



Comparing the nurse staffing in Korean and U.S. nursing homes

Hyang Yuol Lee, PhD^a, Juh Hyun Shin, PhD^{b,*}, Charlene Harrington, PhD^c

^aCollege of Nursing, Eulji University, Jung-gu, Daejeon, South Korea

^bDivision of Nursing Science, College of Health Sciences, Ewha Womans University, Seodaemun-gu, Seoul, South Korea

^cDepartment of Social and Behavioral Sciences, University of California, San Francisco, San Francisco, CA

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ABSTRACT

Introduction: The quality of nursing home care has been problematic in both the United States and South Korea; quality is limited to inadequate nurse staffing levels. This article addresses how South Korean nursing home education and training requirements, nurse staffing standards, and actual nurse staffing levels compare with those in the United States.

Methods: The study used secondary documents and data to compare the two countries.

Results: Korea has lower registered nurse and certified nursing assistant standards and actual staffing levels than the United States. In contrast, staffing standards and actual staffing levels for care workers who provide direct care to residents are higher in Korea than in the United States.

Conclusions: Research is needed in Korea to establish an empirical basis for educational requirements, staffing standards, and staffing levels in nursing homes.

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Introduction

Nursing home quality is a major concern in a number of countries (Harrington et al., 2012). In the United States, many studies have documented quality problems in nursing homes, such as resident weight loss, pressure ulcers, infections, pain, depression, and other treatable or preventable problems (Schnelle et al., 2004; U.S. Centers for Medicare and Medicaid Services [CMS], 2001; U.S. Government Accountability Office, 2009). A recent study of nursing home residents found an estimated 22% experienced adverse events, and an additional 11% experienced temporary harmful events during their skilled nursing facility stays (U.S.

Department of Health and Human Services, Office of the Inspector General, 2014). Other studies identified poor quality of care in Canada (Jansen, 2010), in England where new standards and regulatory oversight were established (Dixon, Kaambwa, Nancarrow, Martin, & Bryan, 2010; U.K. Care Quality Commission, 2010), and in Sweden where new guidelines for dementia care units were established (Sweden National Board of Health and Welfare, 2009).

A number of research studies have shown a strong relationship between poor quality of nursing home care and low nurse staffing levels (U.S. CMS, 2001). A systematic review of 87 research articles and reports from 1975 through 2003 found that high total staffing levels, especially of registered nurses (RNs), were

* Corresponding author: Juh Hyun Shin, Division of Nursing Science, College of Health Sciences, Ewha Womans University, 120-750 Helen Hall 205, EwhaYeodaegil 52, Seoul, Republic of Korea.

E-mail address: juhshin@ewha.ac.kr (J.H. Shin).

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associated with improved care processes and resident outcomes for functional ability, pressure ulcers, and weight loss (Bostick, Rantz, Flesner, & Riggs, 2006). Other research reviews and studies found that higher staffing levels relate to lower deficiencies, better resident outcomes, and less avoidable hospitalization rates (Bowblis, 2011; Castle, 2008; Kim, Harrington, & Greene, 2009; Kim, Kovner, Harrington, Greene, & Mezey, 2009; Spilsbury, Hewitt, Stirk, & Bowman, 2011). Although some study results were mixed and inconsistent, the benefits associated with high nurse staffing underline the importance of nurse staffing standards and staffing levels (Backhaus, Verbeek, Van Rossum, Capezuti, & Hamers, 2014).

Nursing home quality and staffing concerns have developed in South Korea, as in other industrialized countries. In South Korea, the elderly population is rapidly increasing, and the need for long-term care (LTC) facilities for elders has grown. The government responded to these increasing needs by passing a law establishing a public LTC insurance program for senior citizens in 2008 (Korean National Health Insurance Corporation, 2011). The purpose of LTC insurance is to provide optimal quality of care to beneficiaries and decrease the burden of caregivers (Korean Ministry of Health and Welfare, 2011b). Two types of South Korean LTC facilities were established: (a) nursing homes divided into small homes (with 10–29 residents) and large homes (with 30 or more residents) and (b) senior congregate housing programs that have more than five but fewer than nine residents (Korean National Health Insurance Corporation, 2011). There were 2,610 nursing homes and 1,742 senior housing facilities in 2012 (Korean Statistical Information Service, 2013).

To be eligible for the South Korean LTC insurance program, elders must be assessed and determined to need LTC by the Korean National Health Insurance Corporation based on the severity of their disease and need for help with activities of daily living (ADLs). Elders who are totally dependent are classified as grade 1, elders who are mostly dependent are classified as grade 2, and those who are partially dependent are classified as grade 3 (Korean Ministry of Law Legislation, 2013a). Individuals in any of the three grades (1, 2, or 3) are eligible for either institutional or home care depending on their preference, but the payment level varies by the type of benefits the individual receives and the level of need. By the end of 2012, approximately 320,261 elders in Korea were assessed as grade 1 (42,611 elders), grade 2 (73,265 elders), and grade 3 (204,385 elders; Korean Ministry of Law Legislation, 2013a). About 69.7% of residents had diagnoses of chronic disease including hypertension (29.3%), diabetes (9.5%), cerebrovascular disease (19.2%), and mental health disease (35%) in 2011 (Korean Health Insurance Policy Institute, 2012). Korean nursing home residents are quite fragile and have intense health care needs; 69% of residents have chronic diseases including psychological disorders, cerebrovascular accident, and hypertension; about 72.9% of residents used medical services; 32.2% of residents experienced hospitalization

previously; and 20.3% were diagnosed with dementia (Korean Health Insurance Policy Institute, 2012). Also, more than half (56.3%) of the residents required assistance with ADLs because of cognitive impairment and imbalance (Park, Lim, Kim, Lee, & Song, 2011).

This article compares nurse staffing in nursing homes in two countries. The article addresses the question of how South Korean nursing home education and training requirements, nurse staffing standards, and actual nurse staffing levels compare with those in the United States. The study used secondary documents and compared data from the two countries. This article describes the findings in the two countries and discusses the need for research in Korea to establish an empirical basis for educational requirements, staffing standards, and staffing levels in nursing homes.

Background

Conceptually, staffing is considered a structural measure of quality related to quality process measures (e.g., resident restraints) and quality outcomes (e.g., pressure ulcers; Donabedian, 1980). Many studies of the relationship between nurse staffing and the nursing home process and outcome measures have been conducted in the United States, as described previously, but almost no research studies have been published in Korea.

One key question is what should the nurse staffing standards and levels be for nursing homes? One U.S. study performed by the U.S. CMS (2001) found that nursing homes with fewer than 4.1 total nurse staffing hours per resident day (hprd) are more likely to cause harm or jeopardy to residents. Specifically, the study found that staffing levels above the following levels are needed to protect residents: 0.75 RN hours, 0.55 licensed vocational or licensed practical nurse (LPN) hours, and 2.78 certified nursing assistant (CNA) hours. These staffing levels are not required, but they are used by the Medicare Nursing Home Compare website as part of the rating of staffing in the United States (Abt Associates, 2013). In addition to the levels recommended by the U.S. CMS (2001), an expert panel and a consumer organization made similar recommendations for staffing levels in nursing homes (Harrington et al., 2000; National Citizens' Coalition for Nursing Home Reform, 1999). No studies of staffing standards or levels were identified in South Korea.

Design and Method

This descriptive study was based on documents and regulations of nursing home staffing standards as well as actual nurse staffing levels collected by researchers from the Internet, government websites, government documents, research papers, and reports in South

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