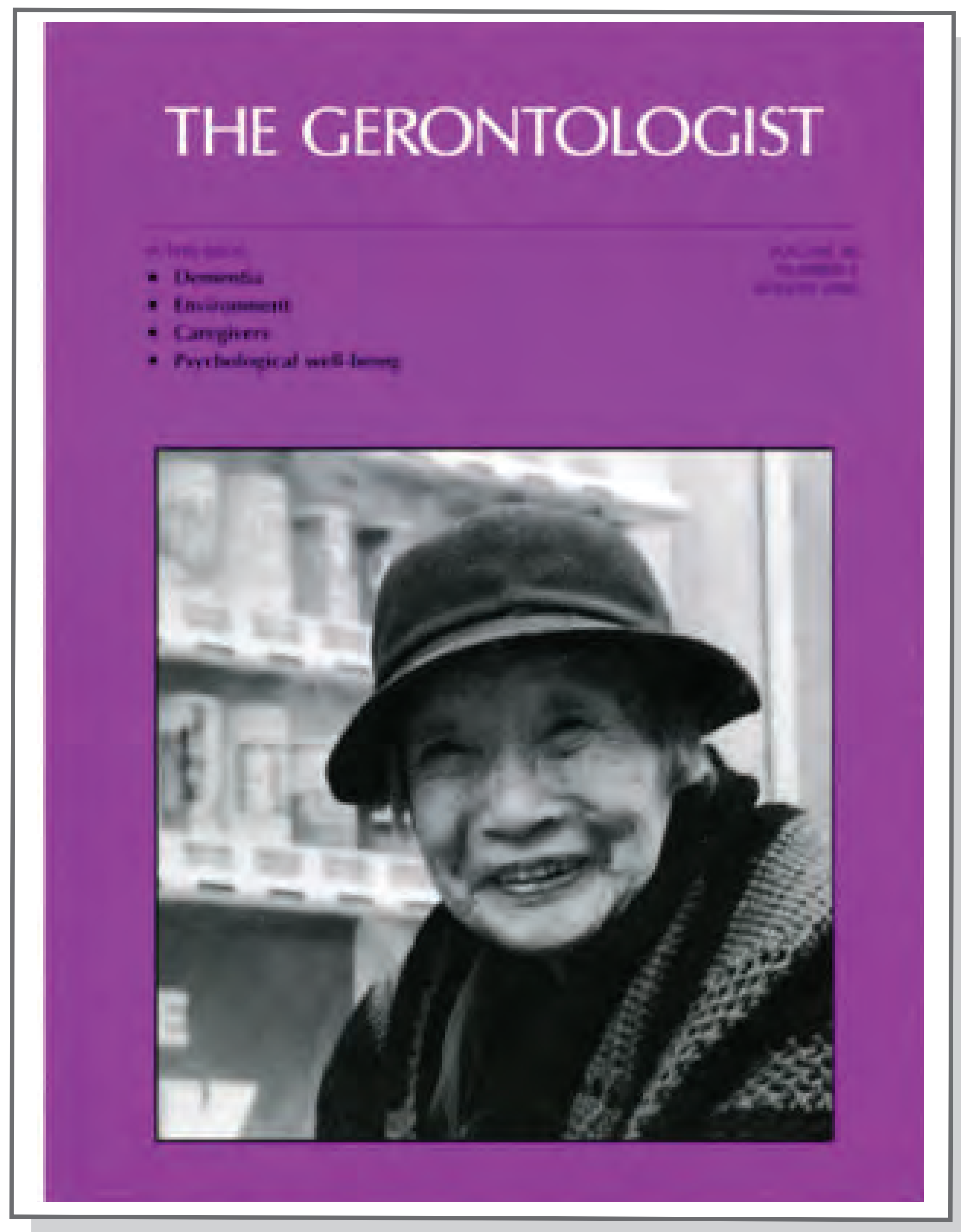


Leading Geriatric Journal Concludes Harm Linked to Understaffing:



