A Report on
The State of Nursing
Homes in Maryland
2011

Information in this report is based on data downloaded from the Center for Medicare & Medicaid Services website Nursing Home Compare 12/23/2011.

Medicaid percentages valid for 2010 were provided by the Medicaid Division of the Maryland Department of Health & Mental Hygiene.
The information in this report only includes those nursing homes that accept Medicare, Medicaid, or both.
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The 5-Star Ratings System of the Centers for Medicare & Medicaid Services

Under the 5-Star Rating System: 5 stars are far above average, 4 stars are above average, 3 stars are average, 2 stars are below average, and 1 star is far below average.

According to the medicare.gov web site¹;

“The Five-Star Quality Rating System was created to help consumers, their families, and caregivers compare nursing homes more easily and help identify areas about which you may want to ask questions. This rating system is based on continued efforts as a result of the Omnibus Reconciliation Act of 1987 (OBRA ’87), a nursing home reform law, and more recent quality improvement campaigns such as the Advancing Excellence in America’s Nursing Homes, a coalition of consumers, health care providers, and nursing home professionals.

Nursing home ratings are taken from the following three sources of data:

* Health Inspections
* Staffing
* Quality Measures

We provide a star rating for each of these three sources, in case some areas are more important to you than others. Then, these three ratings are combined to calculate an overall rating.

Why is this important?

Nursing homes vary in the quality of care and services they provide to their residents. Reviewing health inspection results, staffing data, and quality measure data are three important ways to measure nursing home quality. This information gives you a ‘snap shot’ of the care individual nursing homes give.”²

It is important to remember that staffing numbers and Quality Measure data are reported by the nursing homes and are not independently verified. So far, Voices for Quality Care (Voices) believes that while not perfect, these star ratings do for the most part give an accurate comparative rating of the quality of care provided by each nursing home and we applaud the Center for Medicare & Medicaid Services for making them available to the general public.
Congratulations to our 5-star nursing homes

These two Maryland nursing homes made the 2012 Honor Roll. They were among only 39 nursing homes, out of more than 15,500 that U.S. News & World Report reviewed, to receive four straight quarters of perfect five-star ratings from the federal Centers for Medicare and Medicaid Services in all three areas—health inspections, nurse staffing, and quality of care—in which CMS evaluates these facilities. While that's no guarantee a home is free of shortcomings or that it's ideal for a specific person, it can provide some piece of mind.2

**Hillhaven Nursing Center:**  Adelphi, Prince George’s County--for-profit, not a part of a chain, owned and managed by Hillhaven Healthcare Management.

**St. Vincent Care Center:**  Emmitsburg, Frederick County--non-profit, not a part of a chain, owned and managed by The Daughters of Charity in St. Louis, MO

and on the flip side... the 1 star homes

Among the 564 U.S. nursing homes that consistently received the lowest rating -- one star -- since the federal government began ratings in late 2008 are these 6 Maryland nursing homes. The list includes nursing homes with a one-star overall rating for each of seven consecutive ratings periods analyzed from 2009 to 2011.3

**Chestertown Nursing & Rehabilitation Center:**  Chestertown, Kent County, for-profit, not part of a chain, owned by Chesapeake Meadows Limited Partnership

**Ellicott City Health & Rehabilitation Center:**  Ellicott City, Howard County, for-profit, part of a chain, owned and managed by Communicle Health Services-Cincinnati

**Future Care Cold Spring:**  Formerly Harford Gardens, Baltimore, Baltimore City, for-profit, part of a chain, owned and managed by FutureCare Health & Management Corporation.

**ManorCare Health Services - Bethesda:**  Bethesda, Montgomery County, for-profit, part of a chain, managed by HCR ManorCare in Toledo Ohio, owned by The Carlyle Group

**ManorCare Health Services - Largo:**  Glenarden, Prince George’s County, for-profit, part of a chain, managed by HCR ManorCare in Toledo Ohio, owned by The Carlyle Group

**Shady Grove Center:**  Rockville, Montgomery County, for-profit, part of a chain, Genesis (owned by Formation Capital/Alpharetta, GA & JER Partners/McLean, VA
Facts & Figures

The number of non-profit nursing homes in Maryland is declining as for-profit homes increase.

All major studies have concluded that non-profit nursing homes in general give better care than for-profit nursing homes.

