensuring that there is a stable, well-trained workforce and that our profession can recruit enough long term caregivers to meet the growing needs of our nation as 77 million “baby boomers” stand virtually on America’s retirement doorstep.

Our nation faces a serious nurse shortage. Sadly, while nursing schools around the country are flooded with applicants, many qualified potential nurses are turned away because we do not have enough nurse educators nor funding for nursing education. We also must do more to promote careers in the field of long term care. Nursing homes and assisted living facilities, for example, are in dire need of additional caregiving staff – especially the Certified Nursing Assistants (CNAs) who perform as much as 80 percent of the direct, hands-on patient care.

These key workers are indispensable to our collective mission to provide quality care to our most vulnerable population of seniors and persons with disabilities. It is critical that we work together to increase interest in long term care as a career while simultaneously ensuring that we have the educational infrastructure in place to accommodate prospective nursing students.

The current long term care workforce shortage is projected to worsen over the next decade. In fact, the Bureau of Labor Statistics predicts a 45 percent increase in demand for new long term care workers between 2000 and 2010 alone – the equivalent of approximately 800,000 new jobs. Vacancies and turnover in the long term care profession lead to increased costs and threaten quality. A recent study estimates that costs due to staff turnover in nursing facilities is more than \$4 billion a year, while other studies indicate that the supply of nursing staff is a key factor in the quality of care patients receive.

To help alleviate existing and future long term care nursing workforce shortages, AHCA encourages Congress to reauthorize and amend the *Nurse Reinvestment Act*: 1) to remove permanently the exclusion on loan repayment for nurses working in for-profit health care settings; 2) to create and fund a national nursing database of common data elements to forecast future supply and demand changes – the database should include workforce data across all provider settings, including nursing educators, for use in trend analysis and to better forecast workforce needs; and 3) ensure that *Title VIII* grant awards require that grantees report the number of nursing educators and nurses produced and/or hired, the increase in the number of nurse education slots, and the decrease in the number of qualified applicants turned away from nursing programs.

We look to you, Mr. Chairman, to address this critical issue in the coming months to ensure that an adequate, well-trained long term care workforce is in place to care for the increasingly frail, elderly, and disabled populations who rely on them.

It is important to note that the profession's progress has been achieved due to the fact that the entire long term care stakeholder community – providers, regulators, lawmakers, and consumers – has established a more productive “culture of cooperation,” which is undoubtedly contributing to the rising care quality standards in America's nursing homes. It has been working as a private/public partnership and toward our goal of improving care quality that we have been able to move the needle on quality.

We have been able to achieve these positive advances due to our collective commitment to quality – and the government's recognition of how critical economic stability is for our sector has enabled us to continue these trends.

Improving care quality is a continuous, dynamic, ongoing enterprise. While AHCA and our entire membership is enormously proud and pleased by our care quality successes, we agree with each of you here today in recognizing that there is far more to accomplish. We look forward to working with you, Mr. Chairman, to ensure the safety and security of all individuals in long term care.