



REGION IV
61 Forsyth Street, S.W., Suite 3T41
Atlanta, Georgia 30303

February 27, 2004

Report Number: A-04-04-04002

Vicki Worley, Administrator
Glen Haven Health and Rehabilitation, LLC
2201 32nd Street
Northport, Alabama 35476

Dear Ms. Worley:

Enclosed are two copies of the United States Department of Health and Human Services, Office of Inspector General (OIG) report entitled, *Effect of Staffing on Quality of Care at Nursing Facilities – Glen Haven Health and Rehabilitation, LLC*. A copy of this report will be forwarded to the action official noted below for her review and any action deemed necessary.

The objective of our review was to determine whether Glen Haven Health and Rehabilitation, LLC (Glen Haven) was in compliance with Federal and State staffing laws and regulations for nursing facilities.

Federal staffing regulations are contained in Title 42, CFR, Section 483.30. Alabama has not established staffing requirements that exceed the Federal standards. Based on our review of 145 current direct care employees, we found that Glen Haven complied with Federal and State staffing laws and regulations. However, we noted differences in the direct care hours per resident per day that we calculated and the hours of care reported in the Nursing Home Compare website. We recommend that Glen Haven establish a control to independently confirm the validity of the direct care hours that are provided to the Alabama State Survey Agency for input into the Nursing Home Compare website.

In a written response to our draft report, the Glen Haven Administrator agreed with our finding and recommendation and stated that a new system has been implemented that will allow the hours to be verified. We have included the entire text of Glen Haven's comments as an appendix to our report.

Final determination as to actions taken on all matters reported will be made by the HHS action official name below. We request that you respond to the HHS action official within 30 days from the date of this letter. Your response should present any comments or additional information that you believe may have a bearing on the final determination.

In accordance with the principles of the Freedom of Information Act, 5 United States Code 522, as amended by Public Law 104-231, OIG reports to the Department's grantees and contractors are made available to members of the press and general public to the extent information

contained therein is not subject to exemptions in the Act which the Department chooses to exercise (see 45 CFR Part 5).

To facilitate identification, please refer to report number A-04-04-04002 in all correspondence related to this letter.

Sincerely,

A handwritten signature in black ink, appearing to read "Charles J. Curtis". The signature is written in a cursive style with a large, prominent initial "C".

Charles J. Curtis
Regional Inspector General
for Audit Services, Region IV

Enclosures – as stated

Direct Reply to HHS Action Official:

Rose Crum-Johnson, Regional Administrator
Centers for Medicare & Medicaid Services
61 Forsyth Street, S.W., Suite 4T20
Atlanta, Georgia 30303-8909

Department of Health and Human Services

**OFFICE OF
INSPECTOR GENERAL**

**EFFECT OF STAFFING ON QUALITY
OF CARE AT NURSING FACILITIES –
GLEN HAVEN HEALTH AND
REHABILITATION, LLC**



**FEBRUARY 2004
A-04-04-04002**

Office of Inspector General

<http://oig.hhs.gov>

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OAS FINDINGS AND OPINIONS

The designation of financial or management practices as questionable or a recommendation for the disallowance of costs incurred or claimed, as well as other conclusions and recommendations in this report, represent the findings and opinions of the HHS/OIG/OAS. Authorized officials of the HHS divisions will make final determination on these matters.





REGION IV
61 Forsyth Street, S.W., Suite 3T41
Atlanta, Georgia 30303

February 27, 2004

Report Number: A-04-04-04002

Vicki Worley, Administrator
Glen Haven Health and Rehabilitation, LLC
2201 32nd Street
Northport, Alabama 35476

Dear Ms. Worley:

This Office of Inspector General (OIG) report provides the results of our review of the *Effect of Staffing on Quality of Care at Nursing Facilities – Glen Haven Health and Rehabilitation, LLC*. Glen Haven Health and Rehabilitation, LLC (Glen Haven) is a 200 bed nursing facility located in Northport, Alabama.

The objective of our review was to determine whether Glen Haven was in compliance with Federal and State staffing laws and regulations for nursing homes. Federal staffing regulations are contained in Title 42, CFR, Section 483.30. Alabama has not established staffing requirements that exceed the Federal standards. Based on our review of 145 current direct care employees,¹ we found that Glen Haven complied with Federal and State staffing laws and regulations. However, we noted differences in the direct care hours per resident per day that we calculated and the hours of care reported in the Nursing Home Compare website. We recommend that Glen Haven establish a control to independently confirm the validity of the direct care hours that are provided to the Alabama State Survey Agency (Survey Agency) for input into the Nursing Home Compare website.