- In 2008, Maryland had 146 nursing homes operating on a for-profit basis and 87 nursing homes operating on a non-profit basis.
- In 2010, Maryland had 155 nursing homes operating on a for-profit basis and 76 nursing homes operating on a non-profit basis.
- In 2011, Maryland had 158 nursing homes operating on a for-profit basis and 73 nursing homes operating on a non-profit basis.

Fire Safety

Of the 231 Maryland nursing homes listed on the CMS Nursing Home Compare web site

- 210 are fully sprinklered
- 18 are partially sprinklered
- 3 have no sprinkler system at all.
  - Althea Woods, for-profit, Montgomery County, Phillip Meyer-Mountainnare Health LLC in Ooltewash, TN
  - Arcola Health & Rehabilitation Center, for-profit, Montgomery County, SAVA Senior Care in Atlanta, GA
  - Sacred Heart Home, Inc., non-profit, Prince George’s County, Sacred Heart Home

Citations of Health Deficiencies

Of the 231 Maryland nursing homes listed on the CMS web site, 66 had less than 20 health care deficiencies between 10/4/2007 and 10/19/2011.

Unfortunately, we must also report that between 10/4/2007 and 10/19/2011, the following nursing homes had more than 100 health deficiencies. We must also note that both of these nursing homes are owned by a nursing home chain located in Maryland and both are Special Focus Facilities.

114 Health Deficiencies: Kensington Nursing & Rehabilitation Center: Montgomery County: White Oak Healthcare, LLC
111 Health Deficiencies: St. Thomas More Medical Complex: Prince George’s County: Neiswanger Management Services
Between 10/4/2007 and 10/19/2011, the following nursing homes had 60 or more health deficiencies but less than 100. These two groups comprise the Maryland nursing homes with the most health deficiencies for this time period.

- **83 Health Deficiencies:** Harborside Nursing & Rehabilitation Center: Foundation Health Care, Baton Rouge, LA; Baltimore City
- **82 Health Deficiencies:** Manor Care Health Services-Bethesda, ManorCare (owned by HCP, a CA REIT, & the Carlyle Group); Montgomery County
- **78 Health Deficiencies:** Manor Care Health Services-Dulaney, ManorCare (owned by HCP, a CA REIT, & the Carlyle Group); Baltimore County
- **71 Health Deficiencies:** Rock Glen Nursing & Rehabilitation Center, Foundation Health Care, Baton Rouge, LA; Baltimore City
- **69 Health Deficiencies:** Montgomery Village Health Care Center: CareOne LLC, Fort Lee, New Jersey; Montgomery County
- **68 Health Deficiencies:** Manor Care Health Services-Ruxton, ManorCare (owned by HCP, a CA REIT, & the Carlyle Group); Montgomery County
- **65 Health Deficiencies:** Clinton Nursing & Rehabilitation Center: White Oak Healthcare, LLC: Prince George’s County
- **63 Health Deficiencies:** Future Care Irvington: Future Care: FutureCare Heath & Management Corporation: Baltimore City
- **62 Health Deficiencies:** Layhill Center: Genesis (Formation Capital/Alpharetta, Ga & JER Partners/ McLean, VA): Montgomery County
- **62 Health Deficiencies:** Future Care Cold Spring: Future Care: FutureCare Heath & Management Corporation; Baltimore City
- **61 Health Deficiencies:** Fayette Health & Rehabilitation Center: CommuniCare Health Services - Cincinnati; Baltimore City
- **60 Health Deficiencies:** Shady Grove Center: Genesis (Formation Capital/Alpharetta, GA & JER Partners/ McLean, VA); Montgomery County
- **60 Health Deficiencies:** LaPlata Center: Genesis (Formation Capital/Alpharetta, Ga & JER Partners/ McLean,VA; Charles County

**Immediate Jeopardy Level Health Deficiencies**

These are the most serious health deficiencies and they demand immediate correction. These are given letter descriptions indicating three categories of severity. The letters used are J, K, and L with L being the most severe level. From 10/4/2007 to 10/19/2011, 21 citations for immediate jeopardy deficiencies were issued.

