

Letter for the Record from Mairead Painter

Connecticut State Long-Term Care Ombudsman

1<sup>st</sup> Vice President, National Association of State Long-Term Care Ombudsman Programs

**Prepared for the Select Subcommittee on the Coronavirus Crisis**

**Examining Long-Term Care in America: The Impact of the Coronavirus in Nursing Homes**

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Chairman Clyburn, Ranking Member Scalise and committee members, I am pleased to present this letter for the record on behalf of people in Connecticut long-term care facilities and in collaboration with the National Association of State Long-Term Care Ombudsman Programs (NASOP). Thank you for your ongoing support of State Long-Term Care Ombudsman Programs (SLTCOPs). Thank you and the Subcommittee for your support for the citizens we serve.

All long-term care settings were in the crosshairs of this national tragedy with millions of residents at greater risk of severe symptoms and death. In April of 2020, when the COVID 19 virus was new and not well understood, leaders thought that drastic infection control measures were necessary to combat the impact. These measures called for the isolation of long-term care residents not only in their skilled nursing facility but limiting them to their rooms. Initially everyone thought this might be for a few weeks to a few months, but never that this is where residents would be kept isolated for more than two years. My office and ombudsman offices across the country received thousands of calls reporting the impact isolation and restrictions were having. Residents were experiencing significant decline due to not moving and not having regular interaction with others, especially their family and friends. The greatest impact to residents was unquestionably the lack of oversight due to family,

friends, and long-term care ombudsmen being banned from skilled nursing facilities. CMS also suspended traditional state and federal surveys that normally ensure quality care and complete complaint investigations.

Facilities began and continue to report significant staffing challenges affecting their ability to meet basic resident needs. This all began happening at a time when the residents had increased needs due to the unintended consequences of the forced isolation that for many resulted in weight loss, failure to thrive, incontinence, overall general decline and in some cases even non-COVID related death.

Ombudsmen protect residents' rights to be treated as individuals with autonomy, choice, independence, and access to quality health care. Our role is to listen to the concerns of long-term care residents and their families and advocate for their rights to quality care and quality of life. We are receiving more complaints than ever before. When ombudsmen and family members were allowed to return to nursing homes and gained full access to residents, what was found in many cases were individuals experiencing a significant level of decline or failure to thrive.

Staffing shortages continue to be an ongoing issue. Residents regularly file complaints about not having regular access to showers and not being assisted with important daily activities such as dressing, eating, and toileting. This negatively impacts not only their physical well-being, but their dignity and emotional health as well. There is not enough staff to shower them, get them up in time to go to the dining room, to actively participate in recreation or spend time

with family members and peers. We are receiving an increased number of complaints related to the quality of food as well as the cleanliness of facilities.

In Connecticut, we have seen some success in certain nursing homes. I have seen that providers who are willing to pay a livable wage and provide appropriate benefits to staff are not having the same challenges related to the staffing crisis. These nursing homes have started to recover from the pandemic, and residents are beginning to thrive again. However, in skilled nursing facilities where owners continue to make business decisions to put profits over people, demonstrated by lower wages and inadequate benefits, refusing to use staffing agencies, lower food quality and cleaning supplies, we see residents who continue to experience negative outcomes and overall decline.

The trend to put profits over people started prior to the pandemic, and it has only worsened since. Historically, skilled nursing facility owners enjoyed significant profits. Due to improvements in the system including choice for the least restrictive environment, acuity-based payment systems, restrictions related to level of care, scrutiny for the tax dollars spent on long term care and increased accountability, traditional profit margins for owners have declined.

In response, we are seeing owners bringing in large capital investment firms who require a return on invested dollars, and we have seen large amounts of money leaving the skilled nursing facility. Often the facility does not appear profitable, however the owners and investors are profiting, or they would not keep purchasing facilities.

We see large management fees, rent and ballooned payments for other services paid to companies owned by interested parties. Large amounts of money being paid out while there is significantly less financial support for staff who provide direct care to the residents. Owners want to ensure that they continue to profit at levels they have historically, however they have no right to be guaranteed a profit and no right to ensure that their profits are made prior to residents receiving quality care and services.

In facilities where this is happening, there are significant cuts to care to maintain profit margins. This impacts residents already suffering from the isolation. I think it is imperative that we call for a study to see how many residents from March of 2020 through September of 2022 passed away for reasons other than COVID. It is crucial that Congress investigate the number of residents who have been diagnosed with failure to thrive, experienced weight loss or other significant decline during that period and compare it to a baseline of what would have been considered a normal percentage of decline for individuals living in skilled nursing facilities during the five years prior to the pandemic. The study could also look at staffing issues to gain an understanding of how decreased access to staff affected residents and if factors associated to staffing levels led to a decline in resident health. I believe that a study of these areas will show that COVID had a horrific impact, however the tragedy is that residents continue to be impacted and face significant risk due to the choice to put profit over people. It is imperative that there is never a time in the future where Ombudsmen and Essential Support People do not have access to residents living in skilled nursing facilities. We must also ensure that there are emergency plans in place outlining how facility surveys will be continued during the period of emergency. We cannot allow facilities to go years with little to no oversight, leaving

residents at significant risk. Our offices have received and continue to receive thousands of calls from residents and family members who report serious quality of care concerns. Residents need support and intervention now more than ever. The negative effect on nursing homes post pandemic, I believe has quite starkly exposed all the problems nursing homes were experiencing and a path they were headed down pre-pandemic, but people weren't paying as much attention. Lack of staffing, lack of trained and professional staff, and high turnover are all areas of concern that have been affecting the quality of care in skill nursing facilities for years and continue today.

Thank you for your attention to the needs of skilled nursing facility residents and the impact the pandemic is still having on them.

Respectfully,

A handwritten signature in blue ink, appearing to read "Mairead Painter".

Mairead Painter, Connecticut State Long Term Care Ombudsman