



## **Task Force on Long Term Care**

**September 15, 2020, 1:00 PM**

**Governor's 8th Floor Conference Room**

**1700 West Washington Street, Phoenix, Arizona 85007**

A general meeting of the Task Force on Long Term Care was convened on September 15, 2020, via Zoom and at the Governor's 8th Floor Conference Room at 1700 W. Washington, Phoenix, Arizona 85007, notice having been duly given.

- I. **Call to Order**
  - A. **Ms. Christina Corieri, Chair**, called the Task Force on Long Term Care to order at 1:00 p.m. with twenty-seven (27) members and two (2) staff members present.
- II. **Roll Call**
  - A. **Ms. Christina Corieri, Chair**, welcomed everyone that had joined Zoom and on the public call-in line.
  - B. The following members were excused from the meeting: **Ms. Diane Drazenski, family member, Mr. Colby Bower, Assistant Director of Policy and Intergovernmental Affairs, Arizona Department of Health Services, Ms. Rosie Abad, Archie Hendricks Sr. Skilled Nursing Facility**
- III. **Approval of Minutes**
  - A. **Ms. Chistina Corieri, Chair**, requested a motion to approve the August 25, 2020, meeting minutes.
  - B. **The Honorable Jennifer Longdon, Arizona State Representative**, motioned to accept the minutes as drafted. **Ms. Dana Kennedy, State Director, AARP Arizona**, seconded the motion, and the motion passed with no dissenting votes.
  - C. **Ms. Chistina Corieri, Chair**, announced that the next meeting will be Tuesday, September 22nd at 1 pm and that we will continue to have these meetings for the foreseeable future as long as the task force members are available. She stated that there have been ten (10) days for the guidelines to be in effect and that we have received many letters from constituents, both successes, and challenges. Today, each task force member will go around and discuss the successes and challenges that they have seen on the ground. Grace will be keeping time for 3 minutes. Ms. Corieri stated that if you have more comments, please feel free to send them in an email before Thursday the end-of-business. Then we will take that feedback, take the common points, and come back with adjusted recommendations. We are open to continual adjustments. Ms. Corieri announced that there will be the idea of implementing a "designated caregiver" into the guidance and a draft will be sent out Friday by the end-of-business. The idea is that there will be one person per resident that will be classified as a "designated caregiver" and will be treated the same as an employee (testing requirements dependent on community/county spread, PPE, etc). They will have to attest that they are avoiding crowds.
- IV. **Discussion on the implementation of the "COVID-19 Guidance for Visitation at Congregate Setting for Vulnerable Adults and Children"**
  - A. Ms. Corieri stated that each task force member will have 2-3 minutes to speak about what they have observed in the first few weeks of implementation and discuss any challenges and successes.
  - B. **Mr. Dave Voepel, CEO, Arizona Health Care Association**, stated that he has talked to a lot of SNF owners and operators and most of them have made their policies in the proper time frame. However, there is still confusion with the phased chart in the guidance. He believes that AzDHS needs to add a key to the chart, so people know what the "x"'s means. They think that an "x" is negative, or using deductive thinking. Clarifying the language would be really helpful, in addition to a key or legend. Additionally, he stated that there is confusion about "moderate" and "substantial" spread. There is inconsistent wording such as "must", "shall", and "may".

- C. Ms. Gaile Dixon, President, Dream Catcher Assisted Living**, shared with the group that two of her residents have passed away and two residents who have moved out due to not being able to visit. This has been devastating to her business. She added that the guidance is a little difficult for the common individuals to understand and there is a back up in resident appointments. Should would also like to see a key or legend on the bottom of page six. Also adding “testing required” with “x”s so families can see when they need to be tested and not.
- D. Ms. Dana Kennedy, State Director, AARP Arizona**, supports the idea of an “essential caregiver”. She has not heard a lot of positive feedback but rather a lot of confusion around the chart. She recommended that AzDHS needs to add something about “privacy or privacy rights” so residents are not in fear of what they can/cannot say. There are a few facilities that are still not allowing visitation because they have not been able to establish policies and that is completely unacceptable. Is there a place for people to submit a complaint? What would it look like for a facility to be investigated? Ms. Kennedy shared concerns about enforcement. **Ms. Corieri** said that we can maybe establish a call line for complaints.
- E. Ms. Pam Koester, CEO, Arizona LeadingAge**, stated that her team really talked about best practices and communication between residents and their family members. There is confusion with the chart and some of the language. She loves the idea of an FAQ sheet, that will be helpful to many.
- F. Mr. Rocky McKay, President, Arizona Assisted Living Homes Association**, expressed that there is confusion with the chart and misinterpretation of the x’s. The FAQ will be nice. He added that there is a concern with privacy or lack thereof and many of the homes and facilities are worried that if they do walk away, the family members will take off their mask and hug their loved one anyway. Ms. Corieri stated that we will share this chart information with DHS and see if we can update it to be more readable.
- G. The Honorable Kate Brophy McGee, Arizona State Senator**, thanked all of the members for being here. The feedback is that the testing aspects are unworkable however, she has referred people to some same-day testing sites, but overall, the testing timeline is unreasonable. She added that there is confusion about allowing dentists or podiatrists in homes/living facilities and that we need to clarify that specialists are allowed in the homes and facilities. Would like to see “essential designated caregivers” be implemented and shared that it would make such a difference.
- H. The Honorable Lela Alston, Arizona State Senator**, stated that she has not had as much feedback as anticipated. She likes the idea of the “designated caregiver” notion and feels that it will cut many of the concerns moving forward. Senator Alston has a concern about what to do as far as the 15-minute visitation is concerned. Additionally, if the patient is bed-bound, what are they supposed to do? Perhaps allowing the facilities and homes to make that decision on a case by case basis. Many people are comparing themselves to workers who do not have to abide by the same guidelines as family members.
- I. The Honorable Tyler Pace, Arizona State Senator**, shared that he has a lot of issues with the first rendition of the guidelines. Sharing some successes, some have been able to see their loved ones and that is great. There are communities that have been able to host visitation safely and feel that these new guidelines are more burdensome. He would like to know, are families able to move their loved ones into an assisted living home? He added that the rate of reported depression is at an all-time high and more reports of attempted suicide than ever before. Most of these cases are due to isolation and feeling like they do not have control over their lives and a sense of self-burdon. Senator Pace is concerned with the 48-hour window and having to pay for a test. There are not many people who have the funds or ability to take tests and stay home from work. Additionally, communities think that visitors mean healthcare workers, ombudsman, etc. Lastly, “essential family caregivers” is the best idea of the day. Many other states do this and they are treated as “healthcare providers”. If we can do anything today, implement “essential caregivers” and get rid of the 48-hour window. **Ms. Corieri** added that in regard to moving in, we can work with AzDHS to see if we can provide rapid testing and to please call her separately.
- J. Ms. Becky Hill, family member**, stated that she was able to see her mom, which was great. She also agreed to all of the statements that **Mr. Voepel** mentioned about what was confusing and challenging within the guidance. Additionally, **Ms. Dixon’s** comments hit home and **Senator Pace** hit the nail on the

