

Senate Interim Committee on Human Services
Testimony on Concerns Related to COVID-19 Epidemic: LTC Facilities
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AARP Oregon, on behalf of our over 510,000 members and all older Oregonians, appreciates the opportunity to bring forward our questions and concerns relevant to your upcoming June 3 informational hearing on issues related to COVID-19. AARP has long fought for the rights of residents in nursing homes and other residential care facilities and to ensure their health, safety, quality of care, and quality of life. We appreciate the significant efforts the state has undertaken to address the COVID-19 pandemic and the unprecedented public health and economic crisis that we face as a state and a nation. The gravity of the present challenge will require both new policies and additional resources and investments to address the growing needs of Oregonians.

In particular, we strongly urge the legislature to take action on needed policies to protect the wellbeing of individuals residing in nursing homes, assisted living facilities and other long-term facilities (LTC facilities).

Transparency of Information on COVID-19 Cases in Congregate Care Settings

We urge the state to revise the COVID-19 Weekly Report (May 27, 2020, page 7) on care facilities, senior living communities and congregate living settings (LTC facilities) as follows:

1. **The Oregon Health Authority (OHA) should provide a complete tally of all COVID-19 cases and deaths in LTC facilities.** Currently, facilities with outbreaks are removed from the list if they have had no new cases identified for 28 days after the last case onset. We request that this list, moving forward, provide a running total of all cases and deaths from onset of pandemic to the date of the report.
2. **OHA should list all LTC facilities that have one or more COVID-19 positive case.** Currently only LTC facilities with three or more cases (or one or more deaths) are listed in the weekly report. This does not provide a complete picture and given the current limitations on testing, the public should know when there is one case in any LTC facility.
3. **OHA should provide this information in the Daily Report.** Currently, the numbers of cases and deaths in LTC facilities are only posted on the weekly report. We ask this be included in the daily report so any new outbreaks/changes are reflected in a timely manner.
4. **OHA should report staff cases and resident cases separately.** Currently, the number of cases of COVID-19 in LTC facilities is aggregated to include the total number of both staff and residents. We urge you to report these numbers separately, so as to provide a clearer picture of how each group is affected by the pandemic.

Testing

We urge the state to prioritize universal testing of all residents and staff at Oregon's LTC facilities regardless of whether or not they are symptomatic. The only way to truly protect the health and safety of residents and staff is for facilities to have ready access to testing, but to date this is not happening. We understand there is progress towards this goal, but we remain concerned about unnecessary delay. We urge the following action:

1. Quickly implement testing of all residents and staff of LTC facilities to verify each facility is free of infection or determine an accurate case count.
2. Prioritize and provide access to testing supplies for LTC facilities to test on an ongoing regular basis.
3. Implement testing protocols for all new residents and staff and retesting for individuals returning to the facility.

Access to Personal Protective Equipment (PPE)

PPE is essential to efforts to reduce the spread of the virus. CMS issued guidance on April 2 that nursing home staff should use full PPE when they have direct contact with known or suspected COVID-positive residents and masks when they are in the facility. We recognize, however, that certain facilities may still have difficulty acquiring sufficient PPE for their needs and the CMS guidance includes a caveat that its PPE standards apply "to the extent PPE is available and per CDC guidance on conservation of PPE."

1. The state should ensure LTC facilities have sufficient PPE for residents, staff and authorized visitors including facilities that currently have no positive cases.

Virtual Visitation & Family Communication

For residents and their families, remaining connected is essential to their safety and health, including protecting against social isolation. As in-person visitations in LTC facilities are largely halted, virtual visitation between residents and their loved ones is critical. We appreciate that the state is requiring LTC facilities to provide virtual visits but the state needs to go further:

1. The state should take *proactive* steps to ensure facilities are providing virtual visits in compliance with the state mandate.
2. The state can use Civil Money Penalty funds or Oregon's Quality Care Fund if necessary, to purchase the necessary equipment.
3. The state should ensure adequate support is provided to residents to facilitate virtual visitation. Some individuals may be able to conduct virtual visitation independently but need the technology. Other individuals may need human assistance to use the technology and communicate with their loved ones.

Ensuring Proper Staffing

There is an urgent need to ensure that people receiving care regardless of setting are getting the care they need during this crisis, which means that staffing issues must be addressed. Like the individuals they serve, care workers are also at high risk of infection.

1. The state should take immediate action to ensure adequate staffing, which may include financial and other incentives, such as hazard pay, to better support direct care workers during this time of emergency.
2. The state must develop contingency plans to respond to situations where staffing levels are insufficient to meet the needs of residents, and plan for ways to inform residents and their families of staffing shortages.

3. The state should require nursing homes to notify state regulators in the event they are not able to meet the needs of residents including the ability to maintain minimum staffing ratios or meet other staffing requirements, including licensed staff requirements. Given that family members often provide critical services to residents such as feeding and hygiene, states should ensure that increased staffing is available to replace care normally provided by family members.

AARP Oregon appreciates the opportunity to bring these important issues forward for your consideration and we look forward to working with you to find solutions. Please do not hesitate to be in touch if we can be of any assistance.