

HOME HEALTHCARE LACKS OVERSIGHT

PODCAST TRANSCRIPT

TIME: 4:56

PUBLISHED TO WEB 3:16PM 10/2/2015

REPORTER RACHEL GODIN

HOST LEAD: In their later years, Ohioans are choosing their own beds rather than those in nursing homes. But their choice to receive care in the comfort of their own home does not guarantee proper treatment by home healthcare agency caregivers. Reporter Rachel Godin explores what lack of oversight means for the future of home healthcare.

GODIN: The patient population served by home health care is large, growing and driven by continued efforts to cut medicals costs. This began in the late 1980s when a nationwide campaign to reduce medical costs led to decreased length of hospital stays and increased early discharge of elderly patients from hospitals to in-home care, where nearly 2/3 of them now spend some of their post-hospital lives.

This poses a few problems. Living longer and needing more assistance, this aging demographic is now viewed as a profitable asset.

TEBEOU: Things that may happen in someone's home, we may never even know about.

Lara Tebeou, a resident of Kent, has witnessed the problem firsthand. She now works as a caregiver at a nursing home, but previously worked for 3 different home healthcare agencies.

TEBEOU: "You know, a lot of people that do home healthcare do it for the paycheck. They're not necessarily doing it because they want to help and care for an individual."

GODIN: Estimates of elder abuse approximate 214k annually but the majority of cases go unreported.

Ohio currently has no overall regulatory framework to oversee the goings on of private in home healthcare.

The federal government does not even provide information about small or new pop-up agencies who are cashing in on inevitable business market our aging bodies provide.

Sally Smith is a supervisor of Adult protective services in Franklin County, Ohio. Her role is to review cases and investigate elderly abuse allegations. She says that because there is no oversight, it is nearly impossible for families to know if the agency they hire to wait on their aging relative is legally and professionally sound.

SMITH: If there are criminal charges filed and this person is found to be guilty or there is a guilty plea, they certainly would have a criminal record and I believe most companies are required to do a criminal background check. We encourage somebody to file charges against a provider because yes, technically they could get rehired if there is not anything that points out they have been convicted of a crime.

GODIN: That's exactly what happened at Tebeou's former employer.

TEBEOU: One of the places I was working for last year. She did not even ask me for my background check. I had to go to her about and give it to her. That was a huge red flag for me because I knew that she probably wasn't doing that with her other employees.

GODIN: Caretakers often go untrained as well. Lack of funds to train the high amount of [workers needed](#) can be attributed to Medicaid [cuts](#) in the last state budget. Tebeou has seen this in the field as well.

TEBEOU: They were hiring people that said they had cared for their grandmother or something but that was the only type of care they had only given. They had no training and no real experience.

GODIN: The fact that agencies get away with it is again a lack of oversight. That's why legislators on both sides are calling for Ohio to license these agencies.

If they were licensed, they would have to abide by the same regulations as nursing homes. Ohio is one of only 8 states that does not license these agencies.

Families, then, are left with little more than the government rating website, which rate a little over half of Ohio's home health care agencies which is less than **any** other state.

Of the [53 percent](#) rated, 41 percent received 2.5 stars or fewer on a scale of 1 to 5, making Ohio's overall performance seventh worst in the country. Smith agrees licensing agencies might make her job of investigating abuse allegations a little bit easier.

SMITH: as a general rule a lot of these health care providers are underpaid for the kind of work they are required to do. and because of it you might not be getting folks with a lot of training. if you ask me I would say that it would be great to have all folks licensed and for there to be a registry.

GODIN: Republican Sen. Dave Burke, Republican State Rep. Barbara Sears, who is the House majority floor leader, and Democratic State Sen. Charleta B. Tavares are the ones to watch. All have made promising statements about improving licensing systems.

GODIN: With a better rating system, systematic checks and licensing, Ohio healthcare evolve passed being a matter of trial and error. For Kent Wired, I'm Rachel Godin