

[National letterhead]

February 8, 2022

***HUMAN SERVICES COMMITTEE INFORMATIONAL FORUM ON NURSING HOME ISSUES***  
***Remarks of Ann Spenard, DNP, RN-BC, Chief Clinical Officer, National Healthcare Associates***

Good morning, Senator Moore, Representative Abercrombie and to the members of the Human Services Committee. My name is Ann Spenard. I am the Chief Clinical Officer at National Healthcare Associates (“National”). National has been providing nursing home care in Connecticut since 1984 with the opening of Riverside Health and Rehabilitation and now provide skilled nursing and rehabilitation services in across Connecticut in thirteen communities---Bethel, Bloomfield, Fairfield, West Hartford, Rocky Hill, Marlborough, Milford, Wallingford, East Hartford, Bristol, New Milford and Middletown. National has over 1,780 FTE’s in employees who work in our thirteen nursing homes. We are licensed to provide services in 2,054 beds and for decades have membership with the Connecticut Association of Health Care Facilities (CAHCF).

**A Period of Trauma and Resilience for our Residents and Caregivers**

Here we are approaching the two-year mark of the COVID-19 pandemic and public health emergency, and I can say that our nursing homes, the residents we serve, and our employees, have been challenged like in no other time in our history of providing services. In our thirteen nursing homes, we were specifically and severely impacted from the onset of the pandemic, its various surges and variants, including the most recent Omicron variant, which is responsible for outbreaks in nearly every Connecticut nursing home and other congregate living settings. I can easily say that our residents and staff have experienced and dealt with nearly every feature of the pandemic from the very beginning when the misunderstood virus was spreading through persons showing no symptoms, and especially in regions of Connecticut experiencing high rates of community prevalence. We experienced firsthand the consequences of a lack of COVID-19 testing capacity in the United States and here in Connecticut, the extreme shortages of PPE, and the ever-changing CDC, CMS and DPH guidance policies that evolved as the virus became better understood in the medical, academic and scientific communities. As a company National spared no expense and left no stone unturned to find and purchase PPE, testing supplies, and staffing. Through these efforts, our staff had what they needed to safely care for our residents. We experienced the severe and emotionally devastating visitor restrictions imposed early in the pandemic, and we have experienced the optimism of what the COVID-19 vaccine means to our community.

While the trauma our residents and caretakers faced was extraordinary, I can say that their resilience and determination was equally extraordinary. With these introductory comments, I am happy to focus my remaining remarks on the topics of our severe staffing shortages---and how this issue is interrupting our hospital admissions---and how this is slowing down the occupancy increases that we would otherwise be experiencing at National. Second, and this is also related to our staffing shortages, I to can offer observations on the COVID-19 staff booster mandate and the approaching February 11, 2022 compliance, and the significant concerns we have about the staff layoffs/ furloughs that could happen next week, and how this will just make the staffing shortages issue so much more severe. And again, related to staffing, I would like to give you our comments on the negative impact nursing staffing agencies are having in our nursing homes. Finally, I would like to also offer comments on the recent Connecticut mandate requiring nursing home visitors to be full vaccinated and boosted if eligible or otherwise produce a negative test or take a test onsite at the nursing home. Of course, I am happy to answer any questions you may have on any matter.

### **Severe Staffing Shortages, Impact on Admissions, and Nursing Home Occupancy Recovery**

The staffing shortages our nursing homes are experiencing are like no other time in our thirty plus years of providing skilled nursing home services. With the initial onset of COVID-19 our centers lost some staff to early retirement, and those just afraid to work in healthcare during the pandemic. Then we had the increased and extended unemployment benefits which delayed staff from coming back to work. As the pandemic continues, staff are burnt out and exhausted and are choosing to continue to leave healthcare. Others are leaving regular employment to work for agencies where there is plenty of work at a much higher rate of pay and name your own schedule.

The staffing shortages are so significant that nearly all our National Healthcare facilities have limited admissions from hospitals to be able to safely address the care needs of all our residents. In some of our centers, we temporarily closed a unit to consolidate the staff to safely care for our residents. The stress on the current staff is enormous as we struggle to fully staff our centers.

Consequently, the occupancy in our buildings is much lower than normal, but the low number is really a distortion caused by the staffing shortages and how it impacts admissions. It's not at all a true reflection of the need or demand for our services, but it is a reality. We fully expect to improve over time as the staffing situation improves, but we are concerned that this will be a slow process, perhaps years long, as our country recovers from the pandemic.

The 4.5% wage enhancement and new pension and health care dollars that were appropriated last session is critical to us being able to attract people to our centers and help keep them incentivized to stay employed. Without this investment it would be almost impossible to attract and hire staff.

### **Executive Order 14B Requiring Long Term Care Facility to be Boosted if Eligible Compliance**

While we achieved 100% compliance with vaccinations, unfortunately we are having a much more challenging time with the booster. This is consistent with what our colleagues are experiencing across the healthcare spectrum and the reasons are diverse and complex. But whatever the reasons, we are very concerned that with the executive order mandate deadline approaching on February 11, 2022, we are going to have to again layoff or furlough employees from an already depleted supply of staff, unless an extension is granted.

### **Nursing Staffing Agencies and Negative Impact on Care and Increased Costs**

Our nursing homes have been very negatively impacted by the staffing shortages in so many ways, but the impact of having to turn to nursing staffing agencies has been particularly troublesome. Using staffing agencies is a measure of last resort at our company. From a patient care perspective, it runs counter to the consistent assignment of staff to our residents that has been our longstanding practice. Agency staff employees lack the commitment to the residents that a full-time employee demonstrates. Agencies by their very nature are gig workers and have no allegiance or commitment to the nursing home, their residents, or employees. However, like so many other nursing homes we have had to utilize this option. The financial consequences have been enormous. We are seeing unbelievable spikes in the costs of staffing agencies. In the current environment it is a bidding war for staff that is going on unrestricted. The agencies there for keep raising their pay, unrestricted, and passing the cost along to the facilities who can't compete because we can't pass on our costs. This further demoralizes our employees, who show a great commitment, and are working alongside people who show no commitment, and are making more money than the employed staff. This bidding war for staff is not only at the agency level, but also trickling down to employers who are trying to outbid each other for permanent staff. These costs are unsustainable and may impact the viability some centers to continue to provide services.

We understand the Connecticut Attorney General is reviewing these pricing practices and that the state legislature is also reviewing the issue.

### **Recent Changes to Visitation Rules / Vaccination/Booster and Negative Test Conditions**

The recent change to visitation rules related to vaccination/booster and negative test conditions have again forced us to pivot. This sign in process to visit has lengthened, and on occasion we have encountered visitors frustrated and angry over the process. In general, most visitors are patient with this new process.

## **Conclusion**

Thank you again for inviting me to speak to our past and current experiences during this unprecedented public health emergency. I would be happy to answer any questions you may have.