

State of Connecticut
GENERAL ASSEMBLY



NURSING HOME AND ASSISTED LIVING OVERSIGHT WORKING GROUP
OUTBREAK RESPONSE AND SURVEILLANCE SUBCOMMITTEE
LEGISLATIVE OFFICE BUILDING
HARTFORD, CT 06106-1591

Meeting Summary
December 30, 2020

Sen. Abrams convened the meeting and welcomed the guest speakers.

Guest speakers present included Kevin O’Connell, Chief Executive Officer of Geer Village Senior Community; Sherry Schoonmaker, Executive Director of Geer Village Senior Community; and Kelly Papa, Vice President of Strategy and Community Life at Duncaster.

Deputy Commissioner (DC) Aaron offered her gratitude to the group for coming together to provide recommendations to the Department of Public Health and the legislature as it pertains to nursing homes and assisted living facilities.

Mr. O’Connell gave an overview of operations at Geer Village Senior Community in North Canaan, Connecticut. Emphasizing the rural nature of operations at Geer Village, Mr. O’Connell stressed the importance of providing seniors with the highest quality of life possible. After the Governor issued the “Stay Safe, Stay Home” Executive Order in March, Geer Village sought to minimize community interaction between assisted living residents and vulnerable patients in their nursing home facility. Subsequently, the Adult Day Center, the on-campus YMCA facility, the outpatient physical therapy and the Railway Cafe were all closed to prevent community spread of the virus. Mr. O’Connell acknowledged the challenge of preventing the virus from entering any of the facilities from the external community, particularly when it came to families wishing to visit their loved ones. In light of the pandemic and social distancing guidelines, Mr. O’Connell stated that Geer Village consulted an architectural firm that helped to redesign the flow of foot traffic in the building, eliminate choke points, implement PPE and sanitization stations and ultimately assess the HVAC system in the buildings to ensure proper filtration and air flow. In his initial concluding remarks, Mr. O’Connell emphasized the urgent need for all staff and residents to take the vaccine in January when it becomes available, as it will help improve the livelihood of residents and employees at Geer Village.

Ms. Schoonmaker discussed the October outbreak at Geer Lodge, the assisted living facility on campus. Three weeks after the first staff member tested positive, 19 out of 21 dementia residents living in a closed unit had received a positive test result. By the end of November, six of the residents who tested positive had succumbed to the virus. Ms. Schoonmaker acknowledged the major challenges of mass testing and receiving lab results in a timely manner, with some results taking five days to be returned. In addition to faster turnaround of results, Ms. Schoonmaker recommended that there be better access to volume testing instead of weekly tests, as it would allow them to identify positive staff members before the virus has already spread. Another major challenge for Gear Lodge has been the lack of Registered Nurses or other professionally trained medical staff to help tend to COVID positive patients. As for screening, Ms. Schoonmaker highlighted the difficulty of streamlining a single entry and exit point in an effort to track residents, staff and outside vendors/agencies that access the facilities. Ms. Schoonmaker applauded the efforts of the subcommittee to enhance infection control regulation for assisted living communities.

Ms. Papa opened by discussing the structure of Duncaster as a three-tiered organization, with independent living, assisted living and a nursing home. Echoing much of what Mr. O'Connell and Ms. Schoonmaker offered to the subcommittee, Ms. Papa spoke of the strategy followed by Duncaster since the start of the pandemic: care, contain, communicate and compassion. Containing the virus has been a challenge, with many employees at Duncaster holding jobs at other living facilities which has resulted in required coordination between Duncaster and regional senior care centers to keep track of the staff infection rates to prevent further community spread. As for communication, Ms. Papa remarked on the effectiveness of technology in helping to convey messages to staff and residents without holding in person meetings where social distancing would not be possible. Lastly, Ms. Papa spoke about both the issue of enforcing the mask policy with dementia patients as well as the need for compassion and understanding, as this pandemic is unprecedented and requires diversified thinking and all hands on deck.

Following the remarks from the guest speakers, Sen. Abrams opened the meeting to allow for members of the subcommittee to ask questions or add remarks.

Rep. Hughes thanked the speakers for their commitment to making sure assisted living facilities are taking appropriate precautions to protect residents, all while providing a high quality living environment. Rep. Hughes noted the importance of continuing to promote mobility among residents, particularly allowing for greater time outdoors.

Mr. O'Connell stressed the need for qualified staffing and stated that no RN's or CNA's want to come in and work under the current conditions in assisted living facilities. Mr. O'Connell reiterated his support for regulation pertaining to nursing homes and assisted living facilities, but when it comes to regulation based on staffing levels, the biggest obstacle is simply finding the right people for the job. He recommended that the subcommittee devote a lot of time towards the issue of staffing and helping facilities to have a resource for their staffing needs.

Sen. Abrams acknowledged that she has heard the issue of staffing brought up repeatedly. She reminded the group that there is a subcommittee that is solely devoted to staffing.

Dr. Coll asked the guests for their opinion on the operationalization of specially designated infection control nurses in an assisted living facility.

Ms. Schoonmaker responded by identifying only one infection preventionist at the nursing home at Geer Village. In an effort to consolidate and utilize staff resources effectively, Ms. Schoonmaker emphasized the importance of partnering on campuses where there is both a nursing home as well as assisted living facilities.

Ms. Papa made a point of having an educator on campus, particularly with a designated nurse who helps to guide other team members and continues to bring new knowledge to the facilities. Ms. Papa distinguished the nursing profession in Connecticut from fields like social work, administration and physical therapy, where continuing education and training is required for those individuals, but no nurses.

