

Nursing Home Advisory Committee Meeting

April 23, 2019

Department of Social Services

55 Farmington Avenue, Hartford, CT

Minutes

Members in attendance: Co-Chair, Barbara Cass, Department of Public Health (DPH); Co-Chair, Christopher Lavigne, Department of Social Services (DSS); Matthew Barrett, Connecticut Association of Health Care Facilities (CAHCF); Anne Foley, Office of Policy and Management (OPM); Mag Morelli, LeadingAge Connecticut; Mairead Painter, Office of the Long-term Care Ombudsman Program, Department of Rehabilitation Services (LTOP)

Members absent: David Wasch, Connecticut Health and Educational Facilities Authority (CHEFA)

Others present: Nicole Godburn, DSS; Melissa Morton, OPM; Larry Santilli, Athena Health Care Systems; Kathy Shaughnessy, DSS; George Thomas, Blum Shapiro

Meeting called to order at 9:10 A.M.

Introductions

- Members introduced themselves.

Approval of Minutes from February 1, 2019 and February 22, 2019 Meetings

- Motion to approve the February 1, 2019 meeting minutes and February 22, 2019 meeting minutes made by Anne Foley and seconded by Mag Morelli. No discussion on the minutes. All in favor. Minutes accepted and approved as final.

DSS Report on Pending Nursing Home Requests for Interim Rate Increases

- Chris Lavigne, DSS, reported that there are currently no requests. DSS has received a few CON requests for standard upgrades.

Survey Activities/Quality Issues

- Barbara Cass provided the following update:
 - Nothing new in nursing homes. A few surveys came in with a fair amount of findings but no immediate jeopardies.
 - DPH staff has been meeting with Matt Barrett and Mag Morelli to plan a state education training on fall prevention in the late fall/early winter, possibly at the Aqua Turf, through the utilization of Civil Monetary Penalty (CMP) dollars. Falls/hazards in the environment is consistently in the top two cited deficiencies (the other is usually 309 code bundled deficiencies). Barbara invited Mairead Painter to join subsequent planning meetings. Barbara noted that one facility in CT has a fall prevention training that they are willing to share at the event. The group is seeking a national speaker. Melissa Morton suggested that Barbara connect with Margy Gerundo-Murkette in the State Unit on Aging because

they have been partnering with Dorothy Baker at Yale to implement successful fall prevention efforts in the community that may be transferable to an institutional setting and may be able to assist with finding a national speaker for the state education training. Mairead noted that after the last meeting she gave Margy a heads-up that Barbara may be contacting her.

Receiverships/Closures/Bankruptcies

- Chris Lavinge reported that the two outstanding receiverships/bankruptcies, Park Place and Crestview, are done and both sales have closed. There is nothing new pending.
- Members engaged in a discussion on Bridgeport noting the following:
 - The Manor is closed and has significant structural issues;
 - The facility is in bankruptcy/trustee. The trustee is a private firm that brought in a Long-Term Care Ombudsman from Long Island. The group discussed the possibility of the CT Long-term Care Ombudsman Program taking this over. Chris said that he needs to talk this over with AG Henry Salton to see if that is an option. The transition to the CT program would save the state money.
 - A significant issue with the closing of the Manor is that they accepted residents many other homes will not take such as, individuals with criminal history, behavior issues and high levels of need. Additionally, the families of these residents can only visit their relatives if they are in a facility that is on a bus line.
 - Bridgeport is a high need area that is down to two nursing facility options with the closing of the Manor.
- White Oak Manor was also discussed. The highlights of the discussion are as follows:
 - The facility closed Thursday, April 18, 2019 as an emergency closure, due to among other issues, no working fire detection and prevention equipment.
 - There were 9 residents at the time of closure and 16-19 total available beds.
- The group held a brief discussion regarding whether there is the regulatory ability to establish new private Residential Care Homes (RCH). This was raised as a potential opportunity for nursing homes to convert skilled nursing beds because the options to convert nursing home space to Medicaid funded services is thwarted by the CMS home and community-based settings rule. The matter of converting skilled nursing beds to the Rest Home with Nursing Supervision (RHNS) level of licensure was also discussed. DSS staff shared hesitation due to CMS not recognizing only one level of skilled nursing.
- Committee members segued into a discussion on adequate staffing levels and methods of ratio calculation. DPH and DSS noted that staffing level statistics are not accurate and staffing may actually be below 1.9 because they are being calculated using MDS numbers. Staffing ratios are calculated using MDS data that allows for under reporting of residents at the facility at any given time because the stay of a certain number of residents is fast enough to not undergo the MDS. Mag Morelli and Matt Barrett noted that they would like the data agencies are seeing regarding staffing ratios because this conversation is not matching the data they use and share. Barbara Cass said that DPH has not cited anyone for inadequate staffing based on public health code, however, ratios matter less to DPH than whether or not a home can meet the needs of its residents with the staff on duty. It may be that a facility meets the required staffing ratios but due to the level of acuity of its population that is still an inadequate number of staff to provide

quality care. Larry Santilli noted that the cost differential for weekend staff is not good and causes issues.

