

# **Delaware Nursing Home Residents Quality Assurance Commission**

## **Annual Report**

**FY 2025**

**(July 1, 2024 – June 30, 2025)**

Additional copies of the report are available from the Commission at: 2540 Wrangle Hill Rd Suite 223 Bear, DE 19701 or by visiting: <http://courts.delaware.gov/AOC/?dnhrqac.htm>. The Commission's Executive Director, Margaret Bailey, can be reached by office phone: 302.836.2133 or email: [margaret.e.bailey@delaware.gov](mailto:margaret.e.bailey@delaware.gov).

# **DELAWARE NURSING HOME RESIDENTS QUALITY ASSURANCE COMMISSION**

## **Members of the Commission as of January 1, 2025**

Elisabeth A. Furber, Chair

Brian Frazee

The Honorable Eric Morrison

Mary Peterson

Dr. Avani Virani, MD

Melissa Winters, PsyD, NHSP

Kori Bingaman, NHA, RN

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Honorable Spiros Mantzavinos

Norma Jones

Cheryl Heiks

# **DELAWARE NURSING HOME RESIDENTS' QUALITY ASSURANCE COMMISSION**

## **ANNUAL REPORT FY 2025**

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## **I. BACKGROUND INFORMATION**

### **The Commission**

The Delaware Nursing Home Residents Quality Assurance Commission (the Commission) was established in 1999 - 29 Del. C. § 7907. The Commission's principal charge is to monitor Delaware's quality assurance system for nursing facilities & assisted living residents in both privately run and state operated facilities with the goal that agencies responsible for the oversight of facilities are coordinating efforts to achieve optimum quality outcomes.

As part of its monitoring effort, the Commission reviews state agencies responsible for investigating complaints of abuse, neglect, mistreatment and financial exploitation, as well as other agencies that have input on the quality of care in Delaware's nursing homes. The Division of Health Care Quality prepares quarterly reports which are reviewed by the Commission as directed by the Joint Legislative Oversight and Sunset Committee. These reports include not only serious deficient practices that affect the quality of care, quality of life and safety & wellbeing of residents but also staffing patterns that may not meet legislative and regulatory requirements.

The Commission is also charged by the General Assembly and the Governor with examining policies and procedures to evaluate the effectiveness of the quality assurance system for nursing facility residents, including the respective roles of Delaware Health and Social Services, the Attorney General's Office and law enforcement agencies as well as health care professionals and nursing facility providers.

Finally, the Commission is required to prepare and submit an annual report to the Governor, the Secretary of the Delaware Department of Health and Social Services (DHSS), members of the Delaware General Assembly and the Director and the Librarian of the Division of Legislative Services. This is the Commission's FY 2025 annual report.

### **Appointment of Commission Members**

DNHRQAC Membership is composed of:

- (1) One member appointed by the Speaker of the House.
- (2) One member appointed by the President Pro Tempore of the Senate.
- (3) Four members serving by virtue of position, or a designee appointed by the member.
  - a. The Attorney General.
  - b. The Executive Director of the Community Legal Aid Society, Inc.
  - c. The Executive Director of the Delaware Health Care Facilities Association.
  - d. The Executive Director of the Delaware Healthcare Association.

(4) Seven members appointed by the Governor.

- a. One member who is a resident or a family member of a resident of a nursing home.
- b. Three members, 1 from each county, who work in a nursing home setting.
- c. A health-care professional.
- d. Two individuals who are each an advocate for people with disabilities or the elderly, or both.

Other notables:

The members of the Commission shall elect a Chair.

A majority of the total membership of the Commission constitutes a quorum. A quorum is required for the Commission to take official action.

The Commission may adopt rules and bylaws necessary for its operation. The Commission may form sub-committees to assist with carrying out their mission.

The Commission, as operated within the limitation of the annual appropriation and any other funds appropriated by the General Assembly, shall furnish staff for the Commission.

### **Frequency of Meetings**

While the Commission is required by statute to meet at least quarterly, the Commission, has been meeting monthly during calendar year 2025. Additionally, DNHRQAC has some subcommittees that meet, both on a regular and “as needed” basis. All meetings are open to the public and offer in-person and virtual attendance options.

## **II. AGENCY REVIEWS**

### **Introduction**

Pursuant to 29 Del.C. § 7907(g)(1), the Commission is required to review and evaluate the effectiveness of the quality assurance system for Delaware nursing home and assisted living residents. To do so, the Commission requests information and takes testimony (a snapshot in time) from representatives of state agencies and other providers. These include the Division of Health Care Quality (DHCQ), the Long-Term Care Ombudsman’s Program (LTCOP), Division of Medicaid and Medical Assistance (DMMA), the Department of Justice (DOJ), Division of Aging and Adults with Physical Disabilities (DSAAPD), Guardianship, law enforcement agencies, other state agencies, health care professionals and industry providers. To that end, the Commission invited representatives from state agencies and other presenters to appear and testify before the Commission.

