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### Title

FOREIGN NURSES EXPERIENCES AND PERCEPTIONS OF GERIATRIC CARE IN NURSING HOMES

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**Aim:** To describe current patterns of physician practice in US nursing homes and relationship to quality of care  
**Methods:** Literature review and critique including summary of newly developed quality measures specific to nursing home medical providers  
**Results:** Medicare billing records indicate that a small minority of physicians devote 90% or more of their practice to nursing home care. Emerging evidence suggests that such commitment translates into important outcomes such as reduced hospitalization rates and optimized medication regimes. Organizational structure has also been linked to MDS derived quality outcomes. Competencies for nursing home attending physicians, recently developed by AMDA-The Society for Post-Acute and LTC Medicine, constitute a third pillar contributing to quality. Newly developed quality measures based on the competencies are reviewed as well as implications for policy and research.

### SUPPLY AND DEMAND OF LICENSED PROFESSIONALS IN NURSING HOMES

J. Spetz, *University of California, San Francisco, San Francisco, California, United States*

**Aim:** To describe the employment of licensed professionals in nursing homes, assess challenges in measuring supply and demand, and critically review the literature linking the nursing home workforce to quality of care.  
**Methods:** Analysis of multiple secondary data sources and literature critique.  
**Results:** Data on employment of licensed professionals in the nursing home industry are of mixed quality. While numbers of nurses employed can be obtained from CMS, data is not available for other professionals. Estimates are thus necessary from secondary sources (i.e. American Community Survey; AMA Masterfile). Data available from job postings, is challenging in that it reveals low demand for NPs and PAs in nursing homes. Understanding patterns of employment of licensed professionals in the nursing home industry is crucial, given the extensive literature demonstrating a strong relationship between nurse staffing and quality of care.

### FOREIGN NURSES EXPERIENCES AND PERCEPTIONS OF GERIATRIC CARE IN NURSING HOMES

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**Aim:** To explore foreign nurses' experiences related to the provision of geriatric care in NH settings.  
**Methods:** Focus groups in four California nursing homes.  
**Results:** Seven focus groups with a total of 27 international nurses (RNs and LVNs) were conducted. Findings included that nurses were not trained in their "home" country in geriatric care. Rather, much of their training was related to informal caring for an aged loved one. While turnover among nurses was high, those who were employed in the facility greater than 1 year, they said they were surprised by the job satisfaction and creating relationships with the residents and intended to stay.

### NURSE AND MEDICAL DIRECTOR ROLE PERCEPTIONS AND IMPACT ON QUALITY

J. Karuza, *Department of Psychology, Buffalo, New York, United States*

**Aim:** Describe survey results of nursing home Medical Directors and Directors of Nursing  
**Methods:** Based on the author's previous work that defines the structure of medical staff organization in nursing homes, a survey was developed in consort with USCF Healthforce Center and AMDA - The Society for PA/LTC Medicine. With the assistance of NADONA (National Association of Directors of Nursing Administration) the survey was sent via email to a random sample of nursing and medical directors in the states of California, Texas, Florida and South Dakota.  
**Results:** Respondents documented the common structures of medical staff organization, role of medical directors in activities such as quality improvement, in-service education, antibiotic stewardship and admissions processes and the perceived impact on the quality of care. The perspectives of medical directors and nursing directors are compared and contrasted.

## SESSION 2425 (PAPER)

### ISSUES IN HOME HEALTH CARE AND CAREGIVING

#### PROFILES OF SEPSIS SURVIVORS ENTERING HOME HEALTHCARE: CLUES TO PRIORITIZE CARE FOR MEDICARE BENEFICIARIES

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Sepsis is a growing national health crisis with many sepsis survivors being discharged to home with home healthcare (HHC) services. While the long-term consequences of sepsis have become evident, little is known about the health status of those receiving HHC. The purpose of this NIH-funded study (R01NR016014) was to illustrate sepsis survivors' clinical profiles to enhance patient-centered care. Based on Medicare data of 165,228 sepsis survivors, we describe patient characteristics by sepsis severity and examine associations between illness severity and early HHC visits using descriptive statistics, bivariate analyses, and logistic regression. Overall, the illness profile for sepsis survivors entering HHC is severe. Sepsis survivors are a vulnerable group with significant health needs, as 89.8% took > -five medications, 48% were cognitively impaired, 42% had frailty indicators, and 26% had a history of falls. Health status of 39% was classified as fragile, 21% reported severe pain, and 79% reported dyspnea. The majority (88.4%) were dependent in >3 activities of daily living. Despite this profile, 43% were home for two or more days before the first HHC visit. Although septic shock survivors had the most severe illness profiles, they were 14% less likely to receive prompt nursing visits than other sepsis patients, and their 30-day readmissions were higher (25% versus 19%). Given the importance of timely visits for antibiotic stewardship, medication reconciliation, and infection monitoring, there is vast potential