





2022 CAHF

QUALITY REPORT





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EXECUTIVE **OVERVIEW**

APRIL 2022



A MESSAGE FROM THE CEO

California skilled nursing providers have faced unprecedented challenges during the COVID-19 pandemic. So, it's heartening to report that our nursing homes have maintained their status as national leaders in the delivery of quality care.

Every skilled nursing home in the nation is judged on 35 different measures of care and California facilities have maintained the highest rankings in 12 separate categories.

Despite an ongoing workforce shortage, California has more licensed vocational nurses on the job than any other state, according to federal data from the Centers for Medicare and Medicaid Services. California is also #1 in delivering flu and pneumonia vaccines, preventing urinary tract infections and helping long-term residents maintain their ability to move and conduct daily activities. Other areas of significant progress are also outlined in this report.

In order to maintain and improve care, workforce challenges must be addressed. CAHF is proposing a reform package, "Drive to \$25," to provide a state-funded living wage within the next three years to support certified nurse assistants that provide 24hour care to nursing home residents. Our reform package also addresses the need for more registered nurses on-site 24-hours a day. We are also seeking to increase and prioritize funding for training programs to bring new workers into the long-term care profession.

While we face challenges, we are overcoming obstacles with a continuing dedication to quality, and a commitment from state leaders to prioritize the needs of California's elderly citizens and the people who provide their care.

Thank you for your continued support.

Craig Cornett

Craig Cornett CEO/President

WORKFORCE SHORTAGE IMPACT ON QUALITY CARE

By 2025, nearly 20,000 CNAs will be needed just to maintain the current workforce.

California faces a long-term care workforce shortage— a crisis that threatens the delivery of quality care in skilled nursing centers. Without the required number of caregivers, nursing homes will be unable to admit patients from the hospital who need short-term rehabilitation or extended care.





SOLUTIONS

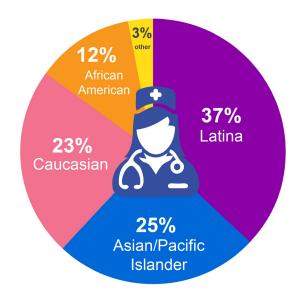
Living Wage for CNAs

Even before the devastating COVID-19 pandemic, certified nurse assistants were overworked, overlooked and underpaid. A living wage will help low-income workers make ends meet, increase caregiver retention and benefit resident care.

Women make up nearly 80 percent of the state's direct care workforce: 50 percent are immigrants, and many are single mothers. A majority (51 percent) are eligible for public assistance.

In 2022, the California Association of Health Facilities launched a "Drive to \$25" campaign in support of a state funded living wage for certified nurse assistants who work in nursing homes. CAHF is requesting that the Medi-Cal program establish a nursing home CNA minimum wage that will grow to \$25 per hour in the next three years. Higher paid CNAs have lower turnover rates and studies show consistent caregivers improve resident quality of life.

CNA Profile



Enhanced Registered Nursing in Skilled **Nursing Facilities**

California currently recognizes the clinical value of a 24-hour registered nurse, seven days a week, for larger nursing facilities (100 beds or more). Smaller buildings are required to have eight hours of RN coverage, seven days a week. Research supports higher RN coverage in smaller SNFs. CAHF proposes that the RN nursing coverage be at least doubled for smaller SNFs with 60-99 beds. The Medi-Cal program should be required to cover these costs as a new mandate over the next three years and provide incentives for skilled nursing providers to hire additional 24-hour RNs as soon as possible.

Prioritize Workforce Training

CAHF is also requesting \$150 million over a three-year period to build on the successful implementation of CNA workforce training funds allocated in the 2021-22 State Budget (\$43 million). These funds should be used to support existing facility-based training programs, union led training programs, and expand partnerships with local Workforce Investment Boards, community colleges, adult programs and ROP programs that have historically coordinated training programs with local nursing facilities.

