

## HIGH STAFF TURNOVER: A JOB QUALITY CRISIS IN NURSING HOMES

In January 2022, the Center for Medicare & Medicaid Services (CMS) began posting the nursing staff turnover rates for nursing homes on its Care Compare website. The new measure provides the percentage of direct care nursing staff that leave their jobs over a twelve-month period. The new data revealed nursing homes, on average, experienced turnover of 52% of nursing staff each year. In other words, the average nursing facility has to replace half of its direct care staff each year.

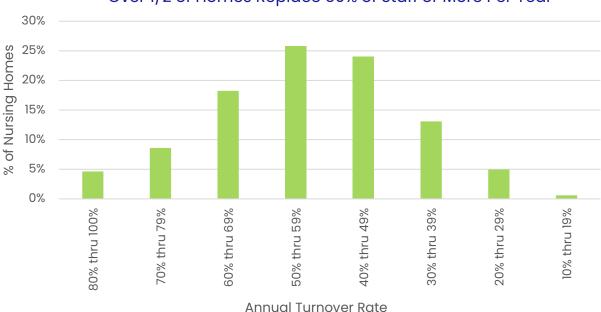
These dismal numbers come at a time where the nursing home industry claims it is in the midst of a staffing crisis, unable to find workers to fill jobs. These turnover numbers, however, tell a different story-one of poor job quality. Numerous studies have shown that nursing turnover is related to poor pay, lack of benefits, high workloads, inadequate training, poor management, and lack of career advancement.<sup>1</sup>

Most importantly, high turnover means poorer health outcomes for nursing home residents. A recent study directly connects high turnover with poor care.<sup>2</sup> A review of CMS data shows that nursing homes with higher turnover have higher instances of resident abuse, poorer Medicare five-star ratings, and greater numbers of substantiated resident complaints.

This report examines how nursing homes with higher staff turnover perform poorly in a variety of measures, how staff turnover harms residents, the causes of high turnover, and offers solutions to this endemic problem.

#### **High Staff Turnover Harms Residents**

CMS Nursing Home Care Compare website provides a variety of measures that consumers may use to gauge the performance of nursing homes. CMS uses data to generate five-star ratings that it reports on the website. The data used comes from health inspections, payroll staffing information, select clinical measures reported from nursing homes, and from Medicare claims data. CMS also informs consumers whether a nursing home has been cited for abuse. Additional data includes the number of resident complaints substantiated by state enforcement agencies. The most recent CMS data from July 2022 lists 15,178 nursing homes in the United States. Of these homes, there was annual nurse staffing turnover data for 12,494<sup>i</sup> (82.31%) homes. The following chart reflects the distribution of nursing homes across deciles.



Over 1/2 of Homes Replace 50% of Staff or More Per Year

Of the nursing homes with reported data, roughly 50% have annual turnover rates between 40% to 60%, meaning that half of nursing homes must replace half their staff each year. Over 30% of nursing homes have staff turnover that exceeds 60% each year. These extremely high numbers point to a crisis not just in staffing but in job quality.

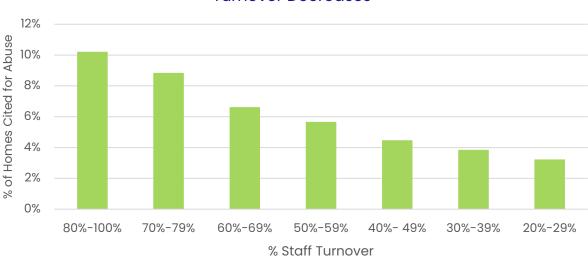
# Nursing Homes with Higher Turnover Are Cited More Frequently for Resident Abuse

Nursing Homes with a nursing turnover rate between 50% to 59% (25.8% of nursing homes) are cited for abuse at a rate 1.5 times higher than nursing homes with a turnover rate between 30%-39% (13.09% of nursing homes). For residents that reside in nursing homes with a turnover rate between 60%-69% (18% of nursing homes), the percentage of nursing homes cited for abuse doubles when compared to homes with a turnover rate between 30% to 39%. As the chart below indicates, the percentage of homes cited for abuse declines precipitously as the rate of nursing staff turnover declines.