The following is a summary of the agency reviews and information they presented:

#### Division of Health Care Quality

- Quarterly Nursing Home Staffing Reports.
  - Quarterly Quality Assurance Review Team (QART) reports.
  - Desk reviews of staffing ratios per shift and hours of resident care delivered each day (Hours Per Resident Per Day (HRPD)).
  - Updates on Recertification and Complaint Surveys.
  - Criminal Background Check Center (BCC) which has not been fully functional for many years.
  - Certified Nursing Assistants Schools (including student pass rates).
  - Restricted Long-Term Care Clinical Training Facilities, which are facilities, restricted from offering CNA training due to poor performance on a survey.
  - Adult Abuse Registry statistics.
  - Federal & State Civil Monetary Penalties (CMPs).
    - Amounts Imposed.
    - Facilities applying for and receiving funding for projects.
    - Total amount of funds in each account.
  - Imposition of non-compliance actions by DHCQ, such as:
    - Facility monitors.
    - Ban on admissions.
    - Temporary managers.
  - Exigent Circumstances to prevent skilled nursing facilities from meeting staffing requirements.
  - Number of Delaware facilities with name change changes and ownership changes.
  - Other items related to the safety and well-being of long-term care residents.
- Please note the attached **appendices 1 - 9** relating to FY 25.

#### Division of Medicaid and Medical Assistance

- Discussion related to Long Term Care Medicaid Eligibility Unit and
- Number of LTC Medicaid applications and other details.

#### Project Comfort

- This program distributed blankets and handwritten notes to long-term care (LTC) residents in Delaware during the winter holidays.
- Several blankets were distributed to residents of 21 Delaware LTC facilities. DNHRQAC Executive Director and Commission members assisted with deliveries.

#### Long Term Care Ombudsman Program (LTCOP)

- Representatives from LTCOP have been invited to attend Commission meetings and share updates relating to their services and supports for residents living in skilled nursing facilities and assisted living facilities throughout Delaware.
- LTCOP has not provided a response to these requests.

### Medicaid Fraud Control Unit

- Overview of data and statistics.
- Community outreach and education initiatives and review of trends.

Public Comment was accepted at each Commission meeting. The meetings included in-person and virtual attendance options.

### **III. LEGISLATION**

The Commission followed up on legislation passed during the previous legislative session. The Commission received notice of legislation affecting long-term care residents in the State of Delaware during FY 2025. The following legislation, relating to long-term care was introduced during the 153<sup>rd</sup> General Assembly:

<u>House</u>	<u>SCR</u>	<u>Senate</u>
HB 140	SCR 82	SB 135
HB 302	SCR 97	SB 83
HB 148	SCR 110	SB 155 w/SS2
HB 156		SB 67 w/SA1
		SB 196
		SB 122

Additional bill details can be found at the General Assembly's Webpage: [Home - Delaware General Assembly](#).

SB 155 w/SS2, was passed during this last legislative session, and when enacted, makes the following updates to DNHRQAC's statute:

- Changes the name of the Commission from the Delaware Nursing Home Residents Quality Assurance Commission (DNHRQAC) to the Delaware Residents' Protection Commission (DRPC).
- Adds oversight of assisted living facilities and secured memory care units defined in 16 DE Code.
- Permits the Executive Director to speak on behalf of the Commission, consistent with the Commission's purpose.
- Adds two membership positions (15 members instead of 13).
- Permits the Commission to seek grant funding for staff and to support its purpose.
- Satisfies the Freedom of Information Act requirement relating to a public meeting anchor location by allowing a staff member to man the location.

### **IV. Advocacy Efforts**

During FY 25, DNHRQAC participated in many advocacy efforts.

- Distributed DNHRQAC flyers throughout the State of Delaware.
- Submitted commentary news articles regarding World Elder Abuse Awareness Day (WEAAD), Residents Rights Month and Older Americans Month (see attached appendices).
- Participated in on-going dialogue with DHSS Cabinet Secretary and other Health and Social Service leadership (includes informal advocacy efforts through email) relating to reduction of CNA clinical hours and concerns with the BCC (see attached appendices).
- Outreach efforts to Congressional Delegates.
- Participated in many calls with licensed facilities and multiple stakeholders.
- Attended Post Survey Meetings (PSMs) and other facility events.

