



Thursday, March 26, 2020

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## Statement on the March 25, 2020 New York State Department of Health Advisory: Hospital Discharges and Admissions to Nursing Homes

There is a clear need to balance the issues of patient safety, surge management, and conflicting guidelines and public policy around hospital-SNF transfers. To be sure, the issues are complex. We are in extraordinary times, making highly complex decisions, shrouded in a fog of confusion and chaos.

However, we find the New York State Advisory to be over-reaching, not consistent with science, unenforceable, and beyond all, not in the least consistent with patient safety principles.

As an organization, AMDA-The Society for Post-Acute and Long-Term Care Medicine cannot endorse or abide by this policy directive.

It is absolutely essential to consider the health, welfare and safety of frail individuals residing in our nation's PALTC facilities where we know the attack rate and case-fatality rates (CFR) from COVID-19 are staggering.

The preliminary results from Kirkland show a hospitalization rate of 57% for residents and CFR rates of 36% and 7% for residents AND visitors respectively. And these are only preliminary results. This is not a typical seasonal virus.

Decisions on transfer are not at the sole directive of the hospitals or hospital physicians. Decisions to transfer are joint responsibilities since the impact may likely have dire, indeed fatal, consequences.

Unsafe transfers will increase the risk of transmission in post-acute and long-term care facilities which will ultimately only serve to increase the return flow back to hospitals, overwhelming capacity, endangering more healthcare personnel, and escalating the death rate.

Nor can the New York State Department of Health override Federal directives set forth by the Centers for Medicare and Medicaid Services which stipulate that such decisions to accept a patient be made with the understanding that the facility can safely care for such patients.

Rather than bullying nursing facilities and medical providers to make unsafe decisions, the State of New York would be wise to direct its energies at ensuring adequate personal protective equipment is available to all healthcare providers, ramping up needed testing capabilities, shortening test turnaround times, developing a long-neglected healthcare workforce, and identifying and standing up alternative care sites.

### *Our Vision:*

*A world in which all post-acute and long-term care patients and residents receive the highest- quality, compassionate care for optimum health, function, and quality of life.*