

September 17, 2020

## **Coronavirus Commission Report Released – More is Needed to Protect and Support Residents and Staff**

### **Statement of Lori Smetanka, Executive Director, National Consumer Voice for Quality Long-Term Care**

Yesterday, the Centers for Medicare and Medicaid Services (CMS) and The MITRE Corporation (MITRE) released the final report of the Coronavirus Commission on Safety and Quality in Nursing Homes (Commission). CMS tasked MITRE with organizing the Commission to advise the federal government on how to address the impact of the coronavirus in nursing homes and to provide recommendations for actions that CMS could take to protect residents and staff during the pandemic. The final report includes 27 recommendations and more than 100 action steps. Of the 25 Commission members, 13 endorsed the final report without reservation, 11 endorsed with reservations, and one member did not endorse.

Commission members recognized the need for immediate federal leadership and action in securing the necessary PPE, the importance of a national testing strategy, the negative impact that separation from families and restrictions on visitation has had on the well-being of residents, and the need for additional supports for staff.

My endorsement of the report is with reservations. I support that the recommendations provide a framework of priorities that need immediate attention in order to aid and protect residents and staff. Examples include:

- The call for a national testing strategy, along with timely, coordinated distribution of testing kits and supplies (including molecular point-of-care testing)
- CMS assuming responsibility for procuring and distributing PPE to ensure a 3-month supply for all facilities
- Additional guidance on cohorting that requires advance notification to residents and representatives about cohorting protocols and application
- Calling for revised visitation guidance that restates the resident's right to visitation, requires nursing homes to encourage designation of essential care partners, and criteria for compassionate care and end of life visits
- Recognition of the need to assess minimum care standards, including specified hours of care per resident per day

The report does not go far enough, however, in requiring action on the part of nursing homes, nor in emphasizing the importance of CMS's oversight role in holding facilities accountable for meeting standards. None of the recommendations relate to survey activities, complaint investigations, nor emphasizing adherence to quality care standards.

For example, while the report recognizes the need for addressing staffing levels, staff training, workforce shortages, and working conditions, the recommendations around workforce and staffing issues do not go far enough in requiring immediate action by CMS or nursing homes to address the critical issues that exist.

Further, the report does not address the need for nursing homes to take responsibility for their own emergency preparedness, sufficiency of staff, staff training, and ability to meet the needs of the residents in their care. Consistent reports, even 6-months into the pandemic, are that proper infection prevention protocols, including proper hand-washing and donning/doffing of PPE, are not being followed and there continues to be widespread severe staffing shortages resulting in basic care needs going unmet, as well as staff caring for residents who are both COVID-19 positive and COVID-19 negative. The report offers numerous recommendations and action steps for guidance, training, and resources to be developed by CMS. It must also be required that they be used and implemented by the facilities. Urging and suggesting implementation is not enough.

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