



State of Connecticut

SENATE

STATE CAPITOL
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HARTFORD, CT 06106-1591
SENATE REPUBLICAN OFFICES

August 28, 2020

Governor Ned Lamont
Office of the Governor
210 Capitol Avenue
Hartford, CT 06106

Dear Governor Lamont:

Too many nursing home residents have died since March. Many due to COVID-19, but we also cannot ignore the impact continued social isolation has had on the death toll and the health and wellbeing of vulnerable nursing home residents. Therefore, we are writing to ask that your administration consider further changes to the Department of Public Health's policies to allow for expanded safe indoor visitation with family members at nursing homes, especially at this time as cases have slowed and we have not yet entered an anticipated second wave. The elderly in our nursing homes do not have time on their side, and they deserve to be able to see their loved ones. The negative impact of isolation on mental and physical health can be just as dangerous as the pandemic itself and must not be overlooked.

We appreciate the guidance from the Department of Public Health issued yesterday which clarifies how outdoor visits should occur and expands "compassionate care visits" to individuals who undergo "a significant change in his or her physical, mental or psychosocial status." However, the order falls short of allowing for visits between nursing home residents and family members before a decline in physical health or wellbeing occurs. Rather, the order only allows for visits once a person has already had a negative change in their health or are near death. This policy fails to acknowledge the importance of family visits in preventing further decline. We strongly believe family visits should be allowed with proper safety precautions for all nursing home residents. Visits with loved ones should not have to wait until a person's health has further deteriorated. The value of family visits is that they can help prevent such deterioration from occurring in the first place.

In the early days of the pandemic, nursing home residents were terrorized by the situation they faced. They were kept in their rooms scared and isolated from family, surrounded by illness and death, without even an opportunity to walk outside for a breath of fresh air for months. Since the pandemic slowed, outdoor, virtual and window visits have been allowed but the lack of indoor visitation has put those with mobility issues at a disadvantage. In addition, the impact of weather can also keep families apart, whether it be extreme heat, rain or eventual arrival of cold weather. The order issued yesterday still does not allow for visitation for residents who are not near death and who would prefer to have an in-person visit indoors. The order also does not address what happens when the weather turns colder in a few months and outdoor visits can no longer occur. Lastly, the compassionate care visits can only occur if a facility has not had a positive COVID-19 test in the past 14 days. If someone is near death on day 13

of no COVID-19 cases they can't be visited. However, when visits do occur, they "shall be permitted without regard for strict social distancing requirements, allowing the resident and the visitors to touch each other, provided the resident and the visitors wear all appropriate personal protection equipment throughout the visit, as identified and provided by the nursing home facility in accordance with its visitation policy." This seems to be inconsistent policy.

While many of the measures you have taken are well intentioned, some in regard to our nursing homes are deeply disturbing and the policies in place do not acknowledge the resulting damage and the risk residents experience. Some of these effects are just as damaging to a person's wellbeing as the COVID-19 virus itself, speeding up decline, diminishing capacity, and negatively impacting other aspects of personal health. Your actions have been tied exclusively to the virus, as if the virus is the only threat seniors in nursing homes face when it comes to their health and wellbeing. There are other threats that need attention too. Social isolation, lack of exercise and mobility also substantially contribute to poor outcomes. In this process residents' dignity and human rights must not be abridged, including the right to quality health care, fresh air and family interaction. We need a focus on patients and people. The interim report issued by Mathematica on the state's response to the pandemic in nursing homes failed to include any interviews with nursing home residents. Researchers also failed to conduct any on site visits. Out of the entire interim report, only one page was dedicated to a patient centered care plan. It's obvious that the people in nursing homes were not made a priority and that must change.

Family members and loved ones are the "eyes and ears" of elderly individuals, especially persons suffering from Alzheimer's disease or dementia. When a person with dementia does not have the ability to interact with their loved ones and what is familiar to them, their capacity diminishes, further accelerating decline. Forcing a person to wait until their capacity diminishes to see their family is the complete opposite strategy of patient centered care we should be embracing. With family members not being allowed to visit, other health issues can go unnoticed and worsen. Nursing home staff work extremely hard to care for their residents. But the interaction between a mother and child or two spouses cannot be replicated. Family members know each other better than anyone and are more likely to pick up on small changes that could be signs of significant health issues or deteriorating, potentially deadly conditions. As Quinnipiac University professor [Nicholas R. Nicholson Jr.](#) has been reporting for years, social isolation is a serious problem with older adults, strong correlations exist between social isolation and negative health consequences ([2009](#)), and older adults experiencing social isolation are at increased risk for numerous negative health outcomes, including depressive symptoms, decreased quality of life, and cardiovascular disease ([2013](#)). In addition, AARP Research found in 2018 that at the time Medicare spent approximately \$134 more for each socially isolated older adult per month than it would if the person were connected, speaking to the impact of isolation on health and wellness.

We appreciate the Department of Public Health's earlier order requiring virtual or window visits between nursing home residents and family members. However, outdoor visits are limited. Virtual and window visits are not always an effective means for many elderly individuals to communicate. They may struggle with technology or may be confused and frustrated by it, causing further stress and confusion that harms mental capacity. Many residents do not live on the ground floor of buildings, so window visits with family standing far away from a second or third story window may be completely ineffective if the nursing home resident cannot see or recognize their loved ones from so far away. The result is that many nursing home residents feel like prisoners living their last days in isolation and without the human dignity we all deserve.

We believe it is imperative that yesterday's order be expanded so that family visits can be prioritized for all nursing home residents. We hear directly from constituents about what they and their loved ones are experiencing firsthand. Many lawmakers have loved ones in nursing homes and have personally experienced the suffering caused by the ban on family visits. The COVID-19 pandemic is most painfully and disproportionately affecting older residents and those in nursing homes. Nearly three quarters of all COVID-19 related deaths in Connecticut occurred in long term care facilities, disturbingly higher than the national average of 40 percent. The pain these residents are enduring goes far beyond the virus itself and involves the unintended consequences of isolation and restriction on their physical and mental health and wellness.

We need the voices of Connecticut residents to be heard at every level, especially the voices of those who are most harmed by the pandemic. We write this so that you hear them too.



Len Fasano
Senate Republican Leader



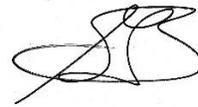
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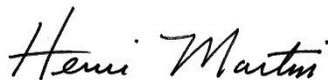
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cc: Paul Mounds, Chief of Staff; Dr. Deidre S. Gifford, Acting Commissioner of the Department of Public Health