This trend mirrors a similar finding in a previous Consumer Voice report, <u>Staffing Matters</u>, focused on staffing levels in nursing homes.<sup>3</sup> In that report, the data showed that as daily

<sup>&</sup>lt;sup>i</sup> The missing measure data is attributable to, in part, to the newness of the measure and a lack of relevant data. This number should increase over time. For more information on why some nursing homes may be excluded from the measure, please see page 13 of the <u>Technical User's Guide</u>.

staffing hours decreased, the likelihood of a nursing home being cited for resident abuse increased. These numbers show the critical importance of staffing to resident safety and well-being.



% of Nursing Homes Cited for Abuse Sharply Declines As Staff Turnover Decreases

### Nursing Homes with Higher Staff Turnover Perform Worse on All Five-Star Quality Measures

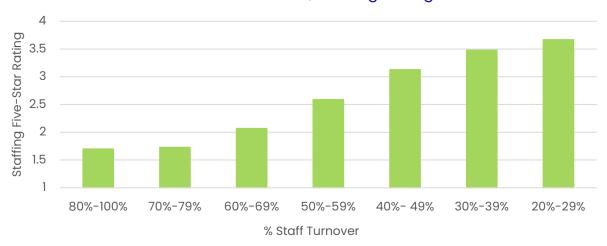
Nursing homes with lower staff turnover perform better in all five-star quality ratings<sup>ii</sup> according to data from CMS. A common complaint from nursing home residents regarding high staff turnover is that they are constantly having to make new staff aware of their particular care needs. When staff are unfamiliar with residents' care needs, quality of care and quality of life can degrade. This factor plays out in the data below.

#### **Five-Star Staffing Measure**

CMS uses this payroll data submitted by nursing homes to create a variety of sub-measures that compose the overall staffing score. Importantly, the staffing measure is based solely on how a nursing home performs compared to other nursing homes and is not related to objective research based clinical outcomes. This means that although a nursing home may be performing better than other nursing homes, it may not be providing sufficient care to meet resident's needs.

<sup>&</sup>lt;sup>ii</sup> In addition to the three measures represented in this report, CMS also posts a five-star Quality Measure Rating. This rating is largely based on self-reported data regarding residents' health conditions from nursing homes and is considered less reliable. You can read Consumer Voice's report on how Quality Measure ratings are not reflective of care quality <u>here (https://theconsumervoice.org/uploads/files/actions-and-news-updates/Using the Five\_Star\_Quality\_Measure\_to\_Mask\_Bad\_Care.pdf</u>

As the following chart shows, nursing homes with high staff turnover perform poorly on the staffing measure when compared to nursing homes with lower staff turnover.

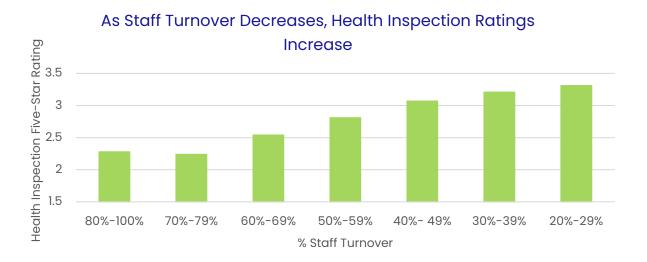


As Staff Turnover Decreases, Staffing Ratings Increase

#### Health Inspection Five-star Rating

The health inspection five-star rating is based on a nursing home's three most recent annual recertification surveys, deficiency findings from complaint investigations, and from focused infection control surveys.<sup>4</sup> Nursing homes are assigned a score based on the survey findings and the severity of deficiencies, which is then used to create a five-star rating. Like the staffing measure, this measure is based solely on how one nursing home performs compared to another.

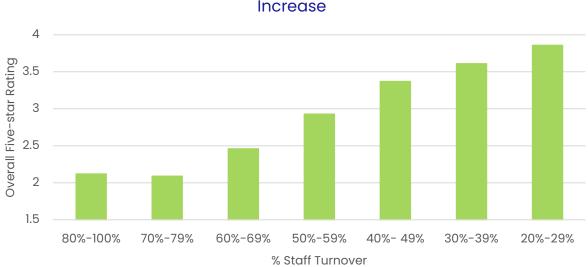
Nursing homes with high staff turnover have lower health inspection ratings, when compared to nursing homes with lower turnover.