CALIFORNIA MEDI-CAL REIMBURSEMENT INEQUITIES

Nursing Home



In Home Support Services



\$250 DAILY STATE REIMBURSEMENT 24-hour care

Covers skilled care, wages, food, office support, nursing care, meals, utilities, medical supplies, supplies and rent

\$130 DAILY STATE REIMBURSEMENT 8 hours of care

Covers personal care in-home with no nursing care, meals, utilities or rent included

SCHOLARSHIP **OPPORTUNITIES**

To encourage individuals to consider career pathways in skilled nursing, CAHF's education arm, the Quality Care Health Foundation provides educational opportunities to working professionals in long-term care. Each year, QCHF offers scholarships up to 19 individuals. The scholarships are made possible by the generous contributions of individuals and organizations that share its mission of promoting careers in long-term care for the benefit of residents in need.

ELEVATE CHARITIES SCHOLARSHIP PROGRAM

More than a decade ago, Ensign Services founder Christopher Christensen established a charitable foundation. In 2022, the Elevate Charities Scholarship program awarded scholarships of \$5,000 each to four deserving individuals to pursue a career in nursing.















Bottom (Left to Right): Shadow Abreu

Rochelle Marshall

SCHOLARSHIP OPPORTUNITIES (CONTINUED)

2021 PAUL TUNNELL CAREER CLIMB SCHOLARSHIP

Ten individuals employed in California skilled nursing centers were awarded scholarships of up to \$2,500 to help accelerate their careers in the long-term care profession. The Career Climb Scholarship is available to any individual with at least one year of experience in a long-term care setting. The annual scholarship honors the memory of Paul Tunnell, a long-time association member and board chair. A dedicated San Francisco nursing home administrator, he demonstrated respect, empathy and a sense of humor while caring for elderly residents and guiding his staff.







Awardees
1st Row (Left to Right):
Rochelle Marshall
Jean Parriott
Christina Flores







2nd Row (Left to Right):
Hilda Rodriguez
Bamie Macmillan
Martha Farias







3rd Row (Left to Right):
Cornelius Olive
Stephanie Baez
Hannah Espinoza

Not pictured:Melissa Dietrick

2021 AHCA AWARDS CAPTURING QUALITY



The American Health Care Association National Quality Award Program recognizes skilled nursing providers across the nation for efforts to enhance quality. This year, many California facilities were recipients of these prestigious awards.



2021 SILVER ACHIEVEMENT IN QUALITY AWARD RECIPIENTS

ManorCare Health Services I Walnut Creek

2021 BRONZE

COMMITMENT TO QUALITY AWARD RECIPIENTS

Avalon Health Care I Madera

Eskaton Care Center I Fair Oaks

Windsor Post Acute Center of Arvin

Royal Terrace Health Care I Duarte

Veterans Home of CA I Chula Vista

Veterans Home of CA I Yountville

Windsor Elk Grove Care & Rehabilitation Center

Windsor Gardens Convalescent Care of Long Beach

NATIONAL QUALITY MEASURES:

California ranks #1, 2 or 3 in the nation in 12 categories of care



ADL Decline **Urinary Tract Infection** LS Flu Vaccine SS Flu Vaccine SS Pneumonia Vaccine LS Ability to Move Worsened LPN Hr per Res per Day



