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Sonoma Index-Tribune
October 8, 2020

**COVID and Nursing Homes**

By Martin J. Bennett

Nursing homes are ground zero in efforts to contain the spread of the deadly COVID-19 disease. Skilled nursing homes and residential care facilities account for 80 percent of virus-related fatalities in Sonoma County and 40 percent statewide. Twelve residents have perished due to COVID-related causes at Sonoma's Broadway Villa facility – more than any other senior care facility in the county. Over 100 California care home staff have perished  although, fortunately, none in Sonoma County.
Why are nursing homes such hotspots for COVID-19?

The nursing home industry is no longer composed of small nonprofit operators. According to a 2014 *Sacramento Bee* investigation, corporate chains that run dozens of facilities own 90 percent of California nursing homes. Twenty-five nursing home chains control half of California's 120,000 licensed beds. The industry is dependent on taxpayer funding and receives $10 billion annually, mostly from federal Medicare and state Medi-Cal.

As California's three largest nursing home chains expanded, their combined net income soared from $10 million in 2005 to between $36 million to $54 million in 2015. According to UCSF sociology and nursing professor Charlene Harrington, these corporate chains'

robust earnings are based on three factors: first, a complex ownership structure that enables chains to hide assets and shields owners from liability if patients are mistreated or abused; second, chronic understaffing that cuts labor costs while undermining the quality of care and increasing the likelihood of adverse events and patient harm (such as a fall or bed sores); third, poverty wages for nursing assistants, who are 40 percent of nursing home workers.

The California Employment Development Department reports that in 2019 an entry-level Sonoma County nursing assistant's average hourly wage was $16.33 hour, and annual earnings were $33,966. Nationally, nearly half of nursing aides live in working poor families, earning less than $50,400 a year.

Most nursing aides do not earn a living wage. According to the California Budget and Policy Project, a self-sufficiency wage for two Sonoma County parents, both working full time, is $23 an hour to provide a family income of $81,353 that covers rent, food, transportation, childcare and health insurance.

Ninety percent of nursing aides are women, mostly women of color, who are primary contributors to their family's income — and one in three must rely on public subsidies such as food stamps or Medi-Cal to make ends meet.

Multiple causes, including low wages, have concentrated COVID–19 outbreaks in nursing homes. Most nursing home patients are over the age of 65 and have underlying conditions; nursing homes were slow to acquire the needed personal protective gear; two or more nursing home patients are packed into most rooms; and patients who test positive are difficult to isolate.

In addition, understaffing limits the nursing aides' time with each patient — typically no more than five minutes — so that they may overlook a patient's symptoms or signs that a room is inadequately disinfected, or neglect basic hygiene such as hand washing. Low wages and understaffing contribute to an annual 60 percent turnover rate for nursing assistants that directly impacts patient care quality.

Also, low wages often make aides juggle multiple nursing home jobs, and if infected at one workplace but asymptomatic, they can transmit the disease to residents and workers at another.

In a new study, Georgetown University economist Krista Ruffini compared nursing homes in adjacent counties of different states with different minimum wage levels. In higher minimum wage counties, she found no significant job loss, fees for patients increased only slightly, employee turnover declined, worker training and skills increased, and the quality of care improved. She estimates that if every county increased its minimum wage by 10 percent, patient deaths would decline by 3 percent or about 15,000 a year.

Last year the Sonoma City Council approved a citywide minimum wage (currently $13.50 an hour) higher than the state that will annually phase-in to $17 an hour by 2024. Other North Bay cities such as Novato, Santa Rosa and Petaluma have legislated citywide minimum wages set above the state's. To mitigate the pandemic's effects, all cities and counties in the region should approve a minimum wage higher than the state minimum.

Moreover, Senate Republicans blocked the "Heroes Act" passed by the House of Representatives in May. That legislation allocates $200 billion to fund an additional $13 an hour hazard pay for all essential frontline workers including nursing aides. If Democrats win the Presidency and majorities in Congress in November, they should immediately pass the Heroes Act to provide hazard pay for all essential workers during the COVID19 crisis. Democrats can also approve the "Raise the Wage Act" passed by the House that would double the current $7.25 an hour federal minimum to $15 phased-in by 2024.

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