#### **Overall Five-Star Rating**

CMS's overall five-star rating is a composite score derived from three other measures, staffing, health inspections, and quality measures.<sup>5</sup> CMS uses the scores in these areas to assign an overall rating.

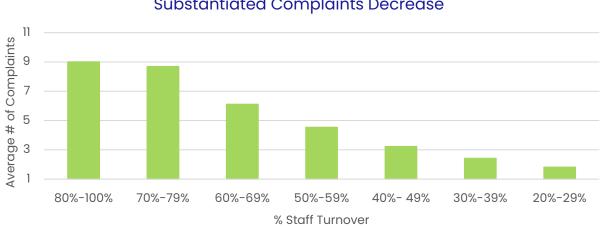
Mirroring the trends with the staffing and health inspection ratings, nursing homes with high turnover have significantly lower overall five-star ratings than homes with low turnover.



As Staff Turnover Decreases Overall Five-Star Ratings Increase

#### Nursing Homes with Higher Staff Turnover Average Higher Numbers of Substantiated Complaints

Residents and other consumers are empowered to file complaints against nursing homes regarding care issues. As a result of a complaint, state regulators must investigate and determine whether a nursing home has violated state or federal regulations. CMS tracks the number of complaints that are substantiated by state regulators. Analysis of this data reflects that nursing homes with higher staff turnover on average experience greater numbers of substantiated complaints. The chart below shows that nursing homes with staff turnover between 60%-69% (18.26% of homes) on average have a substantiated complaint rate 1.5 times higher than homes with a turnover rate between 30%-39% (13.09% of homes).



#### As Staff Turnover Decreases, Average Number of Substantiated Complaints Decrease

# What causes high staff turnover in nursing homes and how can it be fixed?

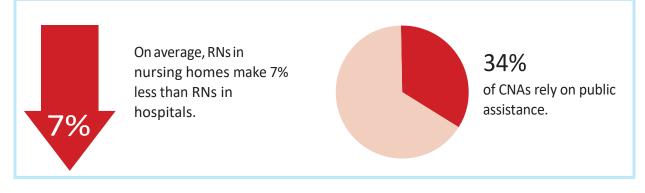
Most commonly, high turnover is the result of poor wages and benefits, lack of training, poor management, lack of career advancement, and impossible workloads.<sup>6</sup> Poor job quality results in higher staff turnover making turnover arguably the most important barometer of nursing home job quality. Additionally, important to the discussion of job quality is the issue of social and racial inequities in how nursing home staff are treated. Nine out of ten nursing home direct care staff are women.<sup>7</sup> 58% of CNAs are people of color.<sup>8</sup> As documented below, the wages, benefits, and job advancement opportunities offered to direct care staff, particularly CNAs, are paltry, and this most often impacts workers of color.

Fortunately, while research reveals why nursing staff leave their jobs, it also lays a framework for how to reduce turnover. By addressing poor job quality, facilities will be able to reduce turnover, which in turn reduces the need to hire and train new staff annually.

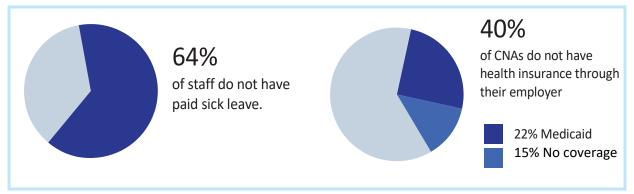
Below is a discussion of the factors that contribute to higher staff turnover.

#### Wages and Benefits

The median annual income for a CNA in a nursing home is \$25,200, with 34% of CNAs relying on public assistance.<sup>9</sup> Only 60% of CNAs have health insurance through their employer or a union. 25% of CNAs rely on Medicaid, and 15% have no coverage at all.<sup>10</sup> RNs working in nursing homes are underpaid. On average they make 7% less than RNs working in hospitals.<sup>11</sup> This wage disparity can result in RNs being drawn away from working in nursing homes.