In a written response to our draft report, the Glen Haven Administrator agreed with our finding and recommendation and stated that a new system has been implemented that will allow the hours to be verified. We have included the entire text of Glen Haven's comments as an appendix to our report.

¹ Direct care employees are any nursing staff who are eligible to provide direct care to the residents.

INTRODUCTION

BACKGROUND

The Omnibus Budget Reconciliation Act of 1987 established legislative reforms to promote quality of care in nursing homes. This act requires nursing homes to have sufficient nursing staff to provide nursing and related services “to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.”

Title 42, CFR, Section 483.30 requires nursing homes to provide sufficient nursing staff on a 24-hour basis. Sufficient nursing staff must consist of licensed nurses and other nursing personnel and include: (1) a licensed nurse designated “to serve as a charge nurse on each tour of duty”; (2) “a registered nurse for at least 8 consecutive hours a day, 7 days a week”; and (3) a registered nurse designated “to serve as director of nursing on a full time basis. The director of nursing may serve as a charge nurse only when the facility has an average daily occupancy of 60 or fewer residents.”

As part of the survey and certification process, the Survey Agency is required to conduct periodic standard surveys of every nursing home in the State. Through this process the Survey Agency measures the quality of care at each nursing home by identifying deficiencies and assuring compliance with Federal and State requirements. At the conclusion of its review, the Survey Agency posts its results, including direct care staffing data, to the Nursing Home Compare website. This computer generated information is made available to the general public.

At a minimum, States are required to ensure that nursing homes follow these Federal staffing standards. Each State may also implement its own staffing requirements that exceed these standards. Alabama has not established staffing requirements that exceed the Federal standards.

OBJECTIVE, SCOPE, AND METHODOLOGY

The objective of our review was to determine whether Glen Haven was in compliance with Federal and State staffing laws and regulations for nursing facilities.

Based on analysis of data from the Centers for Medicare & Medicaid Services’s (CMS’s) Online Survey Certification and Reporting System, we selected a sample of nursing facilities for review, including Glen Haven.

To accomplish our objective we:

- obtained data for Glen Haven from CMS's Nursing Home Compare website which we reviewed for background, staffing and deficiency information;
- reviewed Federal and Alabama State laws and regulations for nursing homes to determine the staffing standards Glen Haven was required to adhere to;
- obtained staffing schedules and payroll records to determine the facility's direct care hours per resident per day as well as the employee-to-resident ratio for three 2-week periods;
- obtained verification of licensure and certification for all direct care employees to assure that the facility adheres to Federal and State requirements;
- conducted inquiries through Alabama's on-line certification system to determine if all Certified Nursing Assistants (CNAs) were in good standing;
- reviewed the survey and certification process at the Survey Agency and analyzed the results of the two most recent standard surveys conducted at Glen Haven to identify deficiencies and causes; and
- met with the administrator of the facility to obtain an understanding of Glen Haven's policies and procedures for recruiting and retaining staff.

Our review was conducted in accordance with generally accepted government auditing standards. Our review of internal controls was limited to obtaining an understanding of the controls concerning the hiring and scheduling of employees. The objective of our review did not require an understanding or assessment of the complete internal control structure at Glen Haven.

We performed our review at Glen Haven, the OIG Birmingham Field Office, and the OIG Atlanta Regional Office from April 2003 through December 2003. Our review covered a 2-year period from January 1, 2001 through December 31, 2002.

We reviewed the results of the two most recent standard surveys preceding our audit. These surveys were performed by the Survey Agency during June 2001 and June 2002. In addition, we reviewed the information, such as hours of care, for the same periods of time as the surveys and for December 2001, which was a mid-point between the last two surveys. We also reviewed other information pertaining to Glen Haven that was current as of April 2003.

We issued a draft report to Glen Haven on January 15, 2004 and invited them to comment on the finding and recommendation in the report. We have summarized Glen Haven's comments after the findings and recommendations and included the entire text of their comments as an appendix.

