

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

November 19, 2020

Co-chairwoman Sen. Abrams convened the meeting and asked members to introduce themselves.

Members present included co-chairwoman Heather Aaron, Deputy Commissioner, Department of Public Health (DPH); Patrick Coll, MD; Sandra Arbur, Recreation Director, Athena Healthcare; Joan Soulsby, Office of Policy and Management (OPM); Sen. Kushner, Labor Committee; Sen. Somers, Public Health Committee; Matt Barrett, CAHCF/CCAL; Judith Dowd, OPM; Rep. Anne Hughes, Labor Committee; Jo Anne Kuncas, RN, CT Assisted Living Association; Rep. Petit, Public Health Committee; and Mag Morelli, LeadingAge.

Sen. Abrams remarked on the limited timeline for the subcommittee to propose effective legislation. She emphasized that in addition to the recommendations reached during this time, bills can also be introduced during the 2021 Legislative Session.

Regarding recommendations by [Mathematica](#) for:

- expanding the qualifications for infection control preventionists and expanding their role to full time in nursing homes
- mandatory infection control training for the on-call nurses in assisted living
- mandatory participation of assisted living in the mutual aid plan; and
- assisted living memory units staffing and infection control

Sen. Abrams conveyed that the subcommittee will seek to understand the historical perspective of infection control roles and consider improvement options for developing them into functional roles, especially during pandemics. She also acknowledged the stark differences in training requirements for nursing homes and assisted living facilities and added that the subcommittee must review these requirements for determining their appropriateness to meet challenges.

Deputy Commissioner (DC) Aaron spoke of the prevailing endeavors of long-term care facilities to meet regulation standards for infection control. Standard processes for containing contagious

viruses such as the flu are already in place in nursing homes, however, the COVID-19 pandemic has presented unprecedented challenges. DC Aaron explained that although nursing homes have an infection control nurse on staff, the role is not full time in many homes based on bed size. Additionally, if a facility faces a staffing issue, the infection control nurse may become a floor nurse during such times which results in averted focus. Consideration must be given for recommending a full-time infection control nurse in facilities, or an alternate reliable process for shifting from regular standards to pandemic standards. DC Aaron recognized the Staffing Levels Subcommittee of the Nursing Home and Assisted Living Oversight Working Group (NHALOWG) and added that they may instead review this issue.

Ms. Morelli elaborated on the role of DPH as a regulatory agency for long-term care facilities, including their audits which can only cite wrongdoings but cannot make recommendations for improvement. This standard operating procedure changed and became much more collaborative when COVID-19 occurred. DPH sent teams of epidemiologists and surveyors to facilities to help solve problems with infection control. Additionally, if one facility had a successfully resolved issue, all facilities were made aware of how it was resolved. Ms. Morelli suggested for the subcommittee to review standard and pandemic communications between DPH and long-term care facilities to determine if the pandemic model can become annual in order to maintain the quality of care. Although the collaborative model has been beneficial, Ms. Morelli contemplated whether DPH has the resources to maintain it and whether the state should invest in such resources. She recommended the subcommittee invite Vivian Leung, MD to speak on how DPH and long-term care facilities have faced the pandemic.

Sen. Abrams acknowledged the financial concerns but emphasized that the charge of the subcommittee is to bring forward recommendations, without financial based hesitation. The Office of Fiscal Analysis will monetize the recommendations in a fiscal note and if the note precludes the implementation of the recommendations, at the very least the public will be aware of ideal practices.

Dr. Coll concurred with the financial viewpoint of Sen. Abrams. He suggested for the subcommittee to have a robust discussion regarding the benefit of single rooms and to list them as part of the recommendations, regardless of potential costs.

Regarding COVID-19, Dr. Coll recognized the American Geriatrics Society and the American Medical Directors Association for expediting the publications of their newfound knowledge. Amplifying issues raised by other members, Dr. Coll added that nursing homes and assisted living facilities have baselines for infection control for patients with ammonia, gastroenterological issues, and other frequent illnesses. Expertise must remain in place for situations that occur frequently, however, there must also be a mechanism in place for pandemics. Pandemic expertise should be available to facilities either within the facility or externally and ready to assist immediately if the situation warrants it. Analogous to the National Guard, Dr. Coll explained that DPH could potentially be a resource bearer. The National Guard serves as a reserve unit, however, if a situation warrants their activation, they are immediately ready to activate. Similarly, DPH could maintain an infection control force to be activated during a pandemic.

Sen. Somers expressed preference for a more synergetic relationship between health districts and nursing homes. Although they work in conjunction, health districts are not able to advise nursing homes on directions for improvement. Health districts receive continuous training and are equipped with the knowledge to face pandemic challenges. If they are encouraged to work collaboratively with nursing homes rather than punitively, it may be possible to achieve a preventative model of healthcare.

Sen. Somers advocated for a rapid response health reserve that can be activated with minimal notice and is comprised of individuals that are knowledgeable on the latest information regarding different outbreaks. Sen. Somers elaborated on the importance of infection control consistency. Infection can spread through wounds, restrooms and a multitude of other ways. Consistent control would require not only for the wound to be clean, but the restroom too. She suggested the subcommittee invite epidemiologists to speak on infection control and recommended Alin Bortan, MD, Yale, an infectious disease specialist.

Sen. Abrams relayed stories heard from workers whose primary language is not English. She expressed concern that some workers may not understand how to properly use personal protective equipment because usage directions are only provided in English. In addition to large scale recommendations, it's important to also think of smaller recommendations that could make a big difference.

Rep. Hughes commended members for their holistic approach to healthcare. Each of the four NHALOWG subcommittees focus on different areas of improvement for long-term care facilities. This is important because a holistic approach will incorporate the residents of the facilities, the staff, and even the community.

Sen. Kushner referred to the Mathematica recommended policies although questioned their effective implementation and enforcement. Long-term care facilities were closed to visitors, but the workforce still travelled in and out of the building and often from one nursing facility to another which may have been a factor in rising COVID-19 cases. In order to get a broader perspective of the situation, Sen. Kushner suggested for the subcommittee to hear expert testimony from workers and their organizations to address the implementation of good practices and policies.

Sen. Abrams offered for members to email their recommendations for experts to the co-chairs or staff of the subcommittee.

DC Aaron concurred with Sen. Kushner and Sen. Somers on placing high importance on good infection control practices and the need for continuous training. She added that training should include not only medical staff but maintenance staff, kitchen staff and all other non- medical personnel. It is important to train other individuals who may directly or indirectly impact patient health. Their inclusion would empower the nursing home community.

Sen. Abrams asked members whether they had any additional comments or questions, to which there were none.

The next meeting will take place on December 3, 2020 at 12:30 PM via Zoom Videoconference.