A study from 2020 found that 64% of nursing home staff stated they did not have paid leave.<sup>12</sup> Sick staff cannot afford to not work and fear losing their jobs, and as a result end up going to work sick. This phenomenon was particularly damaging during the COVID-19 pandemic, where infected staff were the primary driver of COVID-19 infection in nursing homes.<sup>13</sup>



The nursing home industry has recognized the problem posed to nursing home care by low staff wages. A Leading Age study estimated that raising wages of CNAs would reduce turnover and stabilize the workforce and that the costs associated with increased wages would be offset by gains in productivity <sup>14</sup> Most importantly, the report stated that by increasing wages, care quality would increase, therefore resulting in better health outcomes for nursing home residents.

#### Workloads

Inadequate staffing burdens existing staff. Research makes clear that high workloads for direct care staff contributes significantly to staff turnover.<sup>15</sup> A landmark 2001 CMS staffing study established the importance of having a minimum of 2.8 CNA hprd for each resident, which equates to CNAs not having more than 6 residents on the day and evening shifts to care for and no more than 13 residents at night.<sup>16</sup> However, on average, CNAs in nursing homes provide care to 13 residents per shift.<sup>17</sup> 1 in 10 CNAs in the U.S. are responsible for 19 or more residents.<sup>18</sup> These workloads make providing high-quality care impossible, resulting in residents waiting inordinate periods of time for, or going without, necessary care.

# The recommended ratio is 1 CNA to 6 residents. The reality is 1 to 13. The reality is 1 to 13.

#### Training

In addition to leading to poor health outcomes for residents, inadequate training contributes to high staff turnover. Research shows that nursing staff who receive tailored and ongoing training report higher job satisfaction which results in reduced turnover.<sup>19</sup> CNAs reporting high-quality training are more likely to work in states requiring additional initial training hours and were more satisfied with their jobs than those with low-quality training.<sup>20</sup> A 2008 study by the Institute of Medicine (IOM) found the current minimum federal training requirements (75 hours) for CNAs to be inadequate, leading not only to poor health outcomes for residents, but also increased turnover in staff.<sup>21</sup> The study recommended significant increases in the training requirement to at least 120 hours.

A 2022 report by the National Academies of Sciences, Engineering, and Medicine (NASEM) made the same 120-hour recommendation.<sup>22</sup> The NASEM report also recommended that state and federal governments should provide free access to entry-level and continuing education training programs, and that nursing homes should pay workers for attending these training.

#### Career Advancement and CNA Empowerment

There is little opportunity for career advancement in nursing homes, particularly for people of color. While 59% of CNAs are people of color<sup>23</sup> the number of people of color in higher-level positions, such as LPNs or RNs, decreases as the educational requirements increase.<sup>24</sup> Research has shown that empowerment of CNAs as well as career opportunities can reduce staff turnover and increase care quality.<sup>25</sup> CNA empowerment was a main focus of the recent NASEM report, which found that increasing opportunities for CNAs could lead to a reduction in staff turnover.<sup>26</sup> The report noted that CMS's 2016 revised regulations for nursing homes required that CNAs be part of the interdisciplinary team and involved in care planning and suggested that further incorporation of CNAs into interdisciplinary care teams would result in reduced turnover.

#### Administrators/Leadership

On average, nursing home administrators last little more than a year before leaving their positions.<sup>27</sup> A variety of factors contribute to administrator turnover, including burnout, lack of resources, and difficulty with corporate management.<sup>28</sup> Regardless of the causes, high turnover in administrative staff has been shown to be associated with high turnover in direct care staff.<sup>29</sup> CMS should require all nursing home administrators to have, at a minimum, a bachelor's degree and training in leadership and other topics relevant to their role.<sup>30</sup> For instance, the National Association of Long Term Care Administrator Boards offers both accreditation and continuing education programs designed specifically for nursing home administrators.