FINDINGS AND RECOMMENDATIONS

Glen Haven was in compliance with Federal and Alabama State staffing laws and regulations. Federal staffing regulations are contained in Title 42, CFR, Section 483.30. Alabama has not established staffing requirements that exceed the Federal standards. For three selected 2-week periods, we determined that Glen Haven scheduled its direct care employees in compliance with Federal staffing standards. All 145 current direct care employees at Glen Haven were properly licensed or certified and were currently in good standing as determined by the State. Although not an Alabama State requirement, Glen Haven obtained background checks on current direct care employees. However, we found differences in the direct hours of care that we calculated and the hours of care reported in the Nursing Home Compare website. We recommend that Glen Haven establish a control to independently confirm the validity of the direct care hours that are provided to the Survey Agency for input into the Nursing Home Compare website.

Compliance with Federal and State Laws and Regulations

Glen Haven was in compliance with Federal and Alabama State staffing laws and regulations. For three selected 2-week periods, we determined that Glen Haven scheduled its direct care employees in compliance with Federal staffing standards. All 145 current direct care employees at Glen Haven were properly licensed or certified and were currently in good standing as determined by the State.

The Federal regulations discuss what nursing staff criteria nursing homes must meet to participate in the Medicare and Medicaid programs. Basically, Title 42, CFR, Section 483.30 requires three elements to be met for a facility to be considered as having sufficient staffing:

- (1) a licensed nurse designated “to serve as a charge nurse on each tour of duty”;
- (2) “a registered nurse for at least 8 consecutive hours a day, 7 days a week”; and
- (3) a registered nurse designated “to serve as director of nursing on a full time basis. The director of nursing may serve as a charge nurse only when the facility has an average daily occupancy of 60 or fewer residents.”

We determined that Glen Haven, which was a 200 bed nursing facility, was in compliance with the elements of the Federal and State regulations for three 2-week periods we tested. During the three 2-week periods occurring in June 2001, December 2001, and June 2002, we determined that a charge nurse was assigned for each 8-hour shift. We also determined that the facility had at least one Registered Nurse (RN) for at least 8 consecutive hours per day for each 7-day period. We then determined that an RN was designated to serve as the Director and was also different from the charge nurse. The following table illustrates Glen Haven’s compliance with the regulations:

<i>Federal and State Staffing Requirements</i>	<i>June 2001</i>	<i>December 2001</i>	<i>June 2002</i>
<i>Charge nurse assigned for each 8-hour shift</i>	Yes	Yes	Yes
<i>At least 1 RN 8 hours/day for each 7-day period</i>	Yes	Yes	Yes
<i>Director different from the charge nurse</i>	Yes	Yes	Yes

At the time of our review, Glen Haven had 145 direct care staff. We verified that all RNs and Licensed Practical Nurses (LPNs) had a current license and that all CNAs at Glen Haven had a current certificate. We also verified the certifications of CNAs online. The staffing allocations for nurses and assistants of the direct care staff as well as the licensure and certification standings were:

	<i>RN</i>	<i>LPN</i>	<i>CNA</i>
<i>Current License</i>	10 – Yes	38 – Yes	N/A
<i>Current Certification</i>	N/A	N/A	97 – Yes
<i>Good Standing on State CNA Registry</i>	N/A	N/A	97 – Yes

Based on the results of our review, Glen Haven met the critical elements of the Federal and State regulations. Therefore, we concluded that the facility was in compliance with Federal and State requirements.

Differences between the Nursing Home Compare Website and OIG Calculations

We noted differences in the direct care hours provided to the Glen Haven residents compared to those hours reported in the Nursing Home Compare website. There should be agreement between the direct care hours shown in the official nursing daily hour records and the information made available to the general public.

Glen Haven prepares a Facility Staffing form (CMS-671) and a Resident Conditions and Census form (CMS-672) for each survey period. The Survey Agency then inputs information on direct care hours shown on these forms into the Nursing Home Compare website. Key data regarding Glen Haven and other public nursing facilities is accessible by computer on the Nursing Home Compare website.

While we determined that the information contained in the forms agreed with the information in the website, we found differences in the hours in the website and the hours that we calculated relying on information for the same period furnished by the facility. We calculated the direct care hours for the survey period, June 2002, using the CMS-671 and the CMS-672. The 3.92 direct care hours we calculated using the CMS-671 and CMS-672 agreed with the hours on the Nursing Home Compare website that showed 3.92 hours. Although these numbers agreed, we

noted differences in the direct care hours that we calculated using the staff schedules and payroll records when compared to the direct care hours reported on the Nursing Home Compare website.