Additionally, DNHRQAC staff is serving on the Vulnerable Adult Populations Commission per HB 198 from the 152<sup>nd</sup> General Assembly to improve the response to and number of incidents relating to abuse, neglect and exploitation in Delaware.

DNHRQAC steadily advocated for a Caucus on Aging within the General Assembly to discuss issues affecting the continuum of care for Delaware Seniors and their caregivers. In February 2024, the General Assembly established a newly formed Caucus on Aging. DNHRQAC participates in forums held by the Caucus on Aging and discussions relating to solutions, building consensus and driving the conversation forward.

DNHRQAC has a few active committees including Legislative & Advocacy and Eagles Law Staffing Ratio Waiver.

- Legislative & Advocacy Subcommittee – focuses on analyzing and commenting on legislation, Federal and State regulations and other items on behalf of the Commission.
- Eagles Law Staffing Ratio Waiver Subcommittee – was established to create a formalized nursing home staffing ratio waiver application process and approval process. The process was finalized in the fall 2024 and went into effect January 1, 2025.

DNHRQAC is engaged in systemic advocacy on both the State and Federal level. Advocacy examples at the State level have included

- Following up on Long-Term Care Taskforce recommendations.
- Provided training related to the Eagles Law Staffing Ratio Waiver Application process.
- Provided testimony at Delaware General Assembly Committee hearings.

Moreover, DNHRQAC wrote to the DHSS Secretary and the Joint Finance Committee to advocate for:

- The prompt implementation of the Eagles Law Staffing Ratio Waiver process.
- The filling of vacant positions within DHCQ.
- The restoration of CNA School Clinical Hours.
- The Criminal Background Center and more.

DNHRQAC has remained in contact with the Executive Director of Delaware Criminal Justice Information System (DELJIS) to elevate awareness and provide support for prioritizing the criminal Background Check Center's Rap-back Project.



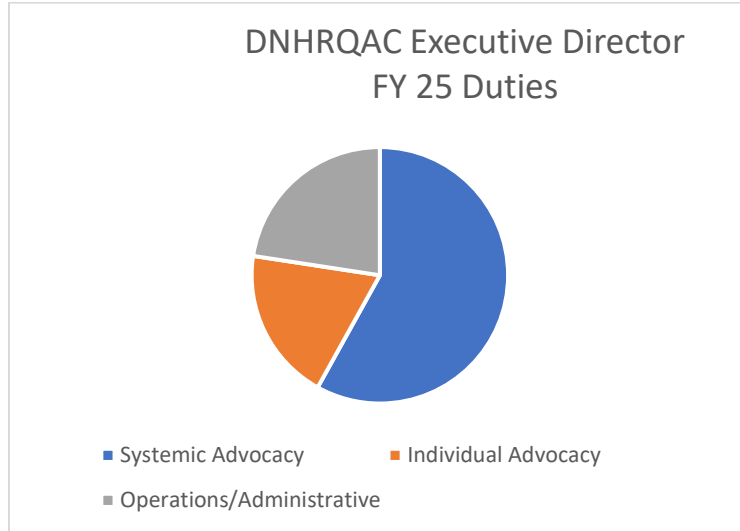
DNHRQAC attended and participated in the following:

- Resident Care Plan Meetings.
- Resident's Rights Related Events.
- Taskforces, budget hearings and committee meetings.
- Calls with Delaware long-term care industry providers and other State agencies.
- Conferences, Workshops and other Training Events.

## **V. DNHRQAC STAFFING**

The Commission is a non-judicial agency located within Delaware Courts. During FY 25, DNHRQAC was granted funds to hire a full-time administrative specialist and casual seasonal (c/s) data analyst III. Both new positions report directly to DNHRQAC executive director. The executive director reports directly to DNHRQAC Chair and budgetary checks/balance is monitored by the Administrative Office of the Courts. The duties of the executive director include:

- Providing DNHRQAC Commission members with most recent Federal and/or State regulations/legislation or other materials regarding long term-care services and supports.
- Working with the Administrative Office of the Courts to develop, coordinate and maintain the commission's operating budget.
- Providing leadership support for the c/s data analyst III and f/t administrative specialist positions.
- Attending budget hearings and representing DNHRQAC during workshops, conferences, etc. on behalf of the Commission.
- Serving on committees, task forces and problem-solving groups.
- Participating in resident care plan meetings, post survey meetings, budget hearings and other on-site facility visits to gain insight regarding quality of life, quality of care, and safety and wellness concerns.
- Acting as liaison with other State agencies, organizations and stakeholders.
- Monitoring and evaluating programs affecting the quality of care for residents in licensed nursing homes/assisted living facilities in Delaware.
- Directing the daily operation of the Commission.
- Planning and executing budgets as defined during the annual budget process.
- Reviewing theories, principles, laws and practices of health or human service programs and services to assist and improve quality of life for residents in long term care and assisted living facilities.
- Responding and interacts with residents, family members, state agencies, facilities and others regarding quality-of-care and quality of life concerns for residents living in long-term care and assisted living facilities.
- Preparing ad hoc reports and other documents as needed.
- Organizing an annual report for the Governor and Delaware General Assembly members. Works closely with State Regulatory agencies, advocacy groups and others regarding quality of care and quality of life.
- Hosting bi-monthly Full Commission and various committee open public meetings to address gaps in service, identify concerns and review laws/policies/guidelines regarding the quality of care in nursing facilities and assisted living facilities.



## **VI. FACILITY VISITS**

DNHRQAC connected with multiple residents, families and facilities to share information and lend assistance regarding safety and quality of care. Often, family members and others contact the Commission for assistance: phone, email, text, etc. On-going distribution of DNHRQAC flyers were provided to Residents, family members and staff during Post Survey Meetings (PSMs), events and other public opportunities.

## **VII. OTHER DNHRQAC ACTIVITIES & ACCOMPLISHMENTS FY25**

- Modified DNHRQAC statute – SB 155 w/SS2 (signed by Governor Meyer on 8/25/2025).
- Presented FY26 Budget to Joint Finance Committee (JFC) for the first time (in previous years, DNHRQAC would submit all budget requests to Judicial Branch for consideration). This included a request for funds to conduct a satisfaction survey for Delaware nursing homes and assisted living facilities – residents, family members and staff. It is anticipated this survey will be rolled out in the Fall 2025. One-time appropriations were granted for this project thanks to the General Assembly.
- Staffing Ratio Waiver Application went live on January 1, 2025. A smaller DNHRQAC committee was formed to review waiver applications and provide recommendations to the full Commission. To date, no waiver requests have been submitted for consideration. See appendices There are appendixes relating to ratio requirements for staff to resident per shift. As a result, there are a number of facilities that have been out of compliance since enforcement action resumed on January 1, 2025.

- Hosted multiple open public meetings to further the Commission’s mission and gain valuable feedback from members of the public. The meetings had an anchor location and virtual component for anyone interested in attending.
- Provided onboarding orientation for new DNHRQAC members and staff.
- Facilitated conversations with State agencies, stakeholders, providers and others to address concerns within long term-care environment that included: workforce, medication shortages, staffing ratios, delivery of services and supports, etc.
- Attended many public events to promote advocacy and awareness relating to long term care services and supports.

### **VIII. FACING FORWARD: COMMISSION GOALS**

The Commission has set forth the following goals in FY26:

- Conduct a resident, family and staff satisfaction survey in Delaware nursing homes and assisted living facilities.
- Host a strategic planning session for Commission members to fine tune short and long-term goals.
- Promote awareness and make necessary systemic changes as a result of SB 155 w/SS2 – name change from Delaware Nursing Home Residents Quality Assurance Commission to Delaware Residents Protection Commission.
- Continue to review State agencies performance and coordination relating to delivery of services and supports in long term care facilities.
- Review activities from other states as they relate to ensuring quality of care in nursing facilities and assisted living facilities and provide recommendations to the Governor and Members of the General Assembly.
- Monitor enforcement of Eagle’s Law to ensure minimum staffing level compliance.
- Enhance outreach efforts to consumers of long-term care to increase Commission profile to ensure the Commission is called upon to review problems and deficiencies in long term care.
- Address quality of life issues for long term care residents including end-of-life and hospice care services.
- Identify “Gaps” in services and obstacles to service in the care for the elderly and disabled.

- Review educational programs such as Certified Nursing Assistants (CNA) and make educational recommendations to enhance the programs.
- Focus on employee recruitment and retention challenges to aid in the quality of care for residents.
- Provide feedback to State agencies and stakeholders regarding the background check center, emergencies and workforce challenges affecting long term care services and supports.
- Continue to expand on DNHRQAC committees that focus on legislative review, advocacy, workforce, staffing and other topics.
- Review and Comment on Federal and State Legislation, Emergency Orders, Regulations and Federal and State Guidance that impacts the quality of care in nursing facilities and assisted living facilities in Delaware.