Incontinence Injurious Falls LS Pneumonia Vaccine



LS Antipsychotic Meds SS Improvements in Function

Quality Measure	CA Ave Q3 2021	Current Rank	US Ave Q3 2021
ADL Decline	9.2	1	15.7
LS High-Risk Pressure Ulcer	7.7		8.3
Weight Loss	5.6		6.7
Incontinence	33.5	2	47.1
Catheter	1.5		1.6
Urinary Tract Infection	1.2	1	2.4
Depressive Symptoms	4.2		7.4
Restraints	0.2		0.2
Injurious Falls	1.6	2	3.4
LS Flu Vaccine	98.5	1	95.8
LS Pneumonia Vaccine	98.0	2	93.3
LS Antipsychotic Meds	10.0	3	14.5
SS Flu Vaccine	92.2	1	78.8
SS Pneumonia Vaccine	92.8	1	80.0
SS Antipsychotic Meds	1.4		1.9
SS ED Visit	9.4		10.5
SS Re-hospitalization	23.0		22.9
SS Improvements in Function	79.1	3	73.1
LS Ability to Move Worsened	16.2	1	22.1
LS Antianxiety/Hypnotic Meds	13.9		19.7
LS Hosp per 1,000 Res Days	1.56		1.45
LS ED Visits per 1,000 Res Day	0.64		0.79
Nurse Aide Hr per Res per Day	2.53		2.19
LPN Hr per Res per Day	1.20	1	0.88
RN Hr per Res per Day	0.63		0.70
Licensed Hr per Res per Day	1.83		1.58
Total Nurse Hr per Res per Day	4.36		3.76
P Therapist Hr per Res per Day	0.09		0.07
C-Mix RN Hr per Res per Day	0.41		0.37
C-Mix Total Hr per Res per Day	3.16		3.16
N Hr per Res per Day on Wkend	3.92		3.26
RN Hr per Res per Day on Wkend	0.47		0.48
Total Nurs Staff Turnover, %	44.3		51.6
RN Turnover, %	49.1		49.8
Number of Admins who have Left	0.80		1.10

2021 NURSING HOME LEADER ACADEMY



2021 LEADER ACADEMY GRADUATES

Jasdeep Dhariwal Cindy Lichtenhan Lawrence Moradkhani (not pictured)

Cindy Lichtenhan (center) Jasdeep Dhariwal (right)

Nursing Home Leader Academy is a dynamic nine-month program that builds the skills and confidence of skilled nursing facility leaders. Given increased levels of patient acuity, on-going pandemic response needs and workforce shortages there has never been a more important time to invest in facility leadership than now. Participants benefit from expert lectures and discussion on workforce and personcentered care while building a network of peer support with other leaders that choose to use new skills to improve the resident experience, outcomes and workforce engagement.

During 2021, a small group of facility leaders improved resident care and outcomes with two programs including a protect sleep initiative that reduced resident disturbances and saw a marked reduction in resident falls as well as a reduction of registry usage through process improvements to hiring and staff engagement.



HEALTHCARE HEROES RISKING ALL TO PROVIDE QUALITY CARE

In 2020, during the early days of the COVID-19 pandemic, personal protective equipment was in short supply in skilled nursing facilities. Testing was not yet available, vaccines were non-existent and health experts were unaware the virus could be spread by asymptomatic individuals. Working in designated COVID-19 "red zones," thousands of long-term care nurses and dedicated employees remained on the job, often working double shifts and foregoing time off to cover for sick co-workers.

In 2021, CAHF members nominated dozens of their peers to recognize and honor the resilience, commitment and dedication of all long-term care workers who risked their lives to provide 24-hour care to vulnerable residents who were targeted by the deadly virus.

DEVELOPMENTAL SERVICES LICENSURE & CLIENTS

CAHF represents providers that administer 24-hour care to individuals with developmental disabilities in licensed Intermediate Care Facilities (ICFs). California has three licensure categories for developmental services providers. Services provided include, but are not limited to, training and support in life skills such as mobility, socialization, employment and recreation.



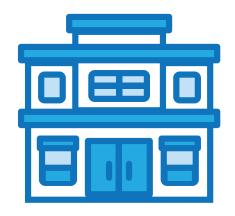
Intermediate Care Facility for Persons with Developmental Disabilities - Habilitative (ICF/DD-H)

Facilities with 15 beds or less serving individuals who may have intermittent need for nursing care. The emphasis is on enhancing or preventing regression of intellect, functional skills and the emotional well-being of the person. Typically, care is provided in a group home setting. Approximately 97 percent of California's 645 ICF/DD-H facilities contain six or fewer beds.



Intermediate Care Facility for Persons with Developmental Disabilities - Nursing (ICF/DD-N)

Facilities with 15 beds or less that serve persons who have continuous needs for nursing care for monitoring of medications or conditions such as epilepsy. More than 90 percent of ICF/DD-N clients utilize wheelchairs. There are approximately 395 ICF/DD-Ns in California.



Intermediate Care Facility for Persons with Developmental Disabilities (ICF/DD)

Facilities with 16 or more beds serving individuals who may have intermittent or continuous needs for nursing care. There are approximately 13 ICF/DDs in California - 9 free-standing, 3 distinctparts (DPs) of state hospitals and 1 DP of a skilled nursing facility.

