

Nursing Home and Assisted Living Oversight Working Group (NHALOWG)

Staffing Levels Subcommittee

Meeting Summary

Monday, December 14, 2020, 3:00 PM via Zoom

1. Opening Remarks

- Rep. Cook convened the meeting. She asked for a motion to approve the summary from the December 7th meeting, which was made, seconded and approved unanimously.

2. Invited Presenters

- Shazia Chaudhry, MSW, Director of Community Relations, Dementia Friends CT, Program Lead. She spoke on behalf of social work staff in nursing homes. Ms. Chaudhry provided a compelling overview of the roles that social workers play, emphasizing the breadth of their activities, spanning support for admissions and Medicaid eligibility, daily activities related to residents' psycho-social needs, ongoing assessments, documentation and end-of-life/bereavement counseling. She described the demands as having been cast into sharp relief during the pandemic. Ms. Chaudhry also discussed the challenges associated with the high number of residents for whom each social worker is responsible, under current staffing requirements. The current minimum is 1 social worker to 120 residents. When asked, Ms. Chaudhry said that she believes the ratio should be no more than 1 social worker per 60 residents, in order to better fulfill the mission of preserving residents' rights to dignity and respect, to support other staff, and to provide a link to residents' families.
- Mag Morelli of LeadingAge and Matt Barrett of CAHCF/CCAL presented an overview of the perspective of their memberships, staging the discussion in three phases: pre-pandemic, current scenario and future direction. Initially, Mag provided detail on historical experience with staffing and reporting requirements, pointing to longstanding challenges of recruitment, retention and adequacy of reimbursement for nursing home services. The key impacts of the public health emergency were then outlined, with a focus on addressing urgent needs around infection control and ensuring maintenance of an appropriate cohort of staff in light of absences and fatigue. Finally, she identified interest in support with training, additional funding for staffing, strategies to improve retention, and consideration of 1) potential retention of the temporary CNA role; and 2) an advanced role for CNAs, focusing on medication administration or other specialized service areas.

3. Continued discussion of the five main topics for consideration:

- Ensure that facilities adopt appropriate staffing policies to minimize spread of infectious disease (SR 17)
- Increase minimum required staffing ratios; support increases in workers' pay and benefits (LR 14)
 - There was preliminary discussion about the pros and cons of setting minimum staffing ratios versus staffing to residents' needs, and the potential for unintended consequences. The range of patients' needs, how they vary over time, and acuity-based staffing was also discussed.
- Ensure that staff have access to guaranteed sick time under state's existing paid sick leave regulations (LR 15)
- Workforce retention and recruitment
- Increase transparency and identify staffing necessary for improved communication

4. Discuss OLR report

- It was agreed that this would be discussed at the next meeting.

5. Next Meeting

- Due to the need for more time for discussion and development of proposals, the subcommittee agreed to have an additional meeting on Monday, December 21, 3:00 PM.
- Rep. Cook adjourned the meeting.