Updated Rating System for Nursing Homes

The Centers for Medicare & Medicaid Services (CMS) updated its nursing home rating system to incorporate staffing rates of nurses on weekends and annual turnover among nurses and administrators.

According to a CMS statement, low-quality nursing home care is linked to high nurse turnover. The longer nurses work at a given facility, the better they know the residents and may notice slight changes in residents’ health, which may prevent health issues from escalating. Furthermore, consistent policies and protocols that benefit nursing home residents often stem from stable administrative leadership.

“Research and experience tell us that staffing levels and staff turnover can substantially affect quality of care and health outcomes for people living in nursing homes,” CMS Administrator Chiquita Brooks-LaSure, MPH, said in the statement. “This enhancement to the Five-Star Quality Rating System helps to better inform consumers and residents about the care each nursing home provides and encourages nursing homes to improve the staffing of their facilities to foster better outcomes for residents.”

Negative Childhood Experiences and Premature Adulthood Mortality

Poverty combined with crowded housing or parental separation was associated with higher risk of premature death from adolescence into adulthood in a study of adverse childhood experiences (ACEs) by researchers at the National Institute of Child Health and Human Development. The results were published in The Lancet Regional Health.

Participants in this study were children born in 1959 through 1966 to mothers who had enrolled in the Collaborative Perinatal Project, a National Institutes of Health study on child and maternal health with a racially and socioeconomically diverse pregnancy cohort.

Researchers assessed whether participants had ACEs between birth and age 7 years based on a range of information, including medical records, past parental interviews, and psychologist ratings of mothers’ behaviors. Of the 46,129 off-spring, 3,344 had died between 1979 (when the children would have been 12 to 20 years old) and 2016.

Compared with children who experienced low adversity (48% of the sample), children with ACEs classified as family instability or a combination of poverty and crowded housing or parental separation had higher risks of premature death. Children with 2 or more ACEs also had higher risks of death than those with no ACEs. Poverty combined with crowded housing or parental separation remained associated with higher risk of death independent of the cumulative risk of a higher number of ACEs, according to the study findings.

“Our findings and those of previous studies on childhood adverse experiences highlight the need to reduce children’s exposure to the types of adversities that many face today, including poverty, poor housing conditions and parental separation,” lead author Jing Yu, PhD, a research fellow in the NICHD Social and Behavioral Sciences Branch, said in a statement.

Asthma and Oil Spill Cleanup

Workers who cleaned up the 2010 Deepwater Horizon oil spill had an increased risk of asthma 1 to 3 years after the incident, according to research led by the National Institute of Environmental Health Sciences. Environment International published the results.

Researchers examined data from the Gulf Long-term Follow-up Study (GuLF STUDY), which studies the health of people who assisted with cleanup efforts for the spill. Data from 19,018 cleanup workers were compared with data from 5,585 nonworkers. Data included types of cleanup jobs, exposure to total hydrocarbons (THC), and exposure to crude oil chemicals that the US Clean Air Act classifies as hazardous air pollutants—including benzene; toluene; ethylbenzene; o-, m-, and p-xylene; and n-hexane. These chemicals are collectively known as BTEX-H.

The investigators defined asthma as either a clinical diagnosis of asthma, or, for individuals who never smoked, wheezing all or most of the time. Prior to the oil spill, none of the workers had an asthma diagnosis. However, the relative risk of asthma symptoms rose alongside increased exposure to BTEX-H chemicals. Exposure to THC was also associated with a heightened risk of asthma. BTEX-H and THC exposure was determined based on detailed information, including work histories noted in interviews. Compared with 196 nonworkers, 983 cleanup workers reported asthma outcomes, the study noted. For sensitivity analyses that only considered asthma diagnosed by a physician, the links weakened between asthma and BTEX-H as well as asthma and THC. This finding suggests that wheeze symptoms rather than asthma may be responsible for the perceived links. However, the authors also posit that the difference in findings may be attributable to undercounted asthma cases—or a reflection of people with and without health care access.

“Because the GuLF STUDY population is socioeconomically vulnerable, with less than half reporting access to medical care, we included non-doctor confirmed asthma cases to minimize any underreporting of true asthma cases in the population that would be missed due to lack of access to health care,” Dale Sandler, PhD, MPH—corresponding author of the GuLF STUDY and chief of the NIEHS Epidemiology Branch—said in a statement.

Note: Source references are available through embedded hyperlinks in the article text online.