#### Summary

Nursing homes with high staff turnover experience increased instances of abuse, perform poorer on all five-star quality measures, and are subject to more substantiated complaints. The nursing home industry has long neglected nursing home staff which has resulted in high turnover as the result of a job quality crisis. With the average nursing home losing half its nursing home staff each year, the answer is not only how nursing homes can find more staff, but how can they address job quality to retain staff and also attract new workers.

Fortunately, there is a clear pathway to better jobs and better care. By lifting up nursing home workers, turnover will be reduced, which will result in better care for residents and in turn better health outcomes.



#### Endnotes/Citations

<sup>4</sup> https://www.cms.gov/medicare/provider-enrollment-and-certification/certificationandcomplianc/downloads/usersguide.pdf

<sup>5</sup> https://www.cms.gov/medicare/provider-enrollment-and-certification/certificationandcomplianc/downloads/usersguide.pdf

<sup>6</sup> Bryant, Olalya Ayanna, "Employee Turnover in the Long-Term Care Industry" (2017). Walden Dissertations and Doctoral Studies. 3389, https://scholarworks.waldenu.edu/dissertations/3389; Al-Hussami, M.,et al, "Nurses' turnover intentions." Int J Nurs Pract, 2014 20: 79-88. https://doi.org/10.1111/ijn.12124; Negarandeh R. Enhancing transition to workplace. Nurs Midwifery Stud. 2014 Apr;3(1):e17554. doi: 10.17795/nmsjournal17554. Epub 2014 Apr 17. PMID: 25414894; PMCID: PMC4228524. National Academies of Sciences, Engineering, and Medicine. 2022. The National Imperative to Improve Nursing Home Quality: Honoring Our Commitment to Residents, Families, and Staff. Washington, DC: The National Academies Press. https://doi.org/10.17226/26526.

<sup>7</sup> PHI. 2022. Direct Care Workers in the United States: Key Facts. <u>http://www.phinational.org/wp-content/uploads/2022/08/DCW-in-the-United-States-2022-PHI.pdf</u>

<sup>10</sup> Id.

<sup>11</sup> Bureau of Labor and Statistics, <u>https://www.bls.gov/ooh/healthcare/registered-nurses.htm#tab-5</u>

<sup>12</sup> Service Employees International Union. National survey shows government, employers are failing to protect nursing home workers and residents. June 2020. <u>https://www.seiu.org/2020/06/national-survey-shows-governmentemployers-are-failing-to-protect-nursing-home-workers-and-residents</u>

<sup>13</sup> Centers for Disease Control and Prevention. COVID-19 in a long-term care facility – King Country, Washington, February 27-March 9, 2020. Morbidity and Mortality Weekly Report. 2020: 69, March 18

<sup>14</sup> https://leadingage.org/sites/default/files/Making%20Care%20Work%20Pay%20Report.pdf

<sup>15</sup> Sarah L. Krein, Molly Turnwald, Barry Anderson, Donovan T. Maust "Sometimes it's not about the money... it's the way you treat people...": A Qualitative Study of Nursing Home Staff Turnover, Journal of the American Medical Directors Association, 2022,ISSN 1525-8610,https://doi.org/10.1016/j.jamda.2021.11.03

<sup>16</sup> 3 Centers for Medicare & Medicaid Services, Abt Associates Inc. Appropriateness of Minimum Nurse Staffing Ratios in Nursing Homes. Report to Congress: Phase II Final. Volumes I–III. Baltimore, MD: CMS, 2001.

<sup>17</sup> PHI. 2022. Direct Care Workers in the United States: Key Facts. <u>http://www.phinational.org/wp-content/uploads/2022/08/DCW-in-the-United-States-2022-PHI.pdf</u>

#### <sup>18</sup> Id.

<sup>19</sup> Ejaz, F., and L. Noelker. 2006. Tailored and ongoing training improve job retention.

https://phinational.org/wpcontent/uploads/legacy/clearinghouse/EjazSummaryFinal.pdf; Kihye Han, et al, Associations between state regulations, training length, perceived quality and job satisfaction among certified nursing assistants: Cross-sectional secondary data analysis, International Journal of Nursing Studies, Volume 51, Issue 8, 2014,Pages 1135-1141, ISSN 0020-7489, https://doi.org/10.1016/j.ijnurstu.2013.12.008

<sup>20</sup> Kihye Han, et al, Associations between state regulations, training length, perceived quality and job satisfaction among certified nursing assistants: Cross-sectional secondary data analysis, International Journal of Nursing Studies, Volume 51, Issue 8, 2014, Pages 1135-1141, ISSN 0020-7489

<sup>21</sup> IOM. 2008. Retooling for an aging America: Building the health care workforce. Washington, DC: The National Academies Press.

