



THE SECRETARY OF HEALTH AND HUMAN SERVICES  
WASHINGTON, D.C. 20201

APR 21 2004

The Honorable Henry A. Waxman  
House of Representatives  
Washington, DC 20515

Dear Mr. Waxman:

Thank you for your letter regarding the Institute of Medicine's (IoM) report, *Keeping Patients Safe: Transforming the Work Environment of Nurses*. Specifically, you cite the report's recommendations regarding nurse staffing in nursing homes, and request that the Department of Health and Human Services (the Department) to advance a regulatory strategy and timeline for increasing nursing home staffing levels to the IoM recommended levels.

I share your concern and recognize the importance of adequate staffing in nursing homes. The "Phase II" study cited in the IoM report was designed to respond to the requirement for a study and a report to Congress on the "appropriateness" of establishing minimum staffing ratios in nursing homes. This study was built upon the "Phase I" study, which was delivered to Congress in July 2000.

The relationship between the number of staff and quality of care is complex, and the Phase I and Phase II studies made good faith efforts at addressing the question. However, as the letter accompanying the Phase II report noted, the Department has concluded that these studies are insufficient for determining the appropriateness of staffing ratios in a number of respects. Specifically, we have serious reservations about the reliability of staffing data at the nursing home level. The Phase I report established that the most universal source of nurse staffing data, the Centers for Medicare & Medicaid Services' (CMS) Online Survey Certification & Reporting System, is not sufficiently reliable in this particular respect.

In addition, the studies did not fully address important related issues such as:

- The relative importance of other factors, such as management, tenure, and training of staff, in determining nursing home quality;
- The reality of current nursing shortages;
- The variation in patient care needs within and across facilities; and
- The operational details such as the difference between new nurses and experienced nurses, staff mix, retention and turnover rates, staff organization, etc.

However, we are working to address critical knowledge gaps. We have recently undertaken efforts that will help inform the decision-makers within the Department about how we can modify and make more effective the public reporting of nursing home staffing information. These efforts will provide information about how to more accurately collect, audit and display staffing information displayed on the Nursing Home Compare website.

In addition, we have been gathering information from states to learn how they are grappling with the complex issue of nursing home staffing. In a recently completed Department study on state-initiated staffing ratios in nursing homes, we have learned that there is considerable variation across the states in the type of ratios, measurement of the ratios, adjustments for case mix, monitoring and enforcement of ratios, and payment for ratios. The study found there is substantial disagreement among various stakeholder groups about the best approach for addressing the myriad and complex issues related to staffing and the varying decisions made across states often reflect the unique circumstances in those states.

The Department has taken, and continues to take, several important actions toward fulfilling our commitment to achieving high quality nursing home care and providing both reliable and understandable information to the public. A focal point of these efforts has been the Nursing Home Quality Initiative (NHQI). The NHQI is a four-phase effort consisting of:

- Regulation and enforcement efforts conducted by CMS and state survey agencies;
- Improved information on quality of care in nursing homes that will be useful to providers, consumers, and policymakers;
- Continual-quality improvement efforts designed to help nursing homes improve their quality of care; and
- Collaboration and partnership in order to utilize available knowledge and resources effectively.


In addition, the Department is increasingly committed to supporting the use of electronic health records (EHRs) across the health continuum and the ability to exchange interoperable clinical information as part of the National Health Information Infrastructure (NHII). We have been gathering information about the current status of EHR implementation in nursing homes and post-acute care settings. We believe, as suggested by the IoM and the National Committee for Vital and Health Statistics, that interoperable EHRs and the NHII will provide the foundation from which improvements in quality of care, including the care provided in nursing homes, will be realized.

Please be assured I am committed to improving the quality of care in nursing homes and agree that adequate staffing is a key component to ensuring high quality. However, using staffing information effectively requires greater knowledge. We are continuing our efforts to improve our knowledge in this highly complex area and will continue to keep Congress and the public informed of our progress.

Page 3 – The Honorable Henry A. Waxman

Again, thank you for your letter. Please feel free to contact me if you have any concerns or questions. An identical letter is being sent to Senator Edwards.

Sincerely,



Tommy G. Thompson