

March 18, 2021

Senate Committee on Human Services, Mental Health and Recovery Oregon State Capitol 900 Court St. NE Salem, OR 97301

Chair Gelser, Vice-Chair Anderson, and Members of the Committee,

My name is Cynthia McDaniel, and I am a registered nurse and CEO of ElderWise Inc, an Oregon-based consulting and education company that helps long term care providers improve operations, clinical practice, and compliance challenges to provide the highest quality care to older and disabled Oregonians. We specialize and work with assisted living, residential care, memory care communities, other long term care providers, and individuals who care for older adults. I have worked in community-based care in Oregon for more than 30 years.

During my tenure in community-based care (CBC), I have served on numerous public policy workgroups including the rule advisory committee that drafted the acuity-based staffing standards. There was deliberate intent by the workgroup to strengthen CBC staffing standards and accountability by moving away from number-based staffing ratios. The increasing health service and activity of daily living needs of residents demanded a more responsive and holistic approach to staffing that would not only account for the number of residents but also for resident health, behavioral, and service needs, staff training and competency, and even building design and physical layout of the community. Acuity-based staffing systems were the evidence-based solution to account for these multiple factors.

Senate Bill 714 raises the important issue of staffing in Oregon's CBC communities. In my decades of clinical and operational experience, I can unequivocally assure the Committee that appropriate staffing is a critical factor in providing quality care to older adults living in community-based care settings, but it is *not the only factor* in providing quality care.

The system must account for other imperative factors that impact the delivery of quality care including quality training, competency assessment of knowledge and skills, licensed nurse oversight, consideration of the physical layout of the community, event trends, and staff retention rates.

Oregon's skilled nursing facilities (SNFs) currently operate under statutory staffing ratios. The policy rationale for this decision is twofold: 1) Nursing facilities serve residents with higher, more uniform medical acuity needs, and 2) Nearly all residents are beneficiaries of either Medicare or Medicaid.



CBC providers are fundamentally different than SNFs. A resident of an assisted living facility or a residential care facility may need simple assistance with activities of daily living, or more complex or intensive support based on underlying health, behavioral, and chronic medical conditions. In memory care endorsed units, resident acuity varies as well. Staffing plans will depend on each unique resident population, the types of dementia residents are diagnosed with, disease progression, behavioral expressions, chronic medical conditions, and the physical layout of the community.

What truly results in better outcomes for consumers of community-based care are staffing management plans tailored to the specific community of residents they serve. Ratios are an elementary approach to staffing that do not utilize all technology and expertise available to us and ignores variance between communities. Ratios are counter-intuitive to the primary foundation and principles of person-centered care.

As clinicians and practitioners in long term care, we need Oregon's policymakers to be focused on expanding the workforce, addressing staff shortages, and expanding options and assurance for providers to utilize observational and software tools that will help develop staffing plans specifically tailored to each facilities' resident population.

The intent of SB 714 is good, but the policy itself would set providers up to fail. I urge the Committee to consider alternative paths to addressing staffing challenges in long term community-based care that are not based on antiquated staffing ratios.

Sincerely,

Cynthia McDaniel, MSN RN CEO at ElderWise Inc