## **X. Summary of Appendices**

**Adult Abuse Registry (AAR)** - 11 Del. C. § 8564, DHCQ maintains a listing of all persons in the State of Delaware who have a substantiated civil case of abuse, neglect, mistreatment, and/or financial exploitation in their backgrounds. State of Delaware law requires that all long-term care facilities check this Registry before hiring any new employee. Individuals are placed on the Registry for a fixed period of time. Once that period of time has elapsed, the name is removed from the registry. See **Appendix 1** relating to Adult Abuse Registry CY 21- CY 24 statistics.

**Hours per Resident per Day (HRPD)**- The minimum staffing level for nursing services direct caregivers shall not be less than the minimum staffing level required to provide 3.28 hours of direct care per resident per day in skilled nursing facilities (SNF) per 16 Del. C. §1162. In addition to the HRPD requirements, SNFs must also provide a staffing level adequate to meet the care needs of each resident, including those residents who have special needs due to dementia or a medical condition, illness or injury. The Division shall impose Civil Monetary Penalties (CMP) or other remedies for non-compliance. See **Appendix 2** relating to SNFs that did not meet the required 3.28 HRPD threshold in FY 25.

**Eagles Law Staffing Ratio Waiver Applications** – All Delaware skilled nursing facilities are required, once again, to meet staffing ratios per shift listed in 16 Del. C. §1162 effective January 1, 2025. This portion of “Eagles Law” was waived during the public health emergency a few years ago. This component remained paused by the General Assembly until January 1, 2025. SNFs can apply for a time-limited staffing ratio waiver for consideration with DNHRQAC. As of July 30, 2025, there have not been any skilled nursing facilities that have applied for a staffing ratio. See **Appendix 3** relating to the number of facilities that have not met these requirements in FY 25.

**Quality Assurance Review Team (QART)** – The Division provides quarterly reports to the Commission relating to deficiencies cited by surveyors. The level of deficiency is based on

scope/severity. The QART Team reviews each “G” level (harm) or higher deficiency found during an inspection and decides whether the citation should remain at “G” level, be upgraded or downgraded. Per 16 Del C., results from all annual surveys must be conspicuously displayed in the respective facility and a Post Survey Meeting (PSM) must be held to go over the survey findings with residents & family members. See **Appendix 4** relating to FY 25 QART statistics.

**Civil Monetary Penalties (CMP)** – Per 16 DE Code, Federal or State CMPs can be imposed for deficient practice violations. The penalty assessment is based on the seriousness of the violation, circumstances, extent, gravity of the violation and the hazard or potential hazard created by the violation to the health or safety of a resident or residents. The monies are deposited in the Long-Term Care Residents’ Trust Fund if based on a federal regulation, or to the State Civil Penalty Trust Fund, if based on a state statute or regulation. Facilities can apply for CMPs. Additionally, depending on the scope and severity of citations, DHCQ can elect to impose sanctions or other remedies for noncompliance which may include: a ban or suspension on admissions, require a monitor at the facilities expense or transfer current management to a temporary management company. See **Appendix 5** relating to CY 23 and CY 24 CMPs.

**Rebranding/Change in Ownership** – During FY 25, there were several licensed facilities that changed ownership or changed their name. See **Appendix 6** relating to FY 25 Rebranding/Change in Ownership.

**Exigent Circumstances** – Per 16 DE Code, means a short-term emergency or other unavoidable situation, and all reasonable alternatives to the use of a temporary employee as a nursing supervisor have been exhausted. Within 24 hours of the exigent circumstances that require the use of temporary employment agency staffing to fill a nursing supervisor position in a residential health facility, the facility shall notify the Division in writing of the exigent circumstances and the expected duration. See **Appendix 7** that outlines FY 25 Exigent Circumstances data.

**Staffing Ratios per Shift** – Another component to Eagle’s Law, is a staffing ratio per shift requirement for skilled nursing facilities. See **Appendix 8** that provides the number of facilities not in compliance.

**CNA Schools** – The Division of Health Care Quality and Department of Education approve CNA Schools. Skilled nursing facilities may be approved to train CNAs. Some nursing facilities may be restricted from training CNAs or being a CNA clinical host site, due to the imposition of CMPs or other remedies imposed by DHCQ because of non-compliance with regulations. The facility host sites cannot partake in CNA training efforts for 2 years. See **Appendix 9** relating to FY 25 approved CNA Schools, and the attached **Facility Restriction Sites Appendix**.

**Articles and correspondence** – During FY 25, there were several opportunities to promote awareness, by composing an article or writing to other State agencies. Please not the attached appendices relating to Residents Rights Month, World Elder Abuse Awareness Day, Older Americans Month and letters to DHSS Cabinet Secretary about CNA clinical hours and concerns with the BCC.

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