“Inadequate staffing and inadequately trained staff are major contributors to poor feeding of residents, inadequate nutritional intake, malnutrition, dehydration, and starvation.” [p. 7]

Leading Journal for Geriatric Nursing Concludes Harm Linked to Understaffing:



“Our findings strongly suggest that inadequate staffing is a major factor that contributes to weight loss... [W]hat is being defined as an eating problem, is often in fact a staffing problem.” (page 19)

If a CNA has 6 residents to assist or feed in a 1-hour period, this allows her to spend only 10 minutes with each person. If she has 10 residents, she can spend about 6 minutes with each person, and if she has 15 residents to care for, she has only 4 minutes per resident...They cannot possibly assist or feed so many residents adequately in such a short period of time.” (page 19)

Leading Journal for Geriatric Medicine Concludes Harm Linked to Understaffing:



“As a result of inadequate staffing, when CNAs had to assist 7-15 nursing home residents, dependent residents did not receive minimally required amounts of fluid, placing them at risk for dehydration.” (page 1187)

“This indicates that supervision was poor and staffing inadequate. In fact, it indicates neglect.” (page 1192)

Leading Journal for Geriatric Nursing Concludes Harm Linked to Understaffing:



“Inadequate staffing has serious consequences for the nutritional care of nursing home residents. A sufficient number of well-educated and supervised staff members are critical to improving care.” [p. 64]

“Throughout the 23-month data collection period, inadequate staffing emerged as a major factor that influenced nutritional care.” [p. 66]

“A serious consequence of inadequate staffing was that some residents got little or no food. Often those who were left in their rooms were the most impaired, physically and cognitively. Sometimes the trays were taken into their rooms, but no one assisted the residents; they were given a few bites of food and sometimes no food at all. The tray was returned to the cart virtually untouched.” [p. 69]

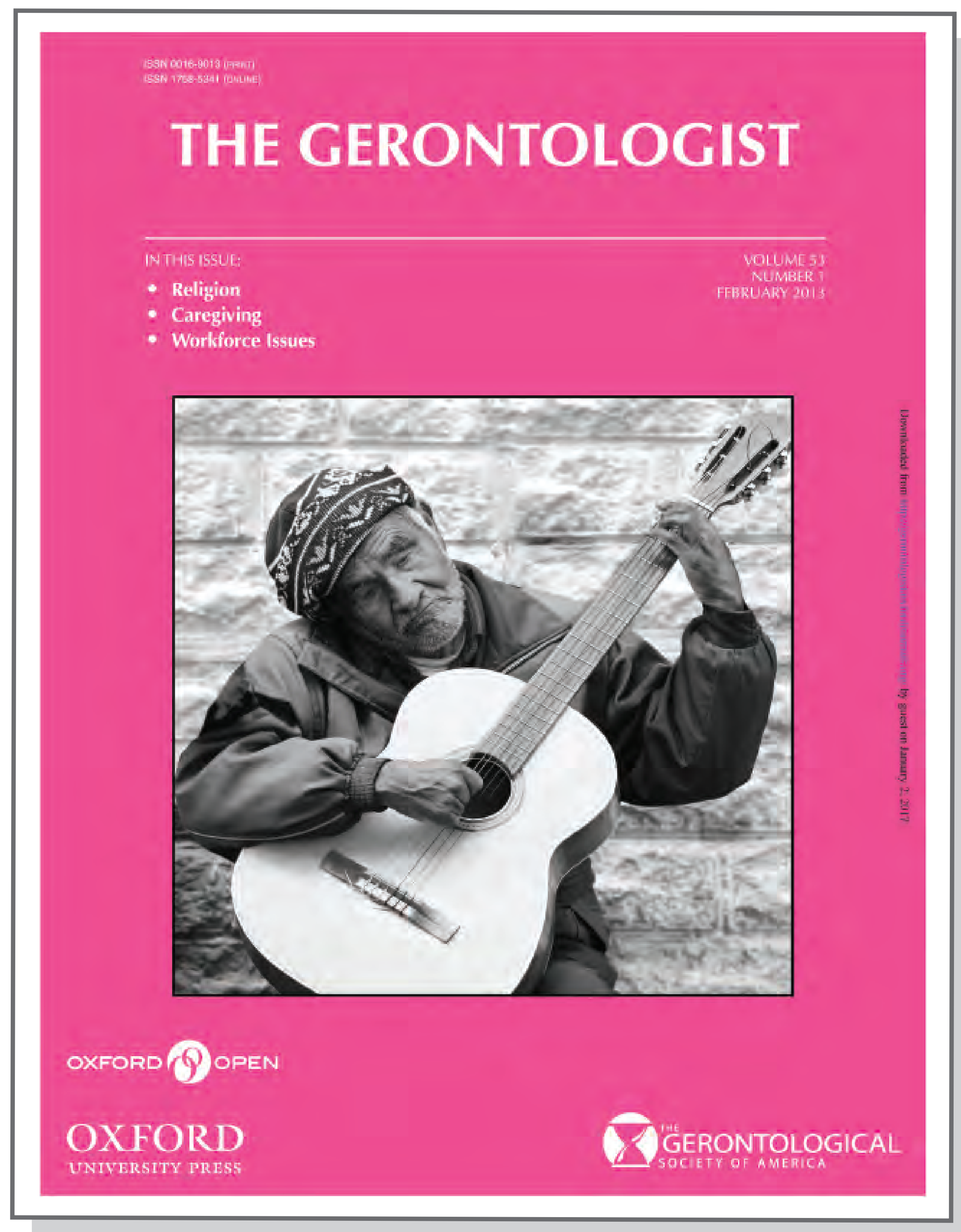
Leading Journal for Alzheimer's Disease Concludes Harm Linked to Understaffing:

Alzheimer's Care Quarterly

“Most pressure sores are preventable if a resident is given proper skin inspection, incontinence care, repositioning and adequate nourishment. However, due in large part to inadequate staffing, these basic needs are often left unmet.” [p. 36]

“Inadequate staffing in nursing homes causes unnecessary pain and suffering to nursing home residents.” [p. 32]

Leading Geriatric Journal Concludes Harm Linked to Understaffing:



“Inadequate staffing and lack of direct care staff supervision were noted as institutional-level factors associated with neglect and poor care quality.” (page 152)

Leading Journal for Geriatric Medicine Concludes Harm Linked to Understaffing:



“Spending excessive time in bed has been associated with detrimental outcomes, including pressure ulcer development, pneumonia, undernutrition, urinary incontinence, infections, and mortality.” [p. 931]

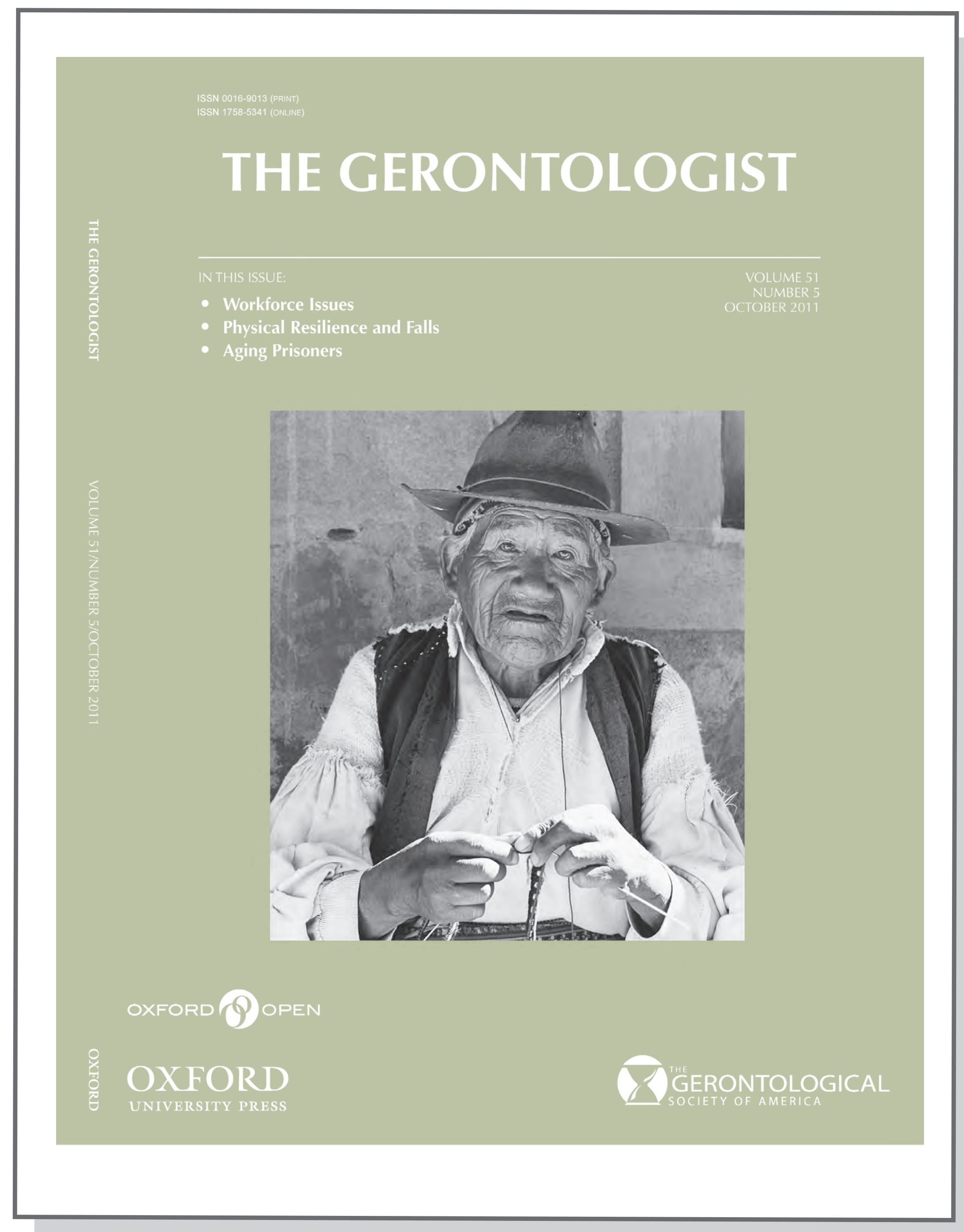
“Residents residing in lower-staffed homes were nearly six times more likely to have more than 50% observations in bed than residents residing in high-staffed homes.” [p. 932]

Leading Journal for Internal Medicine Links Understaffing to Harm:



“Higher rates of resident to resident elder mistreatment were observed among residents cared for by CNAs with higher caseloads.” (page 235)

Leading Geriatric Journal for Medicine Links Health and Safety Deficiencies to Understaffing:



“We found a significant relationship between CNA staffing levels and quality as defined by deficiency citation scores.” (page 6)

“Harrington and colleagues (200) measured the number and type of nursing home deficiencies cited during survey inspections and reported that fewer registered nurse (RN) and certified nurse assistant (CNA) staffing hours were associated with higher numbers of citations, especially citations for poor quality of care.” (page 2)

“This means that facilities with lower CNA staffing provide poorer quality of care controlling for that same facility in earlier years.” (page 5-6)

“The findings from our analyses indicate that with every 6 minute increase (tenth of an hour) in CNA HPRD, there is a 3% reduction in the quality of care deficiency score.” (page 5)