DC Aaron asked the speakers how they would have ideally handled the dementia units during the pandemic, granted they had all resources at their disposal.

Mr. O'Connell stressed the importance of having quick turnaround times for testing, that way staff could return to work immediately without posing a risk to vulnerable populations. In order to fulfill this, it might require that Geer Village would have a lab on site to do the testing and identify positive cases within hours rather than days.

Ms. Papa identified the potential for additional roles in assisted living communities and dementia units, including social workers and life enrichment staff, both of which might be very helpful during the pandemic and otherwise normal times. Ms. Papa reiterated her earlier point made about proper education, specifically as it relates to informing staff on the proper usage of personal protective equipment.

Ms. Schoonmaker built upon the importance of educating all staff to meet the needs of the pandemic, using housekeeping staff as an example since they don't necessarily have a background in deep decontamination. For the future, Ms. Schoonmaker believes that having staff dedicated to the dementia unit would have made things a lot easier, but due to constraints on the number of staff available, this wasn't possible.

Thinking towards the future, Mr. O'Connell urged for future nursing homes and assisted living facilities to be designed and developed with infection control in mind. This includes proper heating and cooling systems, negative pressure rooms, strategic placement of PPE and hand washing stations, along with proper signage to enforce social distancing.

Ms. Arbur elevated the need for greater attention to be placed on dementia units, citing her own observation that viral outbreaks tend to start in these units before others. She recognized the importance of staff education and higher cleaning frequencies.

Sen. Abrams thanked the guest speakers for all of their input and for taking the time to attend the meeting. She closed the questions and remarks portion and began to give an overview of potential recommendations:

- Adequate, appropriate and available PPE for all staff:
 - While facilities are now asked to keep a one month supply of PPE, the subcommittee recommends that they upgrade that threshold to a three month supply
 - PPE supply must be appropriate and meet the needs of all staff. For example, the supply should include various sizes, not just one size
 - Have quarterly fittings for N-95 masks
 - During a pandemic, PPE must be provided by the workplace for employees
 - No sharing or reusing of PPE
- Testing turnaround times
 - During a pandemic, ensure that testing is widely available, especially for essential workers like nursing home or assisted living staff
 - Better availability of rapid testing that is reliable
- Infection control committee
 - Meet on a monthly basis rather than quarterly
 - For the future, have plans already established in the event of another pandemic or viral outbreak
 - Constant evaluation of the implementation and effectiveness of any protocol they currently have in place
 - When there is an outbreak, the infection control committee should meet daily to assess the situation
- Infection control preventionists
 - Recommend that infection control preventionists become a full time position at nursing homes and assisted living facilities
 - When there is not an outbreak, these individuals could be given other on-site responsibilities
 - Infection control preventionists should have a rotational schedule that would allow for them to have exposure to all shifts and positions in the facility
 - Implement training for all employees in infection prevention
 - Staff including housekeeping, maintenance and food service workers should be included in the training
 - Training should be annual, with any new staff members receiving training immediately after being hired
 - Any changes in protocol must be communicated to staff
 - Training should utilize simulations, videos, written materials and in person demonstrations/practice
 - Ensure that training will be available in both English and Spanish
 - Infection control preventionists should provide visible information in buildings that is available to all residents and staff. Information should outline the expectations for a healthy and safe living environment. These posters should be in plain sight and written in both English and Spanish
- Assisted living facilities
 - Training for infection prevention
 - Institute an outbreak preparation plan
 - Explore options for regulating the access of outside vendors to limit potential exposure

- Participation in a mutual aid plan (recommended by Mathematica)
- Administrators and supervisors partake in annual infection control training

Ms. Morelli sought clarification on the recommendation that staff at nursing homes and assisted living facilities receive quarterly fittings for N-95 masks. Additionally, she questioned the recommendation about prohibiting PPE reuse, finding it to be too strict and potentially having a retroactive effect. Ms. Morelli referred to CDC standards that call for reuse during the event of a crisis. She recommended that the recommendation be modified to include exceptions in accordance with the standards set forth by the CDC.

Sen. Abrams acknowledged Ms. Morelli's concern regarding PPE reuse.

Mr. Barrett offered his perspective on the recommendations, putting emphasis on the fact that the PPE supply chain has extensive issues internally. He believes that adding requirements that prevent PPE reuse is somewhat strict and burdensome on the facilities, since it can be relatively challenging to have a stable supply that would allow for new PPE to be used on a daily basis. As for maintaining a three month supply of PPE, Mr. Barrett expressed his support for this measure.

Dr. Coll asked how it would be possible to regulate assisted living facilities and mandate them to have experts like infection control preventionists on site.

Sen. Abrams recognized that there is so much more to learn and review in order to make informed recommendations on potential regulation for assisted living facilities. Sen. Abrams brought attention to the need to review current regulation in place regarding the administration of IV technology, as nursing homes are currently mandated to have an outside trained professional come in and start the machine. Eliminating this regulation would make the work of the nursing home staff much easier and ultimately reduce the potential for outside exposure.

Sen. Abrams asked members whether they had any additional comments or questions, to which there were none. Sen. Abrams instructed members and guests to email any further recommendations to herself or Deputy Commissioner Aaron.

Sen. Abrams noted that this meeting concludes the work of the Outbreak Response and Surveillance Subcommittee. She added that the next meeting of the Nursing Home and Assisted Living Oversight Working Group will take place on Thursday, January 7, 2021 at 10:00 AM.