

“At Least She’ll Be Safe”

The COVID-19 epidemic is presenting a severe threat to older Rhode Islanders. Data reveal that 93% of Rhode Island’s 608 COVID- 19 fatalities (as of May 24) were among persons age sixty and over. Almost three quarters of those fatalities were residents of nursing homes or assisted living facilities.

When seniors need some assistance to continue living safely at home, their adult children may push them toward a nursing home instead of homecare because “at least she (or he) will be safe there.” Whether or not they will be happy there is another, often unasked, question. But as for safety, we do know that nursing home residents appear to be at greater risk during this pandemic than seniors living in the community, which should give them pause.

Advocates for nursing homes cite comparative studies showing that most Rhode Island nursing homes provide good quality care. A recent federal study of nursing homes’ infection prevention and controls found only 3.8 percent of 79 homes in RI were cited for a deficiency. Certainly for seniors needing a lot of care the only practical option is a nursing home. Having said that, the inconvenient truth is that anyone residing in a facility that groups together persons with compromised health—not only a nursing home but also a hospital, assisted living residence or group home, is at greater risk for spread of infection than someone living in the community. That’s why for years we have been fighting for state investments in

programs that give seniors better alternatives for “aging in the community” when it’s appropriate.

Historically, nursing homes have been built and operated on a traditional institutional model similar to hospitals. With a few exceptions, Rhode Island’s reform efforts have not addressed the physical environment of most nursing homes. Residents typically live two to a room, and may share a bathroom with one or more other persons. To say the least, those are far from optimum conditions for preventing the spread of infections. Some facilities have changed to allow for more private rooms and bathrooms. However, such efforts have been hampered by limitations of public financing and regulation.

We are heartened that Governor Raimondo is asking the right questions: 1) “Why do we have so many seniors in nursing homes?” and 2) “Do they all need to be there?” We would respond to question #1 that Rhode Island ranks 2nd highest among all states in the number of persons per capita in nursing homes. We invest at least 75% of our total Medicaid long-term care dollars in nursing home care, leaving only 25% in home care. We lag behind, in some cases far behind, many other states that have “rebalanced” their long-term care services by shifting resources from nursing home care and investing in expanding and improving home care. Despite legislative mandates and our advocacy efforts since 2006, Rhode Island’s rebalancing progress had moved at a snail’s pace. As advocates we have failed to be as aggressive and persistent as we needed to be. We’re changing that.

To answer question #2, not all of our senior nursing home residents need to be there or prefer to be there. A Brown University 2016 study found we ranked 33rd in the percentage of “low-care” nursing home residents (persons not needing physical assistance with daily living), with 13.9% of nursing home residents assessed as “low-care.” Maine ranked #1 at only 3.8%. (www.americashealthrankings.org). We believe that many of our state’s “low care” nursing home residents are there because our current homecare system didn’t offer them a better option for care at home.

The pandemic’s impact on nursing home residents demands that we take a hard look at how we provide for the care of vulnerable seniors in our state. We are very encouraged that Governor Raimondo has made a strong public commitment to “rebalancing” Medicaid long term care. We need to ask some tough questions: Can we provide financial incentives that would allow our nursing homes to convert to more private rooms and bathrooms? Some states have done that. That would help with infection control and offer residents a better quality of life. Will we spend the money to pay a living wage to all homecare workers? Will we raise the income limit for a program to assist more moderate-income seniors in paying for home care? It’s time for state leaders, advocates, consumers and providers to join together to re-imagine aging and long term care policy in Rhode Island. Our seniors deserve no less than that.