**The Charlestown Care Center**, the nursing home component of the Erickson Charlestown Care Center Continuing Care Retirement Community received citations for 5 Immediate Jeopardy Deficiencies on June 9th, 2011. Four were level J deficiencies and one was a level K deficiency. This is by far the most immediate jeopardy deficiencies any nursing home in Maryland has been cited for in the years that Voices has been monitoring this information. All are related to the same incident and involved end-of-life decisions. It necessitates extreme diligence from the families and friends of anyone currently residing in this nursing home regarding Do-Not-Resuscitate situations.

The home with the second highest number of immediate jeopardy deficiencies is the Maryland Baptist Aged Home in Baltimore City, owned by the United Baptist Missionary Convention with two immediate jeopardy deficiencies. One, a level L, the most serious deficiency, was issued on June 2, 2009. The level J immediate jeopardy deficiency was issued on June 21, 2010.
The following nursing homes had one immediate jeopardy deficiency each.

- **Apex Heath of Silver Spring**, Silver Spring, E & H Associates
- **Envoy of Denton**, Denton, Envoy Health Care Services/Consulate Health Care, Maitland, FL
- **Forest Haven Nursing Home**, Catonsville, SAVA Senior Care, Atlanta, GA
- **Forest Hill Health & Rehabilitation**, Forest Hill, CommuniCare Health Services-Cincinnati
- **Ginger Cove**, Annapolis, Annapolis Life Care, Inc.
- **Hammonds Lane Center**, Brooklyn Park, Genesis, Formation Capital/Alpharetta, GA & JER Partners, McLean, VA
- **Little Sisters of the Poor**, Baltimore, Little Sisters of the Poor
- **Montgomery Village Health Care Center**, Gaithersburg, CareOne LLC, Fort Lee, NJ
- **Overlea Health & Rehabilitation Center**, Baltimore, SAVA Senior Care, Atlanta, GA
- **Randolf Hills Nursing Home**, Wheaton, E & H Associates
- **Ridgeway Manor Nursing & Rehabilitation Center**, Catonsville, Burleigh Enterprises Limited Partnership-John E. Burleigh, Ill, Administrator
- **Shady Grove Center**, Rockville, Genesis, Formation Capital/Alpharetta, GA & JER Partners, McLean, VA
- **St. Joseph’s Ministries (St. Catherine’s Nursing Center)** Emmitsburg, The Daughters of Charity, St. Louis MO
- **Villa Rosa Nursing Home**, Michellville, Pious Society of Saint Charles/MidAtlantic Managing

**Actual Harm Level Health Deficiencies**

These are citations of deficiencies in which one or more residents were injured. Sometimes, but certainly not always, they are unavoidable if residents are to be allowed to lead normal lives. In this time span there were 110 citations of deficiency at the actual harm level. Most of the nursing homes had either one or two actual harm deficiencies.

One nursing home, Calvert County Nursing Center, owned by Calvert County Hospital & Nursing Home, Calvert County, had 4 actual harm deficiencies. The following nursing homes had 3 actual harm deficiencies.

- **Ellicott City Health & Rehabilitation Center**, CommuniCare Health Services-Cincinnati, Ellicott City
- **Harborside Nursing & Rehabilitation Center**, Foundation Health Care, Baton Rouge, LA; Baltimore City
- **Layhill Center**, Genesis (Formation Capital/Alpharetta, Ga & JER Partners/ McLean, VA): Montgomery County
- **Rock Glen Nursing & Rehabilitation Center**, Foundation Health Care, Baton Rouge, LA; Baltimore City

Two nursing homes had more than 20 health deficiencies in the Resident Rights category.

- 25 Resident Rights Deficiencies: **St. Thomas More Medical Complex**: Prince George’s County: Neiswanger Management
- 21 Resident Rights Deficiencies: **Kensington Nursing & Rehabilitation Center**: Montgomery County: White Oak Healthcare

The most citations given for deficiencies relating to pressure ulcer development and care is 3. The following nursing homes each have 3. The average percentage of high-risk long-stay nursing home residents with pressure ulcers in Maryland remains 12%.