Based on staff schedules and payroll records provided by Glen Haven, we determined that Glen Haven provided 3.54 direct care hours during the time of the Alabama State Agency’s June 2002 survey. The 3.54 direct care hours we calculated using facility data was less than the 3.92 hours shown in the Nursing Home Compare website for the same time period – a difference of .38 direct care hours pre resident per day or 10 percent. We also noted that the 3.54 hours of direct care is less than the nationwide average of 3.9 hours and the Alabama Statewide average of 4.2 hours, both as of December 2002.

	<i>OIG Calculation</i>	<i>CMS-671 and CMS-672</i>	<i>Nursing Home Compare Website</i>
<i>June 2002</i>	3.54	3.92	3.92

The direct care hours shown in the official nursing home daily hours records and the information made available to the general public did not agree.

We believe this discrepancy occurred because the Glen Haven facility did not have a control to assure that the data reported to the Alabama State Survey Agency and input into the Nursing Home Compare website agreed with the actual direct care hours.

We recommend that Glen Haven establish a control to independently confirm the validity of the direct care hours that are provided to the Survey Agency for input into the Nursing Home Compare website.

Comments by the Glen Haven Administrator

In a written response to our draft report, the Glen Haven Administrator agreed with our finding and recommendation and stated that a new system has been implemented that will allow the hours to be verified. We have included the entire text of Glen Haven’s comments as an appendix to our report.

OIG Response

We concur with the actions that Glen Haven has taken with respect to the recommendation in our report.

* * * * *

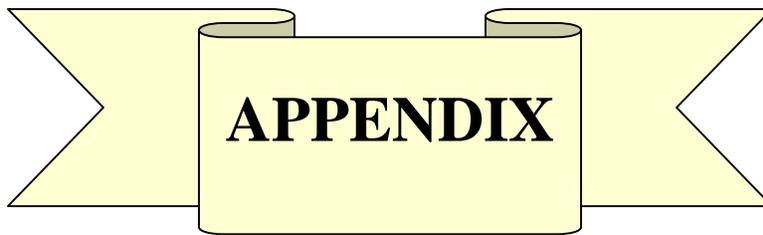
To facilitate identification, please refer to report number A-04-04-04002 in all correspondence related to this letter.

Sincerely,

A handwritten signature in cursive script, appearing to read "Charles J. Curtis".

Charles J. Curtis
Regional Inspector General
for Audit Services, Region IV

Enclosure



GLEN HAVEN HEALTH AND REHABILITATION, L.L.C.

2201 32nd Street
Northport, AL 35476
Phone (205) 339-5700
Fax (205) 339-5761

RECEIVED
FEB 18 2004
Office of Audit Svcs.

February 11, 2004

Charles J. Curtis
Regional Inspector General
for Audit Services, Region IV
61 Forsyth Street S.W.
Suite 3T41
Atlanta, GA 30303

RE: Report Number A-04-04-04002

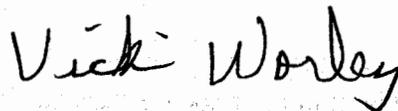
Dear Mr. Curtis:

Please consider this the formal response to report named above. I am in agreement that there were differences in the number of hours of direct care and the numbers reported to the Survey Agency for input into the Nursing Home Compare website.

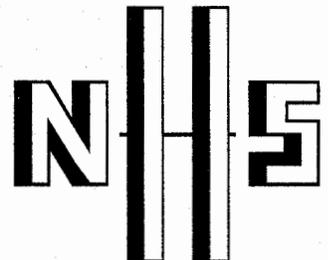
Since the review, a new payroll system has been implemented that will allow the numbers submitted to the Survey Agency during the survey to be easily verified by the administrator prior to submission. We understand the importance of the accuracy of these numbers.

If I can be of further assistance please let me know.

Sincerely,



Vicki Worley, Administrator



ACKNOWLEDGMENTS

This report was prepared under the direction of Charles J. Curtis, Regional Inspector General for Audit Services, Atlanta. Other principal Office of Audit Services staff who contributed include:

Richard C. Edris, *Audit Manager*
Thomas Justice, *Senior Auditor*
Neha Shukla Smith, *Auditor in Charge*
Martyne Hough, *Auditor*
Keith Gore, *Auditor*
Janet Mosley, *Referencer*

For information or copies of this report, please contact the Office of Inspector General's Public Affairs office at (202) 619-1343.