

Sarah Schumann Testimony

Chair Guthrie, Ranking Member Eshoo and members of the Subcommittee on Health, thank you for giving me the opportunity to testify today.

My name is Sarah Schumann, and I am the vice president of operations for Brookside Inn and Brookside Rehabilitation & Wellness in Castle Rock, Colorado, just south of Denver. I am here to talk to you about the long-term care workforce and how the recently proposed staffing mandate from the Centers for Medicare and Medicaid Services (CMS) will have dangerous consequences, specifically limiting access to care for our most vulnerable.

I am a second-generation nursing home operator. My father, an ophthalmic surgeon, founded our company. We are truly a family-owned and operated business. I grew up in a multi-generational household and we had the privilege to serve three of my grandparents who eventually lived and passed in our communities. My mother, my grandmothers, 3 great grandparents and numerous aunts were all licensed registered nurses. Personally inspired by the nurturing of these women, I became a chaplain with a Master of Divinity degree, and I obtained and maintain an active certified nursing assistant (CNA) license. My life has been blessed with a deep love for our elders and profound admiration of nurses.

Having dedicated my adult life to seniors and long-term care, I can say without a doubt that this is more than just a job. That is why the current workforce challenges and the looming federal staffing mandate are heartbreaking and terrifying.

We are still in recovery mode from the challenges of the pandemic. Our workforce did not have the option to work remotely and quarantine at home. Our staff are truly unsung heroes who have been diligently working without ceasing or relief since March 2020. You are all aware that nursing homes are facing a historic labor shortage¹, but the proposed staffing mandate will only make things worse. Colorado has one of the fastest growing elderly populations, but like the rest of the nation, our caregiver workforce cannot keep pace.² Our facility is doing everything we can to recruit more caregivers, but there are significant obstacles. All of our local healthcare providers including hospitals, hospice, doctor's offices, and in-home health care agencies, currently need and are recruiting licensed nursing personnel as well.

To attract more workers, Brookside has increased our wages by more than 40 percent in almost all caregiver positions. We have significantly increased our benefits package. But even with higher pay and better incentives, we still face hiring challenges simply because the number of qualified caregivers we need are not there.

Unfortunately, we have had to turn to costly temporary staffing agencies, and these contracted licensed nurses do not know our residents like our long-term employed staff do. We did not use agency before the pandemic, but currently at times we have no other choice. I am concerned the staffing mandate would have the unintended consequence of increasing the use of agency staff. This is not the best solution for the quality of care of our residents and it is financially unsustainable.

¹ Bureau of Labor Statistics (BLS) January 2020 –April 2023

² MSU Denver tackles critical shortage of elder-care workers: <https://red.msudenver.edu/2023/msu-denver-tackles-critical-shortage-of-elder-care-workers/>

In one of our facilities, 85 percent of residents rely on Medicaid. A recent analysis of the staffing mandate found that facilities with a higher Medicaid census were less likely to meet the proposed requirements.³ Again, I am concerned that the Administration does not realize the unintended consequences of this policy, and how it will disproportionately impact underprivileged seniors and underserved communities.

As a small, independent operator who serves residents on Medicaid, we do not have the resources to meet this unfunded mandate. Like much of the profession⁴, Wall Street does not own our company. And we do not have related businesses or ancillary services to help keep us financially afloat. I am terrified this staffing mandate would force us to downsize or shut us down completely, and we would be unable to continue serving seniors in our community. We are not alone in this fear—nearly 300,000 nursing home residents nationwide could be displaced and left scrambling for alternative care if this mandate proceeds.⁵

In 2016, prior to the pandemic, I personally began and continue to this day a quest to congress asking for work-force relief. We entered the pandemic with staffing challenges. We cannot be expected to just magically grow new caregivers. Instead of an impossible mandate – something that 94 percent of nursing homes cannot currently meet⁶ – we should be implementing solutions together such as workforce recruitment programs, immigration reform, student loan forgiveness and tax credits for those choosing to work in our profession. And we should be investing in our nursing schools and learning institutions to help build a pipeline of caregivers for a growing elderly population.

The caregivers in our nursing homes care deeply for our beloved residents. The work that we do is sacred. We are helping to strengthen individuals to get up and walk again so they can return home. We are holding the hands of our elders while they take their last breaths. This is one of the most compassionate and selfless professions in the world, and we need your support.

Is there a way we can work together to create supportive policies that will actually make a difference in the lives of our seniors and our long-term care staff? How can we together serve our precious elders? How can we collaborate to support our nursing professionals? Can we together create solutions to develop a much needed workforce for skilled nursing communities?

I look forward to answering your questions today. Thank you.

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³ CLA (CliftonLarsonAllen, LLP). [CMS Proposed Staffing Mandate: In-Depth Analysis on Minimum Nurse Staffing Levels](#). October 2023.

⁴ United States Government Accountability Office. [Nursing Homes: Limitations of Using CMS Data to Identify Private Equity and Other Ownership](#). September 2023.

⁵ CLA (CliftonLarsonAllen, LLP). [CMS Proposed Staffing Mandate: In-Depth Analysis on Minimum Nurse Staffing Levels](#). October 2023.

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