

tion between the goals of profit-making nursing homes and the ideals of our society. Nursing homes, if they are to make a profit, must keep their beds occupied. On the other hand, the aim of our society must be to move aged patients out of beds and into the community to lead as normal a life as possible.

"Further, the concomitant of substantial size in business in America is political power. In the hearings held by this panel, various indications were heard of influence upon the state government by the nursing home industry. Testimony suggested a very strong 'nursing home lobby' exists in the Maryland State Legislature, and that this lobby has had sufficient political power to prevent passage of legislation in Maryland that might set stricter standards for nursing homes. Our investigation disclosed evidence suggestive of political interference with a nursing home inspection.

" * * * We do not question that legislators are entitled to have business interests. We do, however, suggest that the possibility of conflict of interest should be examined. Given this kind of worrisome information, this panel must raise the question of how to control such powerful monetary interests. Have we opened our nursing homes to profiteering?" (pp. 26-27)

"2. *Responsibilities of State and City Health Departments.* The panel is concerned by the bewildering tangle of bureaucratic regulations and inadequate laws which govern licensure and inspection of nursing homes. As stated during the hearings, the confusion between responsibilities of state officials and city officials, differences in reporting forms for infectious disease, and many other evidences of overlapping and potentially conflicting areas of monitoring have led to a situation where 'everybody is responsible yet nobody is responsible.'" (pp. 27-28) (Subsections a, b & c & d follow with specific recommendations to improve the present system.)

"3. During its inquiry the panel received testimony suggesting that improper influence could be applied to those responsible for the inspection of nursing homes. Clearly the inspection system must be above reproach, and individual inspectors must be free to inspect nursing homes without fear. This commission recommends, therefore, that an independent nursing home inspection board be created in Maryland that will include physicians, members of the community, and specifically representatives of local senior citizens groups." (pp. 28-29)

"4. *Responsibilities of the Medical Profession.* The medical profession and its organized spokesman, the Medical and Chirurgical Faculty, must insist upon stringent inspection and adequate standards of care in all nursing homes in Maryland. We urge the Faculty to strengthen its existing committee on nursing homes and insist that it independently develop acceptable standards and methods of supervision to insure that Maryland nursing homes are the best in the nation." (p. 29)

"5. *Establishment of Independent Commission on Nursing Homes.* Our brief examination of nursing homes in Maryland has shown us the serious deficiencies of how we provide for our aging and infirm who can no longer manage their own affairs. It is clear that the citizens of Maryland need to know more about nursing homes. We strongly urge, therefore, that the Secretary of Health and Mental