- **Kensington Nursing & Rehabilitation Center**: Montgomery County: White Oak Healthcare, LLC
- **Manor Care Health Services-Bethesda**, ManorCare (owned by HCP, a CA REIT, & the Carlyle Group): Montgomery County
- **Manor Care Health Services-Dulaney**, ManorCare (owned by HCP, a CA REIT, & the Carlyle Group): Baltimore County
- **Manor Care Health Services-Roland Park**, ManorCare (owned by HCP, a CA REIT, & the Carlyle Group): Baltimore City
- **St. Thomas More Medical Complex**: Prince George’s County: Neiswanger Management Services

http://en.wikipedia.org/wiki/
For-Profit, Non-Profit, and Government Run Nursing Homes

The number of non-profit nursing homes in Maryland continues to decline as the number of for-profit nursing homes, particularly those owned by Real Estate Investment Trusts and private equity firms has increased significantly. Recent studies raise questions about the operations and quality of care in nursing homes run by the large chains.

Here in Maryland, we see that the percentage of non-profit nursing homes with a star rating of above average or far above average is 66%. For government run nursing homes that percentage is 100%. For-profit nursing homes come in at 41%.
This set of graphs illustrates the number of nursing homes in each of the 5 star categories for the nursing home chains with 3 or more nursing homes operating in Maryland. These graphs are arranged according to the percentages of nursing homes in each chain that have achieved a 4 or 5 star rating, Above Average or Far Above Average. The top three chains are non-profit, the rest are all for profit.
Comparison of percentages of residents on Medicaid to CMS star ratings

This chart and the information that produces it continue to amaze us year after year. Although there is some variation from year to year, the overall results in Maryland are generally similar. This is particularly surprising given the current economic state, the continual complaints regarding the levels of Medicaid reimbursements, and the fact that some national studies have found a positive correlation between funding levels and quality of care. The arguments often go on to blame poor performance on high numbers of residents receiving Medicaid funding in a particular nursing home. It seems, however, that in the long run, and probably in the short run as well, the percentage of residents on Medicaid in any given nursing home in Maryland has little to do with the quality of care in that home. In fact, the 1-star group of homes is the only group that does not have homes with a Medicaid percentage above 80%. Both the 2-star and 5-star groups have a range that rises to 100%.
What is happening to long-term care in Maryland?

- We currently have a total of 47 thousand people living in nursing homes and in 1374 assisted living facilities -- all with friends and families. These numbers are sufficient to conclude that every Maryland citizen will be impacted in one way or another by the quality of care in these facilities several times within their lifetime.

- Many studies have indicated that for good care in nursing homes, a minimum of 4.0 hours of care each day for each resident is the lower threshold and that care below a minimum of 2.75 hours creates a setting in which harm to residents can occur. Yet, Maryland continues to insist upon a nursing home minimum of 2.0 hours of care per 24 hours.

- The minimum direct care staff to resident ratio for Maryland nursing homes remains 1 direct care staff person for every 25 residents.

- In the past 4 years, the Oversight Committee on Quality of Care in Nursing Homes and Assisted Living Facilities, managed by the Maryland Department of Aging has consistently addressed only 2 of the 11 items it is required to evaluate and on which it is to make recommendations. There has been no evaluation of these items by this Committee. There have been no recommendations with the single exception of a letter this year to the governor requesting that funding for the Maryland Ombudsman Program not be cut.

Budget cuts decimate government oversight

- People living in nursing homes and the friends and families who love them have few resources in their efforts to secure good care, a high quality of life, and their federally guaranteed rights.

- There is only one agency, the Maryland Office of Health Care Quality (OHCQ), with the authority to go into nursing homes, discover poor care, and require that it be corrected. The OHCQ surveyors and complaint investigators only address issues of noncompliance with state or federal laws. They do not advocate.

- The only other agency with the authority to go into nursing homes and that does advocate for the people living in them is the Ombudsman Program. Where the surveyors from OHCQ are in a building a few days a year, the Ombudsmen are in our nursing homes on a day to day, week to week, and month to month basis. This program has never had the respect, authority, or funding to effectively and efficiently carry out its federally mandated mission. Now cuts to the already insufficient funding are anticipated.

- The budget for both of these programs is a drop in the bucket in the overall state budget, yet the impact of those dollars on the people living in our nursing homes and assisted living facilities and their friends and families is enormous.


3Paul Monies and Anthony DeBarros, *As nursing home care improves, some problems slow to mend*, USA Today

4Special Focus Facilities are the worst 100 nursing homes in the country at any given time. Two nursing homes are given this designation in Maryland. As a home improves, it is removed from the Special Focus Facility list and is replaced by another troublesome home.