Long Term Care Mutual Aid Plan Update

- Barbara Cass reported that she sent an e-mail to DSS regarding the status of this document but had not received a response as of the time of this meeting.
- Chris Lavigne noted that staff need to meet with DSS attorney Melanie Dillion and fiscal staff Mike Gilbert and Steve Greenslade. The document needs fiscal review before it can move forward. It is not a rate setting matter. Based on this information Barbara is going to e-mail Kate and CC Mike Gilbert to ask if she can work directly with Steve.

Patient Driven Payment Model (PDPM) – Acuity-Based Medicaid Rate System

- Chris Lavigne reported that he is delaying conversations with Myers and Stauffer regarding the kick-off until the end of session. Additionally, implementation will likely be pushed back from January 1, 2020 to April 1, 2020 to allow more time for facilities to prepare. DSS is hearing a great deal of anxiety from providers.

Status of 2% Nursing Home Increase Drawdown

- Chris Lavigne reported that the State Plan has been approved and rate letters were sent out. All but three facilities are taking the 2% increase. The three owners who declined the 2% increase did so because they are higher Medicare facilities.
- Chris added that many homes have not distributed the 2% yet and he assumes they are holding the funds that have been drawdown in escrow. Matt Barrett clarified that facilities are holding the funds because they need a labor agreement. Facilities cannot provide increases to a certain group outside of a labor agreement.

Proposed Nursing Home Worker Labor Action

Barbara Cass provided an update on the nursing home worker strike announced by SEIU 1199NE. Highlights from the discussion are below:

- Barbara reported that out of the 43 nursing homes without a contract, 20 homes have submitted notice of their intention to strike starting May 1, 2019. Friday, April 26, 2019 is the deadline for those homes to submit strike contingency plans. To help facilities prepare, DPH held a contingency plan training last week.
- Barbara explained that DPH is being very strategic about their preparations for the strike and monitoring of the 20 homes affected. DPH will be forming float teams comprised of 1 nurse and 1 ancillary staff person each. Teams will be deployed to nursing homes to conduct site visits twice per day. There is a checklist of items that will be monitored during the 5 hour site visits including, pressure sores, food temperature, water access, clean linens etc. Additionally, DPH will be monitoring ER admissions and facility discharges and transfers.
- Kathy Shaughnessy reported that DSS is following protocol for funding advances to homes. So far no one has applied for an advance. Matt Barrett anticipates that after Wednesday afternoon when facilities start expending large sums of money that DSS will begin to see funding requests on a rolling basis.

- Mairead Painter noted that LTC Ombudsman will be out at the 20 homes each day. LTC Ombudsman staff have already met with Resident Councils at each affected building. Barbara will give Mairead a list of DDS individual in the affected homes.
- Barbara said DPH will spend Friday reviewing contingency plans and will file for receivership of those homes that have not filed a plan by 2:00 P.M. on Monday April 29, 2019.
- Chris Lavigne is seeking picketing plans to prepare building management.
- DPH has launched a web page dedicated to the strike for residents, families and providers. It can be found at <https://portal.ct.gov/DPH/Press-Room/Press-Releases---2019/DPH-Preparing-for-Possible-Labor-Strikes-at-20-Connecticut-Nursing-Homes>.
- DSS is concerned that 2-3 homes are financially fragile and could collapse as a result of the strike. The agency is monitoring these homes.

NHFA Committee Annual Report

- Barbara Cass informed members that she is almost done incorporating everyone's comments and will send the final draft to Melissa Morton to circulate prior to submission.

2019 Meeting Schedule

- A final copy of the 2019 meeting schedule was disseminated. Remaining meetings in 2019 will be as follows:
Wednesday, July 10, 2019 -- 10:00 - 12:00 (NOTE TIME CHANGE) at DSS -- Room 9003.
Thursday, October 24, 2019 -- 9:00 - 11:00 at DSS -- Room 9003

Other Business

- There was brief conversation about the ability for an Assisted Living Facility to receive a waiver. Barbara Cass reminded the group that DPH licenses Assisted Living services not the physical Assisted Living plant. She confirmed that DPH has granted Assisted Living waivers in the past and will do so as long as what is being waived in the Public Health Code does not affect life, health and safety. Facilities are required to specify what part of the regulation they would like waived and what the facility is doing to compensate for that waiver. Barbara suggested this topic be added to the next Assisted Living meeting agenda.

Meeting adjourned at 10:49 A.M.