<sup>22</sup> National Academies of Sciences, Engineering, and Medicine. 2022. The National Imperative to Improve Nursing Home Quality: Honoring Our Commitment to Residents, Families, and Staff. Washington, DC: The National Academies Press. https://doi.org/10.17226/26526

## <sup>23</sup> PHI. 2022. Direct Care Workers in the United States: Key Facts. <u>http://www.phinational.org/wp-content/uploads/2022/08/DCW-in-the-United-States-2022-PHI.pdf</u>

<sup>24</sup> 4 Bates, T., G. Amah, and J. Coffman. 2018. Racial/ethnic diversity in the long-term care workforce. San Francisco, CA: UCSF Health Workforce Research Center on Long-term Care.

<sup>25</sup> Stone, R. et al . Evaluation of the Wellspring model for improving nursing home quality. New York: Commonwealth Fund; National Academies of Sciences, Engineering, and Medicine. 2022. The National Imperative to Improve Nursing Home Quality: Honoring Our Commitment to

Residents, Families, and Staff. Washington, DC: The National Academies Press. https://doi.org/10.17226/26526

<sup>26</sup> National Academies of Sciences, Engineering, and Medicine. 2022. The National Imperative to Improve Nursing Home Quality: Honoring Our Commitment to Residents, Families, and Staff.

<sup>27</sup> <u>https://www.medicare.gov/care-compare/</u>

<sup>28</sup> 9 Myers DR, Rogers R, LeCrone HH, Kelley K, Scott JH. Work Life Stress and Career Resilience of Licensed Nursing Facility Administrators. J Appl Gerontol. 2018 Apr;37(4):435-463. doi: 10.1177/0733464816665207. Epub 2016 Aug 28. PMID: 27572341

<sup>29</sup> 0 Castle, N. G. 2001. Administrator turnover and quality of care in nursing homes. The Gerontologist 41(6):757–767; Castle, N. G. 2005. Turnover begets turnover. The Gerontologist 45(2):186–195

<sup>30</sup> National Academies of Sciences, Engineering, and Medicine. 2022. The National Imperative to Improve Nursing Home Quality: Honoring Our Commitment to Residents, Families, and Staff. Washington, DC: The National Academies Press. <u>https://doi.org/10.17226/26526</u>

<sup>&</sup>lt;sup>1</sup> Bryant, Olalya Ayanna, "Employee Turnover in the Long-Term Care Industry" (2017). Walden Dissertations and Doctoral Studies. 3389, https://scholarworks.waldenu.edu/dissertations/3389; Al-Hussami, M.,et al, "Nurses' turnover intentions." Int J Nurs Pract, 2014 20: 79-88. https://doi.org/10.1111/ijn.12124; Negarandeh R. Enhancing transition to workplace. Nurs Midwifery Stud. 2014 Apr;3(1):e17554. doi: 10.17795/nmsjournal17554. Epub 2014 Apr 17. PMID: 25414894; PMCID: PMC4228524. National Academies of Sciences, Engineering, and Medicine. 2022. The National Imperative to Improve Nursing Home Quality: Honoring Our Commitment to Residents, Families, and Staff. Washington, DC: The National Academies Press. https://doi.org/10.17226/26526.

<sup>&</sup>lt;sup>2</sup> Zhen, Qing et al., "Association between staff turnover and nursing home quality – evidence from payroll-based journal data", J Am Geriatr Soc. 2022;1–9.

<sup>&</sup>lt;sup>3</sup> <u>https://theconsumervoice.org/uploads/files/issues/Staffing-Matters.pdf</u>

<sup>&</sup>lt;sup>8</sup> Id.

<sup>&</sup>lt;sup>9</sup> Id.