



**Long Term Care Community Coronavirus Needs
Interim Joint Committee on Coronavirus Response
March 18, 2020**

Co-Chair Roblan, Co-Chair Holvey and members of the committee, thank you for the opportunity to submit testimony on the coronavirus as it specifically relates to the long-term care provider community. I am Ruth Gulyas, CEO of LeadingAge Oregon – the statewide association of not-for-profit and other mission-directed organizations consisting of nursing homes, assisted living/residential care facilities, continuing care retirement communities, federally subsidized housing for low-income seniors, in-home care, hospice and other community based care services including adult day programs. Our members are on the frontline of the COVID-19 battle and older Oregonians are depending on these organization for their safety and care needs.

The long-term care (LTC) community - key partners in this battle - needs your help. Some of the few areas where help is needed include:

- **Funding** to help organizations with staffing challenges exacerbated by school closings, as well as day care, increased overtime expenses, and the need for more one-to-one care due to the prohibition of communal dining. Facilities are also facing rapidly escalating cost increases in their attempt to procure Personal Protective Equipment for staff and visitors. Some of the needed funding could come from the additional Federal Medicaid Assistance Percentage (FMAP) that is increasing to 6.2%. Other sources of funding may be needed.
- **Personal Protective Equipment (PPE).** Facilities are concerned that their current supply of PPE (masks, gown, gloves) is inadequate. State efforts to procure an adequate supply will most likely be needed.
- **Workforce.** Help is needed to assure providers have adequate staff to provide care. Flexibility is needed around training requirements, such as a temporary waiver of some pre-service training requirements, waiver of licensure of healthcare professionals licensed in other states and certain continuing education requirements, waiver of some licensure and certification standards for LTC providers when compliance is otherwise impossible, and allowing non-certified staff and volunteers to provide care and services as deemed appropriate by the facility.

A nursing home and assisted living member located in rural Oregon summarized their situation as follows:

“My concerns...are in reference to our inability to order supplies. Is the State of Oregon making any provisions to ensure priority availability of supplies to medical facilities and nursing homes? Should a COVID-19 case develop within our facility, the consumption of protective gowns, masks and facial protection will quickly be exhausted.

In another matter, staffing of the facility will be virtually impossible in the event of an outbreak. The labor pool for certified caregivers and licensed nurses is quite shallow here. Local colleges have stopped teaching nurses and CNA's ending any hope of recruiting fresh staff. Will the legislature consider loosening regulatory requirements of certification of caregivers? A number of those suspended nursing students could assist us if Pioneer Place has a COVID-19 outbreak. I'm trying to be proactive with emergency staffing plans, but there simply aren't any resources to back us up if we must isolate and require one-on-one care.

Lastly, ...we walk a fine line financially. Will there be any funds made available to help keep our facility in business if COVID-19 shows up within our facility? The increase in operating expenses will deplete our cash reserves in very short order.”

Co-Chairs Roblan and Holvey and members of the committee, thank you for your leadership and acknowledgement of the critical role the long-term care community plays in Oregon's health care sector and overall community. Our members stand ready to lead the battle on the COVID-19 crisis. We look forward to working with you on efforts to assure they can do so.