

LONG TERM CARE COMMUNITY COALITION

Advancing Quality, Dignity & Justice

EMERGENCY ACTION PLAN:

Save Lives of Residents in New York Long Term Care Facilities

Stop COVID-19 from being introduced to skilled nursing facilities

Order facilities with no known or suspected COVID-19 outbreaks to refuse admission to any outside patients with known or suspected COVID-19. When COVID-19 enters nursing homes, it is highly likely to spread to the resident population which is particularly vulnerable to the virus.

Establish COVID-19 dedicated post-acute care facilities across the state and require all hospital post-discharge patients to be tested for COVID-19 and, if positive, transferred to such facilities. Transfers of current skilled nursing facility residents during the pandemic should be kept to a minimum and closely monitored by the Department of Health.

Monitor facilities with residents who have COVID-19 on a daily basis

Assign a NYS Department of Health (DOH) surveyor to conduct daily onsite monitoring visits at each facility with residents who have COVID-19 to ensure infection control practices and staffing levels are safe and to sound the alarm on the need for immediate intervention if they are not.

Deploy strike teams to intervene at facilities when residents are endangered

At the earliest sign of facility crisis related to COVID-19, send strike teams composed of individuals from state and local health departments, local health systems, and the National Guard to provide monitoring, emergency leadership, medical treatment, care services, testing, and supplies. Where residents are found to be experiencing medical distress or signs of neglect, clinical teams, which include doctors, nurse practitioners, and registered nurses from major hospital systems, should be deployed and tasked with providing on-site medical triage and stabilizing residents.

Ensure access to LTC ombudsman services

Require all nursing homes and adult care facilities to inform residents and their representatives on at least a weekly basis of the availability of the LTC Ombudsman Program, including contact information for the Program and the means by which contact can be made privately (i.e., through a facility-provided phone or computer).

Ensure staffing is sufficient to keep residents safe

Require nursing facilities to maintain safe staffing levels and submit daily staffing reports to DOH, the LTC Ombudsman Program, and CMS. Nursing homes and adult care facilities should be provided access to the state's Health and Related Professionals volunteer database. Facilities that fall below 3.5 hours total care staff per resident per day should not be permitted to accept new residents until their ratio improves.

Employ an emergency complaint system to help prevent further harm and outbreaks

Implement an emergency state complaint intake system for immediate jeopardy and infection-related complaints with adequate surveyor resources to conduct immediate investigations.

Mandate transparency on infection levels

Direct state and local health departments to publish facility-level rates of infection on a daily basis.

Require facilities to inform residents, families, staff members, state and local health departments, and the local long-term care ombudsman of known or suspected COVID-19 cases among residents or staff, along with the steps the facility is taking to treat infected residents and to protect other residents.

Require complete testing of all staff and residents when outbreaks occur

Implement contact tracing procedures when a positive result is discovered.

Ensure availability of personal protective equipment (PPE) at long term care facilities

Establish a system for weekly checking on the adequacy of PPE supply and distribution of PPE to each nursing home and adult care facility in the state throughout the epidemic.

Prioritize prevention of infections

Require that each nursing facility employ a qualified, full-time infection preventionist throughout the crisis. Require adult care facilities to, at a minimum, immediately consult with an infection control preventionist to plan and implement an infection control plan.

Require per day civil money penalties for infection control violations

Institute per day Civil Money Penalties (CMPs) for violations of infection control or emergency preparedness regulations that result in positive tests for infection or active infection of any kind.

Impose daily CMPs from the date the infection was detected and the facility failed to implement all required infection control methodologies to halt its transmission to other residents, staff, or visitors.

Enable residents to go home temporarily if they are able to do so

Give residents who wish to return home temporarily the means to do so by expediting assistance to provide home caregivers, making testing readily available, and giving residents the right to return to their nursing homes once the crisis recedes or if their stays at home become unsafe or unmanageable.

Please Note:

This plan was released on April 24, 2020, based on existing policies and known issues and concerns. Please visit our website, www.nursinghome411.org, for the latest information on this and other issues affecting residents in nursing homes and other adult care facilities.

For questions or comments, please email feedback@ltccc.org or call 212-385-0355.