3rd International Conference on

AGING & GERONTOLOGY

Staffing standards and care outcomes in for-profit and not-for-profit religious-based nursing homes

Omotayo Omotowa Idaho State University, USA

Statement of the Problem: Frail and vulnerable older adults residing in nursing homes (NHs) continue to experience poor care outcomes due to nurse staffing levels that are below the levels required for maintaining their well-being. Inadequate licensed nurses staffing hours are detrimental to the residents' quality and safe outcomes. Studies have shown that care outcomes in nursing homes are related to registered and licensed nurse staffing standards/levels, which are affected by profit maximization. The purpose of this study was to determine and compare if there was a relationship between adherence to nurse staffing standards and resident care outcomes in for-profit (FP) and not-for-profit religious-based (NFPRB) NHs using profit maximization theory. I examined the impact of profit maximization on adherence to staffing standards and nurse sensitive care outcomes.

Methodology: A quantitative correlational approach was employed. Information was collected from government public database and analyzed using descriptive and inferential statistics, nonparametric tests, and binary logistic regression.

Findings: Profit measures were not related to staffing standards and care outcomes in the NFPRB. Significant relationships were found between profits measures and staffing standards in the FP NHs. Profits measures were negatively related to care outcomes in the two NHs. And, there were increased mean of ranks for care outcomes and profits when staffing standards were violated. Unlike the FP NHs, no statistically significant relationships were found between registered and licensed staffing standards and care outcomes in the NFPRB NHs.

Conclusion and Significance: The study results can serve as an advocacy instrument for the vulnerable NHs residents, enhance the evidence base for NHs staffing policy making, and positively impact the cost of healthcare. Recommendations: Further research, longitudinal, qualitative, or mixed methodologies, is needed to study the effects of profit measures on NHs staffing and care outcomes.

Biography

Omotayo Omotowa is a Clinical Assistant Professor at Idaho State University (ISU) School of Nursing. Dr. Omotowa is particularly interested in the care of the older adults and staffing standards/levels in nursing homes and public health policy. Dr. Omotowa has served in the Retired & Senior Volunteer Program advisory committee and continues to serve as a member of geriatric symposium planning and health fair planning committees at Idaho State University. She is a member of Sigma Theta Tau International and did serve as the Governance Chair for the Theta Upsilon Chapter. Dr. Omotowa received her BSN from Lewis Clark State College, Lewiston, Idaho and MSN and PhD from Walden University, Minneapolis, Minnesota. Prior to her nursing education, she received her BSC Political Science from Obafemi Awolowo University, Nigeria, Masters in Public Administration from the University of Ilorin, Nigeria, and MA in Political Science from the University of Idaho.

omotomot@isu.edu

Notes: