

Focus on Residents' Rights... Family & Resident Councils, Filing Grievances

Long Term Care Community Coalition

www.nursinghome411.org

+ The Long Term Care Community Coalition

- LTCCC: Nonprofit organization dedicated to improving care & quality of life for the elderly & adult disabled in long-term care (LTC). Home to two local LTC Ombudsman Programs in NY.
- Our focus: People who live in nursing homes & assisted living.
- What we do:
 - Policy analysis and systems advocacy;
 - Education of consumers and families, LTC Ombudsmen and other stakeholders.
- Eric Goldwein: LTCCC's Policy & Communications Director.
- Richard Mollot: LTCCC's Executive Director.
- Website: www.nursinghome411.org.



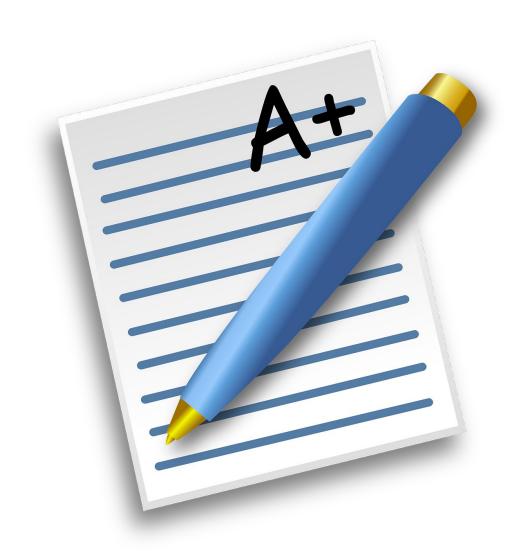
Today's Agenda

- **COVID-19 update.**
- Family & Resident Councils...
 - ✓ Residents' rights during the COVID pandemic;
 - ✓ Family & resident council rights;
 - √ Voicing grievances; and
 - Accessing information about your facility.
- Tools to support residentcentered advocacy.



LTCCC Homework Assignment(s)

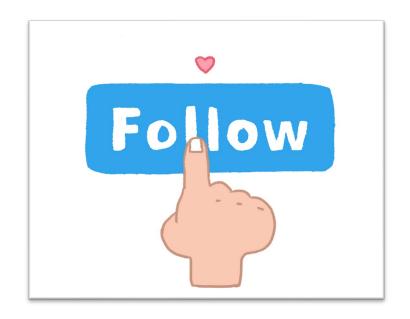
Don't worry. It's an easy A.



+ LTCCC Homework Assignment(s): Follow Us!

- Sign up for Alerts & Updates: https://secure.everyaction.com/mI4P7049xkmdera3azWhJ
- Subscribe to our YouTube Channel: https://www.youtube.com/longtermcarecommunitycoalitio
 https://www.youtube.com/longtermcarecommunitycoalitio
 n?sub confirmation=1
- Subscribe to the Nursing Home 411 Podcast and rate/review
 - Apple: https://podcasts.apple.com/us/podcast/nursing-home-411-podcast/id1485005242
 - Spotify: https://open.spotify.com/show/2955T2AVbuc3H71zmu311u
- Like our Facebook Page: https://www.facebook.com/LTCCC
- Follow us on Twitter: <u>twitter.com/LTCconsumer</u>
- And...

See Zoom chat for links





Extra Credit (and automatic A+): Donate

- LTCCC is a small organization, but with your help we can make a big difference in residents' lives
- Please support our work to ensure that LTC residents receive the care they deserve and are treated with dignity in 2021
- Donate @ https://nursinghome411.org/sup port-our-mission/
- Shop with Amazon Smile and .5% of purchases will go to your favorite organization (LTCCC) https://smile.amazon.com/gp/chpf/homepage/ref=smi_c hpf_redirect?ie=UTF8&ein=13-3565781&ref=smi_ext_ch_13-3565781_cl
- Shop with iGive and part of purchases will go to LTCCC: https://www.igive.com/welcome/lp15/wr35.cfm?c=2766
 8&m=426925&jltest=1

See Zoom chat for links





COVID-19 Data Update

COVID-19 LTC Data: It's Not Just COVID

- Beyond the virus...
 - Isolation
 - Abuse & neglect
 - Substandard care
 - Touch starvation
 - Residents losing ability to speak
 - Poor hygiene (no haircuts)
- Associated Press: "Not just COVID"
 - For every two LTC COVID victims, there's another who has died prematurely of other causes
 - 40,000 excess deaths since March
- <u>LTCcovid.org</u>: Visitation restrictions associated with...
 - Loneliness
 - Depression
 - Behavioral problems
 - Incidents involving aggression
 - Worse quality of care



Associated Press: "Not just COVID." Photo by June Linnertz, via AP.

+ COVID-19 LTC Data: U.S.

- "A bleak milestone" (Sources: <u>Kaiser Family Foundation</u> & The COVID Tracking Project.)
 - **110,026** deaths (291,017 overall)
 - 841,495 cases (resident & staff) in 27,602 facilities
 - Varies by state, community, etc.
 - Racial disparities: NHs with higher proportion of black/Hispanic residents → higher share of COVID cases & deaths (KFF)
 - Holiday spike ahead?
- CMS LTC COVID Data (only includes NHs)
 - **377,510** LTC resident confirmed cases (322,690 staff confirmed cases)
 - **76,542** LTC resident deaths (1,162 staff deaths)
 - User-friendly data @ NH411 https://nursinghome411.org/facility-level-covid-data/



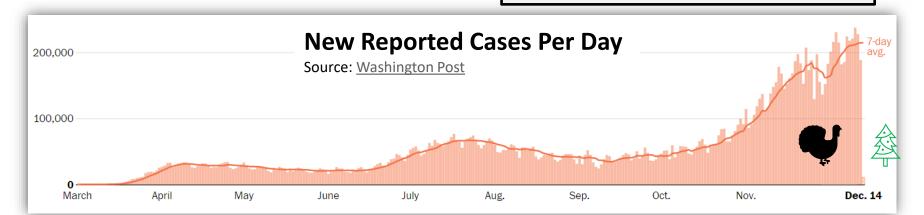
Take data with a grain of salt.



- Underreporting
 - ~1320 facilities did not submit data for week ending 11/29/20. (Higher than previous weeks)
- Data entry errors
- It's not just about cases & fatalities

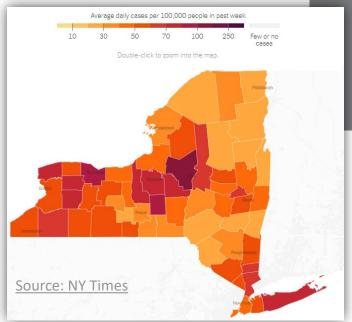


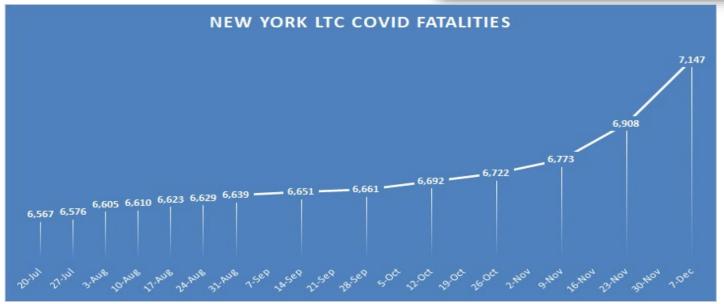
Roughly 2 in 5 U.S. COVID deaths are in long-term care facilities.



↓ COVID-19 LTC Data: New York

- NY DOH (12/7/20)
 - 7,147 LTC deaths in NY nursing homes & adult care facilities
 - Rising: +239 in 14 days
 - Excludes fatalities outside facility
 - Rising in some counties (Erie, Monroe)
- Warning: In the past week, New York's overall new daily...
 - Reported cases rose 5.8%
 - Reported deaths rose 66.2%
 - COVID-related hospitalizations rose 24.1%
 - Source: Washington Post (12/15/20)





Source: NY DOH. Data available at https://nursinghome411.org/ny-nursinghome-covid-data/

Basic Rights of...

Family & Resident Councils

+ News Flash! Nursing Home Residents *Still* Have Rights!

From the start of the COVID-19 pandemic, the federal Centers for Medicare & Medicaid Services (CMS) waived a number of federal rules for nursing home care and oversight.

Waived or Changed

- Staff training requirements
- Visitation rights
- Annual inspections
- Complaint investigations (unless identified as "immediate jeopardy")

NOTE: Some of these waivers have been modified or removed.

Not Waived

- Quality of care standards
- Quality of life standards
- Cleanliness and grooming
- Toileting assistance
- Freedom from unnecessary pressure ulcers
- Freedom from unnecessary drugs

+ What are the Requirements for Nursing Homes in Respect to Resident and Family Councils?

The federal Nursing Home Reform Law states that nursing homes "must protect and promote the rights of each resident," including a resident's right to "organize and participate in resident groups" and a family's right to "meet in the facility with the families of other residents "

- Federal standards provide residents and families the following protections
 - The facility must provide a resident or family group, if one exists, with private space; and take reasonable steps, with the approval of the group, to make residents and family members aware of upcoming meetings in a timely manner.
 - Staff, visitors, or other guests may attend resident group or family group meetings only at the respective group's invitation.
 - The facility must provide a designated staff person who is approved by the resident or family group and the facility and who is responsible for providing assistance and responding to written requests that result from group meetings.

- + Federal standards provide residents and families the following protections (continued)
 - The facility must consider the views of a resident or family group and act promptly upon the grievances and recommendations of such groups concerning issues of resident care and life in the facility.
 - The facility must be able to demonstrate their response and rationale for such response.
 - This should not be construed to mean that the facility must implement as recommended every request of the resident or family group.

+ Rights of Resident & Family Councils

LONG TERM CARE COMMUNITY COALITION

Advancing Quality, Dignity & Justice

CONSUMER FACTSHEET: RESIDENT & FAMILY COUNCILS

Resident and Family Councils can play a very important role in improving care and quality of life in a nursing home. However, residents and families can face challenges in respect to organizing and meeting in a way that is independent of the facility staff and enables them to make their voices heard.

The new federal nursing home standards clarify and strengthen requirements for nursing home Resident & Family Councils. Following are relevant provisions in the regulations that you can use to support a vibrant and effective Resident or Family Council in your nursing home.

Please note: (1) Text in italics is directly from the federal regulations. (2) Brackets provide references to the federal regulations and the F-tag number (used when a facility is cited for failing to meet the requirement). (3) These standards are applicable to all residents in licensed roursing homes in the United States, whether they are short-term or long-term, private pay, Medicaid, Medicare or have another type of insurance. (4) Where the resident lacks capacity to make decisions and/or has assigned decision-making to sumence else, that person takes the place of the resident in exercising these rights.

What is a Resident or Family Council?

The new federal regulations specify that residents and families have the right to join together to:

- Discuss and offer suggestions about facility policies and procedures affecting residents' care, treatment, and quality of life:
- Support each other;
- Plan resident and family activities;
- Participate in educational activities; or
- For any other purpose.

THE LAW

I. Resident & Family Councils [CFR 483.10(f)(5) F-565]

The resident has a right to organize and participate in resident groups in the facility.

- The facility must provide a resident or family group, if one exists, with private space, and take reasonable steps, with the approval of the group, to make residents and family members aware of upcoming meetings in a timely manner.
- The resident has a right to participate in family groups.
- The resident has a right to have family member(s) or other resident representative(s) meet in the facility with the families or resident representative(s) of other residents in the facility.

 Staff, visitors, or other guests may attend resident group or family group meetings only at the respective group's invitation.

II. Facility Responsibilities for Resident & Family Councils

- The facility must provide a designated staff person who is approved by the resident or family
 group and the facility and who is responsible for providing assistance and responding to written
 requests that result from group meetings.
- The facility must consider the views of a resident or family group and act promptly upon the grievances and recommendations of such groups concerning issues of resident care and life in the facility.
 - o The facility must be able to demonstrate their response and rationale for such response.
 - This should not be construed to mean that the facility must implement as recommended every request of the resident or family group.

Considerations for Resident-Centered Advocacy

- Residents and families have the right to form and participate in a Council.
- Residents have the right to be a member of the Family Council and to decide if their family member or other designee participates in a Family Council.
- Nursing homes are required to provide a private space for Council meetings and can only have a staff person in attendance if he or she is invited by the Council.
- The nursing home must have a designated staff person who has been approved by the Council and is responsible for providing assistance to the Council and responding to written requests from the Council.
- Nursing homes must consider the Council's concerns and recommendations. While they are
 not obliged to do everything that the Council wants, nursing homes are required to
 demonstrate their response to the Council's concerns and recommendations and provide a
 rationale for their response.
- When the state surveyors come for an inspection they should be interviewing representatives from Resident and Family Councils to determine if these requirements are being fulfilled. For example, they should ask:
 - How are views, grievances or recommendations from the Council considered, addressed and acted upon? and
 - How do facility staff provide responses, actions, and rationales to the Council?

RESOURCES

- <u>WWW.NURSINGHOME411.ORG</u>. LTCCC's website includes a variety of resources to support resident-centered advocacy, including all of our webinar programs and fact sheets.
- <u>WWW.THECONSUMERVOICE.ORG.</u> The Consumer Voice has numerous materials and resources for residents, family members and LTC Ombudsmen, including substantial resources on developing and empowering a family council.

+

Residents Rights...

Access to Records

+ Access to Resident Records

The resident has the right to access personal and medical records pertaining to him or herself.

The facility must provide the resident with access to personal and medical records pertaining to him or herself, upon an oral or written request, in the form and format requested by the individual, if it is readily producible in such form and format (including in an electronic form or format when such records are maintained electronically); or, if not, in a readable hard copy form or such other form and format as agreed to by the facility and the individual, within 24 hours (excluding weekends and holidays); and

Access to residents' records has become a challenging issue for families. It is important to remember that. if the family member is the resident's representative, they take the resident's place in respect to access to records and other rights.

+ Copies of Resident Records

2. The facility must allow the resident to obtain a copy of the records or any portions thereof (including in an electronic form or format when such records are maintained electronically) upon request and 2 working days advance notice to the facility.

The facility may impose a reasonable, costbased fee on the provision of copies, provided that the fee includes only the cost of: (A) Labor...; (B) Supplies for creating the paper copy or electronic media if the individual requests that the electronic copy be provided on portable media; and (C) Postage, when the individual has requested the copy be mailed. 4

Residents Rights...

Complaints & Grievances

- + Complaints & Grievances About Care, Dignity, Treatment, Etc...
 - The resident has the right to voice grievances to the facility or other agency or entity that hears grievances without discrimination or reprisal and without fear of discrimination or reprisal.
 - Such grievances include those with respect to care and treatment which has been furnished as well as that which has not been furnished, the behavior of staff and of other residents, and other concerns regarding their LTC facility stay.
 - The resident has the right to and the **facility must make prompt efforts... to resolve grievances...**.
 - The facility must establish a grievance policy to ensure the prompt resolution of all grievances regarding the residents' rights.... Upon request, the provider must give a copy of the grievance policy to the resident.

+ Complaints & Grievances (continued)

Requirements for a Nursing Home's Grievance Officer

- Responsible for overseeing the grievance process, receiving and tracking grievances through to their conclusions;
- leading any necessary investigations by the facility;
- maintaining the confidentiality of all information associated with grievances, for example, the identity of the resident for those grievances submitted anonymously,
- issuing written grievance decisions to the resident; and
- coordinating with state and federal agencies as necessary in light of specific allegations.

+ LTCCC Fact Sheet: Grievances

LONG TERM CARE COMMUNITY COALITION

Advancing Quality, Dignity & Justice

CONSUMER FACTSHEET: RESIDENT GRIEVANCES

Too often residents and families are hesitant to file a complaint about problems with their nursing home's care or quality of life. They may think it is not going to do any good or are worried that they will face retalation from facility staff.

The new federal nursing home standards make substantial improvements for how complaints (referred to as 'grievances' in the regulations) are handled. These changes are meant to ensure that a resident's concerns are heard and responded to, and that individuals who complain are protected from retaliation. This fact sheet presents key elements of the new federal requirements which you can use to support your resident-centered advocacy.

Please note: {1} Text in italics is directly from the federal regulations. {2} Numbers in brackets refer to the provision in the federal regulations (42 CFR xx) and F-tag used by surveyors when a deficiency is cited. (3) These standards are applicable to all residents in licensed nursing homes in the United States, whether they are short-term or long-term, private pay, Medicaid, Medicare or have another type of insurance. (4) Where the resident lacks capacity to make decisions and/or has assigned decision—making to someone else, that person takes the place of the resident in exercising these rights.

THE LAW

- I. Right to Voice Grievances [42 CFR 483.10(j) F-585]
- The resident has the right to voice grievances to the facility or other agency or entity that hears grievances without discrimination or reprisal and without fear of discrimination or reprisal. Such grievances include those with respect to care and treatment which has been furnished as well as that which has not been furnished, the behavior of staff and of other residents, and other concerns regarding their LTC facility stay.
- The resident has the right to and the facility must make prompt efforts... to resolve aries are.
- The facility must make information on how to file a grievance or complaint available to the resident.
- The facility must establish a grievance policy to ensure the prompt resolution of all grievances regarding the residents' rights.... Upon request, the provider must give a copy of the grievance policy to the resident.
- II. Requirements for a Nursing Home's Grievance Policy
- Notifying resident individually or through postings in prominent locations throughout the facility
 of the right to file grievances orally (meaning spoken) or in writing;
- Safeguarding the resident's right to file grievances anonymously;

- Provide the contact information of the grievance official with whom a grievance can be filed, that is, his or her name, business address (mailing and email) and business phone number;
- Provide a reasonable expected time frame for completing the review of the grievance;
- Honor the resident's right to obtain a written decision regarding his or her grievance; and
- Provide the contact information of independent entities with whom grievances may be filed, that is, the pertinent State agency, Quality Improvement Organization, State Survey Agency and State Long-Term Care Ombudsman program or protection and advocacy system.

III. Requirements for a Nursing Home's Grievance Officer

- Responsible for overseeing the grievance process, receiving and tracking grievances through to their conclusions;
- leading any necessary investigations by the facility;
- maintaining the confidentiality of all information associated with grievances, for example, the identity of the resident for those grievances submitted anonymously,
- issuing written grievance decisions to the resident; and
- coordinating with state and federal agencies as necessary in light of specific allegations.

Requirements for Written Grievance Decisions

- The date the grievance was received,
- Summary statement of the resident's grievance,
- The steps taken to investigate the grievance,
- A summary of the pertinent findings or conclusions regarding the resident's concerns(s),
- A statement as to whether the grievance was confirmed or not confirmed.
- Any corrective action taken or to be taken by the facility as a result of the grievance, and
- The date the written decision was issued.

RESOURCES

- <u>WWW.NURSINGHOME411.ORG</u>, LTCCC's website includes a variety of resources to support resident-centered advocacy, including all of our webinar programs and fact sheets.
- <u>WWW.THECONSUMERVOICE.ORG</u>. The Consumer Voice has numerous materials and resources for residents, family members and LTC Ombudsmen.

For Quality of Care Cases Only

U.S. Attorney's Office:

https://www.justice. gov/usao/find-yourunited-states-attorney

Ask for Elder Justice
Coordinator or
Healthcare
Coordinator

Agencies for Filing a Complaint

EXECUTE LTC Ombudsman Program:

https://nursinghome411.org/ltcop/

State & Federal Legislators:

https://openstates.org/

https://www.congress.gov/contact-us

Governor's Office:

https://www.usa.gov/state-governor

State Medicaid Fraud Control Unit:

https://www.namfcu.net/medicaid-fraud-control-units.php

CMS Regional Office:

https://nursinghome411.org/cms-contacts-regional-central-office-2019/

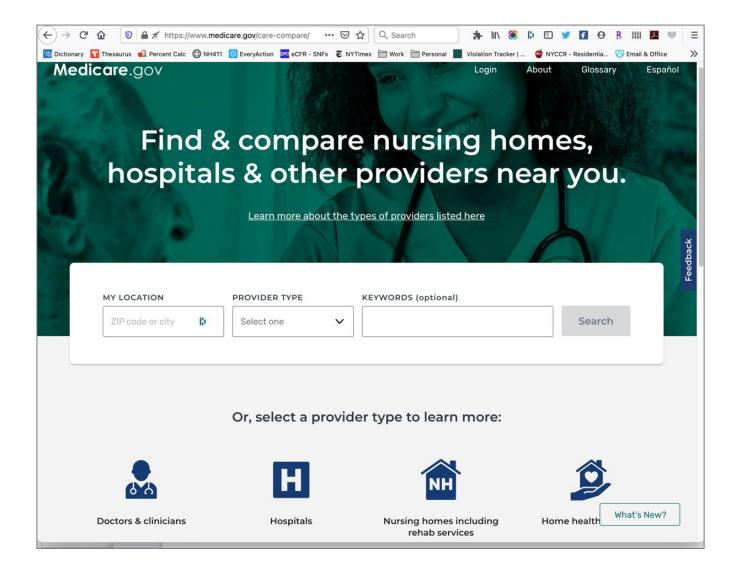
Visit https://nursinghome411.org/learning-center/abuse-neglect-crime/ for more!

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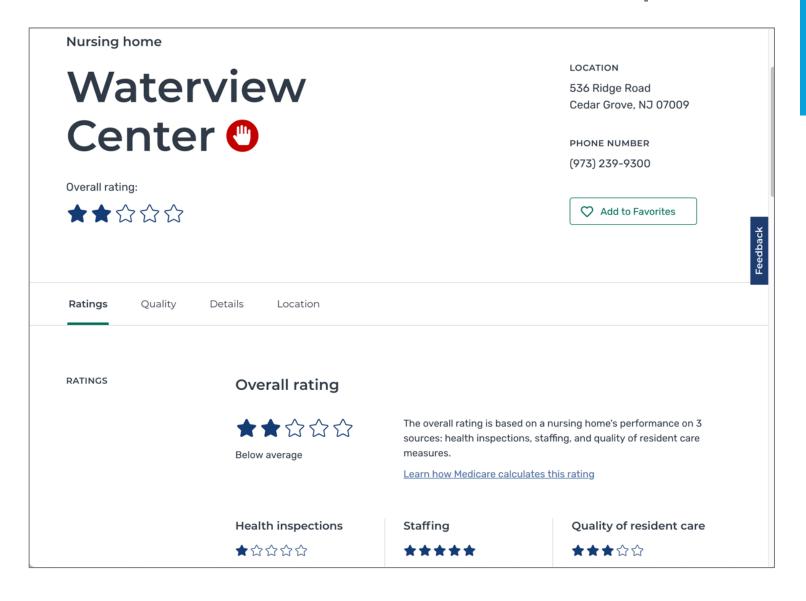
Online Resources & Tools...

Medicare.gov/Care-Compare

+ New Federal Website: Care Compare



+ New Federal Website: Care Compare



+

Online Resources & Tools...

Staffing data on www.nursinghome411.org

+ Staffing data on www.nursinghome411.org



Who We Are V Learning Center v Data Center v

News & Reports ∨

LTC in NY ~

Staffing

Home / Nursing Home Data & Information / Staffing

Sufficient staffing is one of the most important indicators of a nursing home's quality and safety. Unfortunately, inadequate nursing home staffing is a widespread and persistent problem. Some nursing homes provide good care, ensuring that their facilities have enough qualified staff. However, in the absence of limits on profits and administrative expenses, too many nursing homes fail to allocate the resources necessary to maintain sufficient staffing.

To help the public find out about nursing home staffing in our communities, LTCCC publishes, on a quarterly basis, information on staffing for every nursing home in the country (that is in compliance with federal staff reporting requirements).



Nursing Home Update: Too Many Facilities Severely Understaffed **Before COVID-19**

May 21st, 2020 | Media Alerts, News & Reports, Nursing Home Information, Staffing

Read More >

facilities in the U.S.

NURSING HOME STAFFING 2019 Q3

NURSING HOME STAFFING 2019 Q2

NURSING HOME STAFFING 2019 Q1

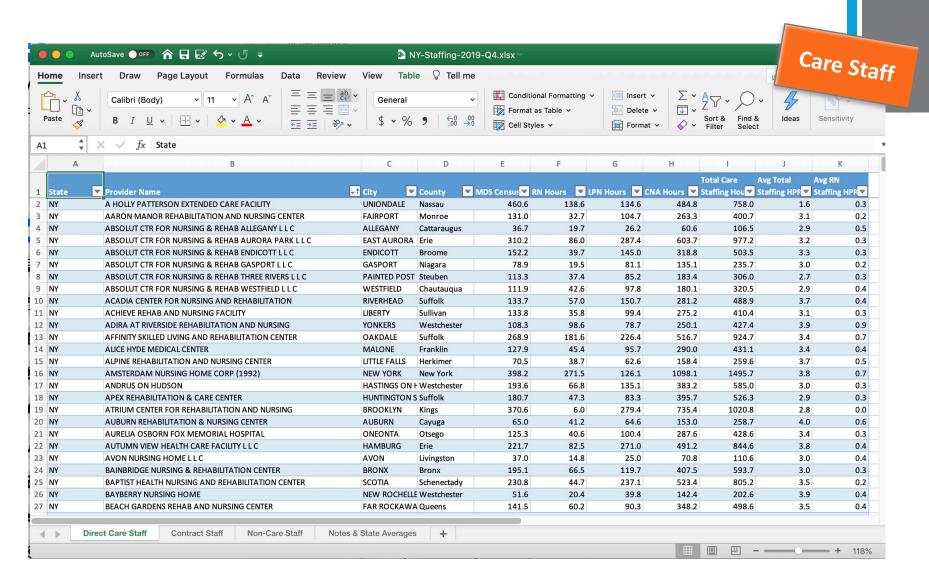
Nursing Home Staffing 2019 Q4

Click on the links in the first column of the table

Quick links to staffing information for all licensed NURSING HOME STAFFING 2019 Q4

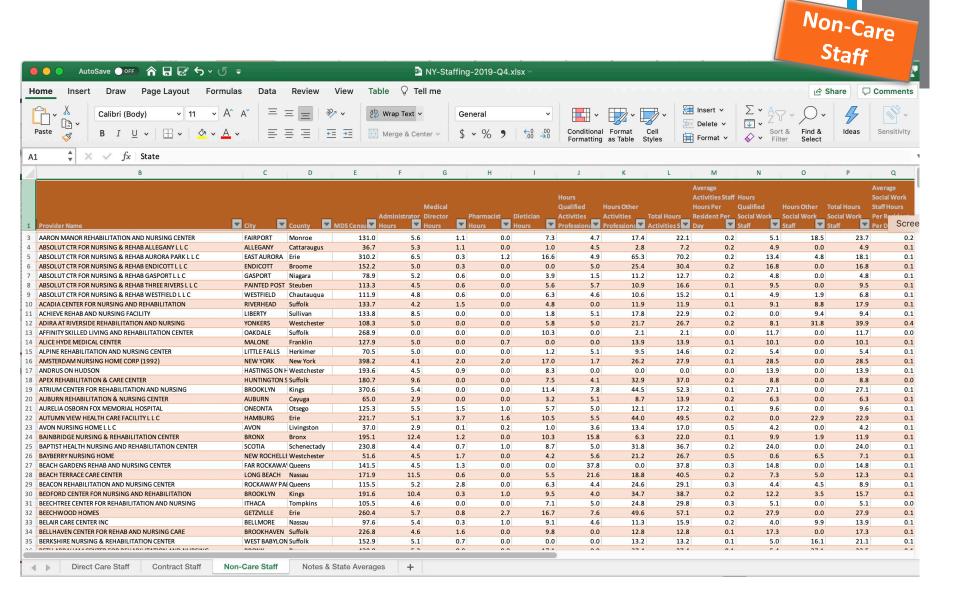
Sortable facilitylevel data on staffing based on auditable PBJ data. NH411 posts new data every quarter, when they are released by CMS, and maintains the historical data files (since 2017) for your reference.

+ Staffing data on www.nursinghome411.org



+ Staffing data on www.nursinghome411.org

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Online Resources & Tools...

COVID-19 data on www.nursinghome411.org

+ How to use LTCCC's COVID Data: USA

- LTCCC posts COVID data for every U.S. skilled nursing facility on a user-friendly spreadsheet: https://nursinghome411.org/facility-level-covid-data/
 - Note: Data is reported by SNFs to the CDC, then <u>posted on CMS website</u>. LTCCC pulls data from CMS website and converts to user-friendly spreadsheet.
- Data includes cases (resident & staff), fatalities, staff shortages, PPE, & more.
- Data can be sorted & filtered by category (state, county, city, zip code, etc.)

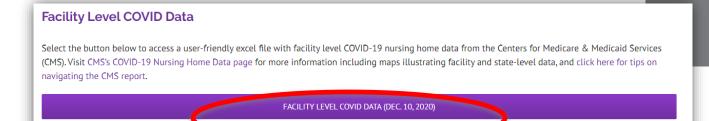
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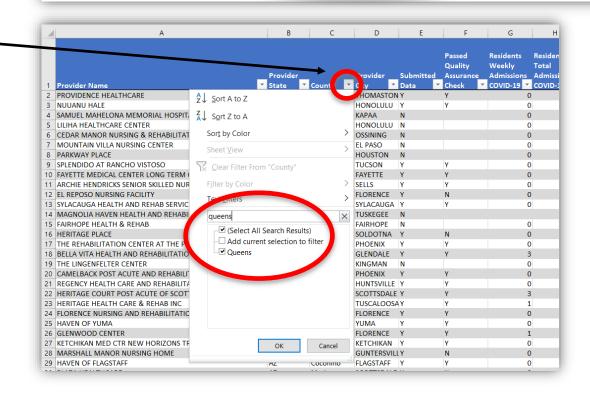


How to use LTCCC's COVID Data: USA

Step 1: Click button to ___ download file

Step 2: Filter data by category (Provider, County, City, etc.)





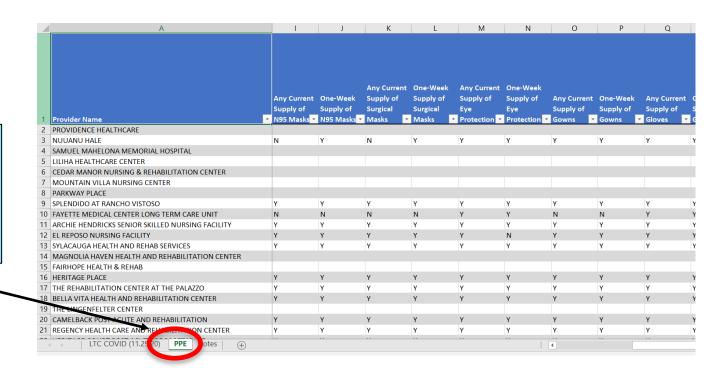


How to use LTCCC's COVID Data: USA

Scroll right to view variables

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Select PPE tab on bottom left to view data on masks, gloves, etc.

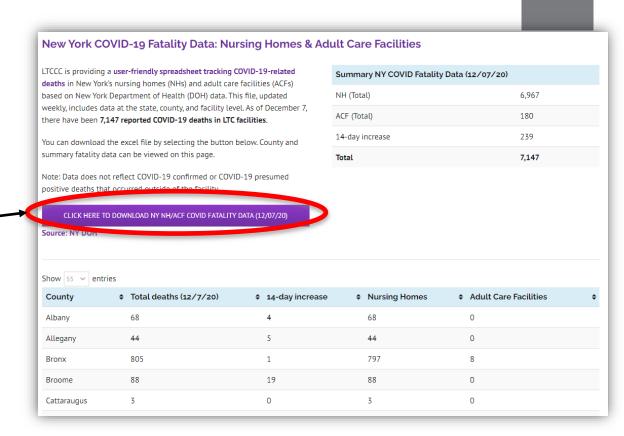


Source: https://nursinghome411.org/facility-level-covid-data/



How to use LTCCC's COVID Data: NY

- LTCCC posts COVID fatality data for every New York nursing home (NH) and adult care facility (ACF)
 - Summary & county data on NH411 website. Sort by county without downloading file
 - Full data (including facilitylevel data) is available on user-friendly file
- Data notes
 - Includes confirmed and presumed COVID deaths
 - Excludes fatalities outside facility



Source: https://nursinghome411.org/ny-nursinghome-covid-data/



How to use LTCCC's COVID Data: NY

See county-level data including 14-day increase

			COVID-19 RE	LATED DEATH	IS AT NEV	W YORK NURS	ING HOMES 8	ADULT	CARE F	ACILIT	IES			
			Sourc	e: New York [Departme	ent of Health ([Data through D	ecembe	r 7, 202	20)				
To	tal LTC Deaths		Nur	sing Homes		Adult	Care Facilities					Prev	ious To	otals
		14-day	NH	NH	NH	ACF	ACF	ACF	Nov	Nov	Oct	Oct	Sep	Sep
County	▼ Total	increase	Confirmed 🕶	Presumed 🕶	Total ▼	Confirmed -	Presumed -	Total 🕶	23 🔻	9 -	26 🔻	12 🔻	28 🕶	14
Albany	68	4	67	1	68	0	0	0	64	64	64	64	64	64
Allegany	44	5	44	0	44	0	0	0	39	20	6	0	0	0
Bronx	805	1	306	491	797	7	1	8	804	803	803	803	803	803
Broome	88	19	85	3	88	0	0	0	69	60	52	49	49	49
Cattaraugus	3	0	3	0	3	0	0	0	3	3	1	1	0	0
Chemung	18	13	18	0	18	0	0	0	5	3	2	0	0	0
Chenango	4	1	4	0	4	0	0	0	3	3	3	3	3	3
Columbia	24	0	20	4	24	0	0	0	24	23	23	23	23	23
Dutchess	63	0	53	9	62	1	0	1	63	58	57	57	56	56
Erie	416	58	404	9	413	3	0	3	358	312	306	299	292	289
Essex	11	. 0	11	0	11	0	0	0	11	11	11	11	11	10
Franklin	3	2	3	0	3	0	0	0	1	0	0	0	0	0
Fulton	13	0	13	0	13	0	0	0	13	13	13	13	13	13
Genesee	5	4	5	0	5	n	0	0	1	0	0	0	0	0

Select tabs on bottom left to view individual NHs or ACFs. Filter or sort by county

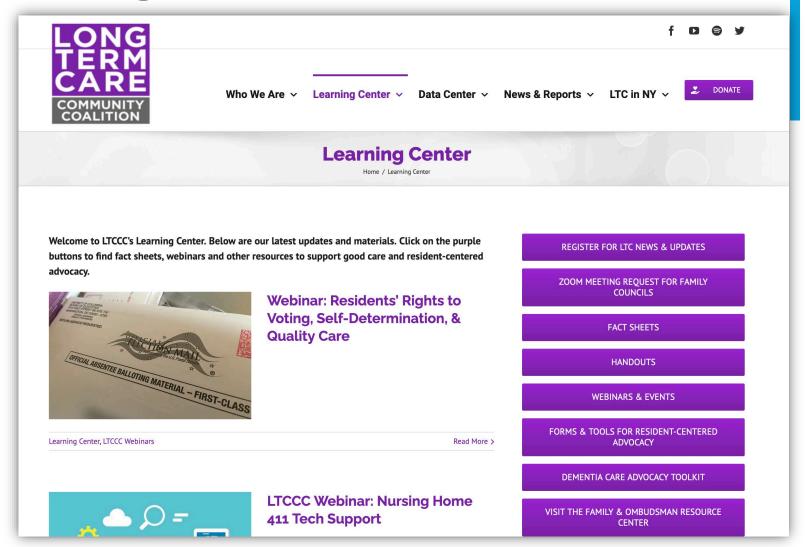
Nursing Home Facility Name	County	COVID Con		والمترازات
FAST HAVEN NURSING & REHABILITATION CENTER	Bronx	Hatris at 1	7	1
FASTCHESTER REHABILITATION AND HEALTH CARE CENTER	Bronx	0	2	_
FIELDSTON LODGE CARE CENTER	Bronx	1	14	1
FORDHAM NURSING AND REHABILITATION CENTER	Bronx	3	0	
GOLD CREST CARE CENTER	Bronx	4	7	1
GRAND MANOR NURSING & REHABILITATION CENTER	Bronx	3	0	
HEBREW HOME FOR THE AGED AT RIVERDALE	Bronx	16	36	5
HUDSON POINTE AT RIVERDALE CENTER FOR NURSING AND	Bronx	3	12	1
KINGS HARBOR MULTICARE CENTER	Bronx	52	8	6
LACONIA NURSING HOME	Bronx	1	8	
MANHATTANVILLE HEALTH CARE CENTER	Bronx	6	1	
METHODIST HOME FOR NURSING AND REHABILITATION	Bronx	11	0	1
MORNINGSIDE NURSING AND REHABILITATION CENTER	Bronx	9	10	1
MORRIS PARK REHABILITATION AND NURSING CENTER	Bronx	3	20	2
MOSHOLU PARKWAY NURSING & REHABILITATION CENTER	Bronx	1	18	1
PARK GARDENS REHABILITATION & NURSING CENTER LLC	Bronx	4	2	
PELHAM PARKWAY NURSING CARE AND REHABILITATION FACILITY	Bronx	3	12	1
PINNACLE MULTICARE NURSING AND REHABILITATION CENTER	Bronx	2	0	
PROVIDENCE REST, INC.	Bronx	11	10	2
REBEKAH REHAB AND EXTENDED CARE CENTER	Bronx	4	19	2
REGEIS CARE CENTER	Bronx	3	5	
RIVERDALE NURSING HOME	Bronx	1	3	
SCHERVIER NURSING CARE CENTER	Bronx	5	36	4
SPLIT ROCK REHABILITATION AND HEALTH CARE CENTER	Bronx	5	9	1
ST PATRICKS HOME	Bronx	26	14	4

Source: https://nursinghome411.org/ny-nursinghome-covid-data/

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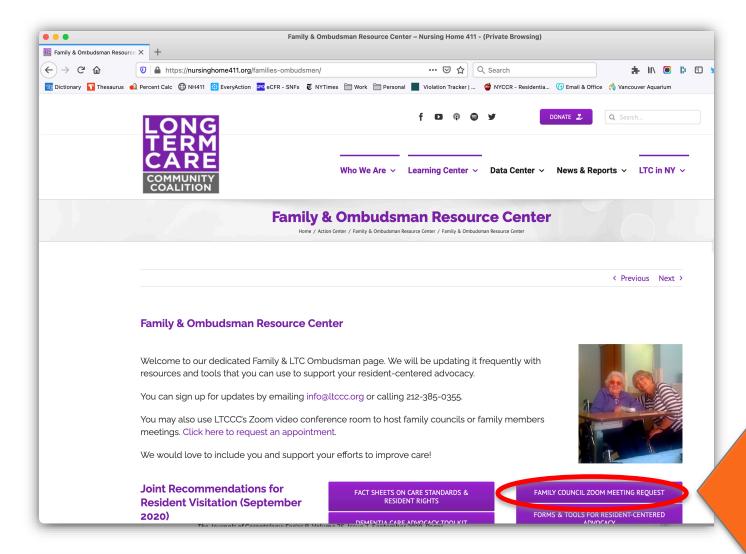
Resources for Advocacy During the Pandemic & Beyond

+ Learning Center



www.nursinghome411.org/learning-center/

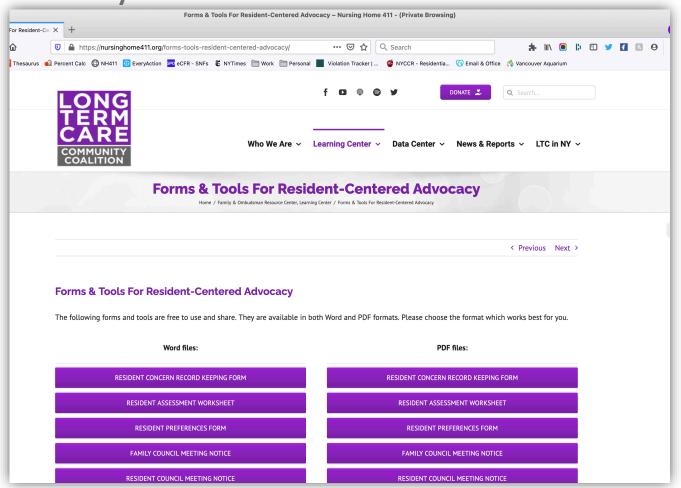
+ Family & Ombudsman Resource Center



Sign-up for LTCCC's Family Council Zoom Meeting Room!

www.nursinghome411.org/families-ombudsmen/

+ Forms & Tools for Resident-Centered Advocacy



https://nursinghome411.org/forms-tools-resident-centered-advocacy/

+ LTCCC Factsheet: Resident & Family Record-Keeping

LONG TERM CARE COMMUNITY COALITION Advancing Quality, Dignity & Justice

CONSUMER FACTSHEET: RESIDENT & FAMILY RECORD-KEEPING

There are many standards which nursing homes are required to follow in order to ensure that residents receive good care, have a good quality of life and treatment with dignity. The purpose of these factsheets is to help **YOU** use these standards as a basis for resident-centered advocacy. This fact sheet provides some information on why it is important to keep records, two kinds of records you might want to keep and easy forms (on second page) that you can use to get started.

Why Keep Records?

Going to a nursing home is difficult and stressful. Unfortunately, difficulties and stress can continue — or pop up again — when a resident living in the facility does not receive needed care or services, is treated poorly or is abused. These situations can be very tough to deal with. Typically, there is a problem, the resident or family brings the problem to the attention of a staff person and thinks that the problem will be addressed. All too often, that does not happen, or the "fix" doesn't last and the problem happens again... and again.

Keeping records can help support your advocacy to overcome challenges and access better care and quality of life by providing a record, resource and reference on the resident, what he or she needs, and how those needs are — or are not — being met by the nursing home. This Fact Sheet describes two types of records that can be useful to support your advocacy.

What Kind of Records Should I Keep?

One or both of the following types of records may be useful to you, depending on your situation. On the back are two brief sample checklists that you can use or adapt. See Resources, below, for links to additional tools and resources that can be helpful.

- 1. <u>Resident Preferences.</u> Communication of a resident's needs or preferences can be difficult in any situation. This is especially true for residents with dementia (or other conditions which impede communication). A record of preferences can make a world of difference as a resource on what a resident prefers, finds enjoyable or comforting, it can be especially useful to provide positive reinforcement and comfort for a resident with dementia to address (or better, avoid) distress, upset or agitation.
- Overcoming Problems. Keeping even a basic record when there is a problem you are trying to
 resolve can be a valuable tool to substantiate—and hopefully resolve—the problem. While we
 believe that it is not fair to expect the resident/family member to have to do all of the work to
 get what is rightfully theirs, often that is the only way to overcome problems.

RESOURCES

- WARAW.NURSINGRIOMERIALORG. LTCCC's website includes information on the relevant standards for nursing home care and resources to help consumers, LTC ombudsmen & caregivers improve care and address problems in their facilities.
- WWW.THECONSUMERVOICE.ORG. The Consumer Voice's website has a variety of materials and resources for residents, family members and LTC Ombudsmen.

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	Exercise	Other		
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+ Thank You For Joining Us Today!

For updates & invites to future programs: www.nursinghome411.org/join/.

UPCOMING WEBINAR - January 12 @ 1pm Eastern

COVID-19 Vaccinations & Nursing Homes

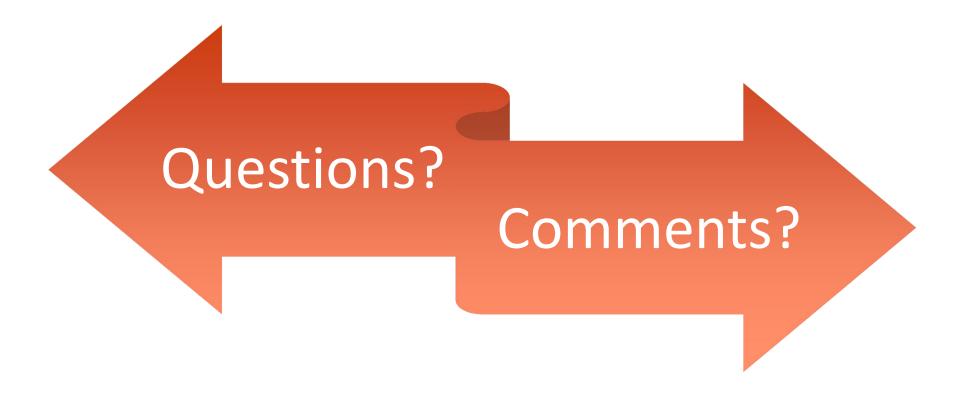
Special Guest Speaker: Beth Nivin, MPH

Beth Nivin worked as a research scientist at the NYC Department of Health and Mental Hygiene for 28 years, first in the Bureau of Tuberculosis Control where her emphasis was on the monitoring of patients with multi-drug resistant TB, and later in the Bureau of Communicable Diseases where she conducted surveillance for influenza activity as well as assisted long-term care facilities with influenza outbreak management. She retired in 2018 but often consults with the NYCDOHMH on issues related to influenza and COVID in long-term care facilities.

Beth has worked as an ombudsman at Staten Island long-term care and assisted living facilities since 2017.

She holds a masters degree in public health from the Tulane University School of Public Health. Beth got her start in public health while working as a Tuberculosis Control Officer in Botswana, Southern Africa, as a member of the Peace Corps.

For more information & to register: https://nursinghome411.org/events/.



LTC Ombudsmen: If your program supervisor allows credit for attending this training program, please take the quick survey at:

https://www.surveymonkey.com/r/ltccc-ltcop1.