The following pages are based on the latest available 2020 data from the California Department of Health Care Access and Information.

DEVELOPMENTAL SERVICES

LICENSURE & CLIENTS (CONTINUED)

GENDER

AGE

46% Women



54% Men

3% Under 22



48%



DISABILITIES & CONDITIONS



Impaired Vision Blind

30%



Language Impaired Hard of Hearing

aring 14% Deaf 3%

55%

1

Mild Mental Retardation 19%
Moderate MR 21%
Severe MR 24%
Profound MR 33%
Autistic 10%

Cerebral Palsy 39%



Controlled Epilepsy
Uncontrolled Epilepsy
Total Epilepsy
42%
46%



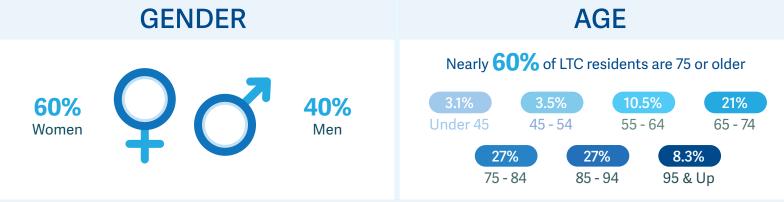
Medical Care Plan Behavioral Drugs Restrained 37% 47% 2%



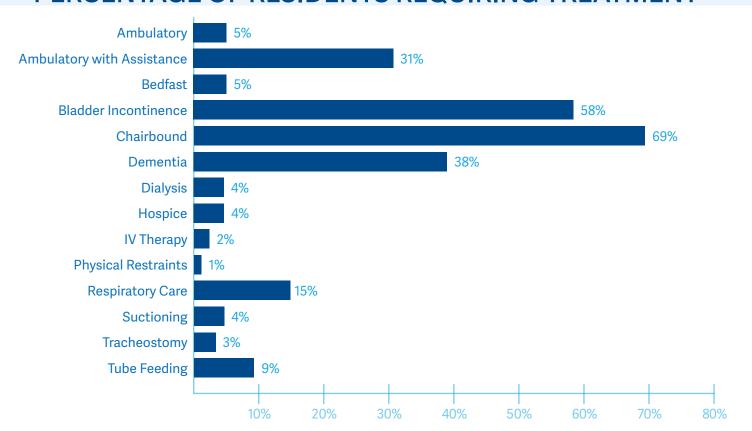
Total Nonambulatory

82%

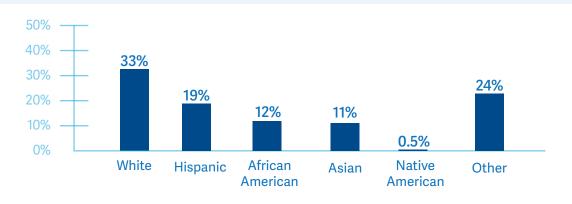
SKILLED NURSING CARE RESIDENT DEMOGRAPHICS



HEALTH CONDITIONS PERCENTAGE OF RESIDENTS REQUIRING TREATMENT



2021 RACIAL MAKEUP



SKILLED NURSING CARE DATA REPORT

QUICK FACTS

There are 1,096 freestanding skilled nursing facilities throughout California.



139,000

facility employees

\$5.3 billion

in payroll and benefits annually

Less than 3 months

average length of stay for 80% of patients

350,000

patients in facilities per year

80%

occupancy rate

FACILITY SIZE



DAILY LIVING ACTIVITIES

Percentages represent the level of support provided to residents by nursing staff











Transferring

anig



Founded in 1950, the California Association of Health Facilities is a non-profit professional organization representing nearly 900 skilled nursing facilities and 420 intermediate care facilities for individuals with intellectual disabilities. Each year more than 139,000 caregivers provide short term rehabilitation, long term care, end of life assistance and habilitative nursing services for 350,000 people. CAHF is the largest provider of continuing education for long-term care professionals in California, facilitating continuous quality improvement for providers and improved outcomes for residents.

www.cahf.org