



September 20, 2021

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
Washington, DC 20515

The Honorable Charles Schumer
Majority Leader
U.S. Senate
Washington, DC 20510

The Honorable Mitch McConnell
Minority Leader
U.S. Senate
Washington, DC 20510

Dear Speaker Pelosi, Majority Leader Schumer, Leader McConnell, and Leader McCarthy :

On behalf of the Association of Rehabilitation Nurses (ARN), representing more than 4,500 rehabilitation nurses and more than 14,000 certified rehabilitation registered nurses that work to enhance the quality of life for those affected by physical disability and/or chronic illness, thank you for your work to advance policies to improve the nation's health. ARN is grateful for the inclusion of funding to develop minimum nursing staff to resident ratios in skilled nursing facilities (SNF) in the Build Back Better Act of 2021. Study of nurse staffing minimums and development of corresponding regulations will create evidence-based staffing standards to improve the health and safety of SNF patients. This modest investment will reap benefits for thousands of patients and their families, and we urge the speedy passage of these provisions.

Rehabilitation nursing is a philosophy of care, not a work setting or a phase of treatment. We base our practice on rehabilitative and restorative principles by (1) managing complex medical issues; (2) collaborating with other specialists; (3) providing ongoing patient and caregiver education; (4) setting goals for maximum independence; and (5) establishing plans of care to maintain optimal wellness. Rehabilitation nurses are irreplaceable members of the care team that helps patients regain function and achieve optimal wellness. Rehabilitation nurses practice in all settings, wherever rehabilitation services are provided, including in SNFs, freestanding rehabilitation facilities, hospitals, long-term subacute care facilities, long-term acute care facilities, comprehensive outpatient rehabilitation facilities, home health, and private practices. Rehabilitation nurses practice alongside physiatrists, occupational therapists, physical therapists and others optimize patient health.

Rehabilitation nursing services are vital for the health and safety of SNF patients. Inadequate nurse staffing is a significant predictor of poor outcomes for SNF patients. Patients in nursing homes with adequate staffing are less likely to acquire pressure ulcers and urinary tract infections, have a lower likelihood of hospitalization, and

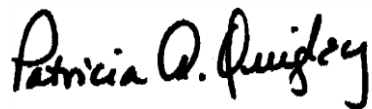
have decreased mortality.¹ Adequate staffing is also vital for nurses' job satisfaction,² which in turn results in better care for patients. Inadequate staffing resources can lead to missed care opportunities. These omissions of care hurt both patients, who are at higher risk for medication errors, infections, falls, and pressure injuries, and nurses, who report higher job dissatisfaction when they are unable to provide the quality of care that patients deserve.³

Unfortunately, inadequate nurse staffing is all too common in SNFs. A recent report by the Government Accountability Office found that only one quarter of SNFs frequently met staffing minimums needed to ensure high quality care.⁴ Inadequate nursing staff is both harmful to patients and costly for Medicare – with preventable critical incidents costing \$5 billion in 2018.⁵ The development of standard nurse staffing ratios in SNFs will help nurses prevent these avoidable patient harms and improve the overall quality of care provided to SNF patients.

The nation is currently facing a severe nurse staffing crisis.⁶ This crisis affects both patients and nurses, both of whom suffer when inadequate resources are allocated to ensure high quality care. The development of minimum SNF nursing ratio standards will address this crisis by requiring SNFs to invest in the nursing workforce and empowering nurses to deliver higher quality care to patients. Investment in SNF nurse staffing will pay dividends in the form of better patient safety, higher quality care, and better job satisfaction for nurses caring for patients in SNFs. For these reasons, ARN applauds the inclusion of the development of minimum SNF nursing staff ratios in the Build Back Better Act and urges Congress to maintain these provisions in the bill.

ARN appreciates the opportunity to provide comments regarding the Build Back Better Act and the need for adequate SNF nurse staffing. If you have any questions, please contact me or ARN's Health Policy Associate, Jeremy Scott (jscott@dc-crd.com). Thank you for your consideration of our comments.

Sincerely,



Patricia A. Quigley, PhD, MPH, APRN, CRRN, FAAN, FAANP, FARN
President

¹ Dall TM, Chen YJ, Seifert RF, Maddox PJ, Hogan PF. The economic value of professional nursing. *Med Care*. 2009;47(1):97-104.

² *Id.*

³ Kalisch BJ, Landstrom GL, Hinshaw AS. Missed nursing care: a concept analysis. *J Adv Nurs*. 2009 Jul;65(7):1509-17.

⁴ Government Accountability Office, Additional Reporting on Key Staffing Information and Stronger Payment Incentives Needed for Skilled Nursing Facilities, at <https://www.gao.gov/assets/gao-21-408.pdf>.

⁵ *Id.*

⁶ American Nurses Association, Letter to Secretary Xavier Becerra, at https://www.nursingworld.org/~4a49e2/globalassets/rss-assets/analettertohhs_staffingconcerns_final-2021-09-01.pdf.