APRIL 17, 2020

MESSAGE FROM ARCHCARE REGARDING NURSING HOME DEATHS DUE TO COVID-19

As caregivers, the death of each and every person for whom we are privileged to care is as personal to us as it is to the families and loved ones they leave to mourn.

We welcome Governor Cuomo’s efforts to bring light to the tragedy of Covid-19 in nursing homes throughout New York. However, reducing the battle against coronavirus to a simple tally of lives lost ignores multiple realities and does a tremendous disservice to the thousands of dedicated healthcare workers who are putting their lives on the line each day to care for ArchCare’s 1,700 residents and the tens of thousands of other vulnerable nursing home residents across the state.

Without additional context, the number of Covid-related deaths in a given nursing home is a misleading statistic. On their own, these figures do not accurately reflect the overall quality of care a facility provides or its diligence in trying to control the infection.

A nursing home’s ability to prevent the spread of Covid-19 among residents and staff hinges on two things: widespread testing to know who is infected and who is not, and access to proper personal protective equipment. ArchCare has remained steadfastly committed to testing as many residents and staff members as available testing supplies will allow, and we continued doing so even after new government guidelines were issued that allowed nursing homes to stop or drastically curtail testing. As a result, Carmel Richmond and other ArchCare facilities appear to have had more deaths than facilities that have done little or no testing and sent residents presumed to be infected to the hospital. This would allow them to keep their infection rates artificially low and report that patients who in fact succumbed to Covid-19 died of other causes. We took this aggressive approach to testing in order to leave no stone unturned in caring for our residents, including the use of chloroquine and hydroxychloroquine, which can only be prescribed to patients who have tested positive for Covid-19.

Further, the relegation of nursing homes to secondary status behind hospitals in allocating limited supplies of personal protective equipment as media have widely reported, and federal and state guidelines that require caregivers who have been exposed to the virus but do not yet show symptoms to remain at work, have made it nearly impossible for nursing homes to control the infection and rendered what otherwise may have been preventable deaths inevitable.

The state’s figures also do not account for facilities that care for sicker and more medically complex populations. This is especially critical for ArchCare’s five nursing
homes, which care for a disproportionate number of residents with HIV/AIDS, end-stage renal disease, neurodegenerative disorders and other serious medical conditions that make them highly susceptible to infection.

Similarly, the numbers also make no distinction between patients who are exposed to Covid-19 in a nursing home and those who are admitted with the infection. Since March 25, nursing homes in New York have been required to admit patients with confirmed Covid-19 infections and prohibited from testing incoming residents prior to admission.

Since ArchCare first began monitoring global reports of coronavirus in January, we have taken every available measure to combat Covid-19, including:

- All 4,300 care members (ArchCare’s term for staff members) received mandatory training about the coronavirus and best practices for patient care, infection control and personal safety, building on the extensive training they already receive at regular intervals during the year. This includes staff of ArchCare’s five skilled nursing and rehabilitation facilities and our home care ministry and home- and community-based care programs throughout the region.

- Ahead of the issuance of federal guidelines by the U.S. Centers for Medicaid & Medicare Services, on March 12 ArchCare closed all of its facilities to non-essential visitors.

- Housekeeping and disinfection schedules were intensified and strict handwashing, hygiene and infection control protocols have been enforced and closely monitored.

- All staff are screened daily and closely monitored for possible exposure or illness in accordance with infection control best practices and state and federal guidelines.

- A nurse or other clinical staff member designated as an infection-control monitor is circulating throughout each facility 24 hours a day to observe staff and residents, ensure that all housekeeping, hygiene and infection control measures are being properly carried out and respond to questions from residents and staff.

- A dedicated phone line and email address staffed by trained personnel are available to answer questions from residents, family members and staff. Details of these resources and additional information about Covid-19 are also available on ArchCare’s website at archcare.org/coronavirus, which is being updated regularly.

Nothing is more important to us than the health and lives of our residents and care members. We will continue to do everything in our power to protect, care and advocate for them, and to communicate truthfully and candidly with the people who love them and the communities we serve.

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