

Cost Cutting Risks Lives in Nursing Home Care

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Nursing homes are big business. With big business comes big profits. To maximize these profits, it seems that nursing home companies will find every possible opportunity to cut costs. There are many ways to cut costs in a business. Unfortunately, cost cutting is rarely consistent with good nursing home care.

In a nursing home, among the best available options is cutting staff. For profit nursing homes carry staff at much reduced levels compared to non-profit nursing homes. In fact, it is estimated that for profit nursing home have an average of 32% fewer nurses than non-profit nursing homes.

It seems the best way to reduce nursing home staff is to reduce the care necessary for nursing home residents. If the residents are easy to manage, there is much less effort required on the part of the staff. More compliant residents means fewer staff.

As it turns out, the best way to achieve compliance is by drugging the resident. The drugging of nursing home residents for purposes of management has been termed chemical restraint. In other words, if they don't leave their rooms, they can't give a staff much trouble.

Numerous studies have been conducted finding that as high as 80% of patients are placed on psychoactive drugs. In a Florida study, 71% of new patients were placed on psychoactive drugs within 3 months of admission. Most had no prior psychiatric diagnosis prior to admission to the nursing home. In many cases both in Florida and beyond, patients are placed on multiple drugs, some with dangerous interactions.

In at least one nursing home, the so-called psychiatric condition for which the drugs were necessary was complaints about the resident's care. In many cases, the drugs are given without the prescription of a physician. And when the resident refuses the medication, the staff will force the resident to take it.

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One might ask, other than the unethical and sometimes forced medication of residents for purposes of maximizing profits, how are the for profit nursing home companies doing otherwise in terms of patient care? Not so good as it turns out. For profit nursing home facilities have almost 50% greater deficiencies in care than do their non-profit counterparts. Many move in and out of compliance, correcting problems long enough to avoid fines only to have the problems quickly resurface.

With the privatization of nursing homes and the increased emphasis on profits, cases of "immediate jeopardy" where violations were likely to cause serious injury or death rose by 22%. Naturally, among the strongest proponents of tort reform is the nursing home industry. The typical argument is that profit motives will increase the standard of care weeding out the bad actors through competitive market forces.

These arguments might carry more weight if the standard of care were not in free fall as opportunistic firms enter the industry with the expectation of higher and higher profits from one year to the next and one patient to the next. There are many good nursing home facilities. There are many that truly care for the welfare of their patients. These are not the ones that need protection from [medical malpractice caps](#). It is the egregious offenders that need those protections and it is those offenders to whom we can least afford to provide them.

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