head. Ms. Hill stated that although able to visit, her mother's residence did not agree with the provision to allow visitation in the living space. The "designated caregiver" idea would cover many issues as long as operators agree to comply with it. Ms. Hill got a test from ASU and was able to get results in < 48 hours free of cost, however, the 48-hour testing requirement has been a problem for many others. Ms. Hill expressed concern that her mom had to leave her room, get into a shared elevator, and go to another room, which was confusing and troublesome. These policies are not sensitive to dementia patients and it is not safe to remove residents from their living space to a room that they are not familiar with. She believes that affordable and accessible testing needs to be available. She expressed that we do need a policy in place, but the one that we have now needs to be reworked.

- K. Ms. Tonsa Price-Edwards, family member**, stated that she has not been able to see her mother because she has not been able to meet the 48-hour testing requirement. However, she should be seeing her mother on her 89th birthday this Saturday and she is very excited. She stated that the home that her mother is at has been amazing and has worked with the families well. However, many family members are not able to afford the testing requirement. 15 minutes in the bedroom is not long enough, especially with residents who have dementia. Not many people know about the Ombudsman program and would like to see an informational push about that program. Ms. Price-Edwards loves the "essential caregiver" idea and added that this is established in many homes already.
- L. The Honorable Jennifer Longdon, Arizona State Representative**, would like the "designated caregivers" to stay nimble to protect the health of all. That there is a huge opportunity for facility/home education as we adjust guidelines. Perhaps there should be the implementation of a feedback form or a place that family members can go if a home/facility is not abiding by the guidelines or not allowing visitation in general. She added that visitation will be better for all individuals' mental health. Additionally, Representative Longdon stated that we need to make sure that voting rights are intact for individuals in homes and facilities. **Ms. Corieri** stated that AzDHS is working with the Secretary of State's office in order to streamline the voting process in homes and facilities.
- M. The Honorable Regina Cobb, Arizona State Representative**, stated that the letters that she and other elected individuals are receiving are more than likely the horror stories happening. She agrees with the idea of "designated caregivers" and needs to make it required for homes so they are unable to "opt" out. She believes that the 48-hour testing limit is financially discriminatory and a barrier for many people. Some facilities are charging upfront costs for testing. She added that there is large confusion for the need of testing. Lastly, the attestation form has not been addressed and what the purpose is behind this requirement.
- N. The Honorable Joanne Osborne, Arizona State Representative**, appreciates the dialog between the family members and the task force. Many of the things that she has heard are the same that has been mentioned above. She loves the idea of the "designated caregivers" and the FAQ sheet. She wanted to know where a clergyman, pastor, minister fit in this guidance? She believes that this needs to be addressed. Representative Osborn has talked to a lot of facilities and they have stated that many visitors have not been able to come. Does that mean families have not been able to overcome the guidelines? She added that whatever the answer, that is concerning. The mental health of residents and family members are so vital in individuals well being and quality of life.
- O. Mr. Justin Stein, District Director of Operations, Brookdale Senior Living**, stated that Brookdale has 29 separate communities throughout Arizona. However, out of the 29 communities, there have been less than 10 in-person visits due to families not being able to reach the 48-hour window. However, there have been positive responses to outdoor visitation. He looks forward to the "caregiver designation". **Ms. Corieri** stated that she has seen a lot of positive feedback from the outdoor visitation as well.
- P. Mr. Joseph E. LaRue, CEO, Sun Health**, stated that they have three campuses in the valley and are grateful to have visitors again. However, they are not seeing many in-person visits due to the testing route and confusion around the guidelines. If there is anything that can be done to clarify language, that would be helpful. He added that "designated caregivers" are a great idea and would be very grateful to have this implemented.
- Q. Ms. Karen Barno, President and CEO, Arizona Assisted Living Federation of America**, explained that having a "certified caregiver" and "designated caregiver" may provide some relief to the confusion. However, a certified caregiver is someone who is certified to take care of residents, so would like to consider not calling them a designated caregiver. **Ms. Corieri** agreed and suggested perhaps, "essential visitor" and would talk with AzDHS.

- R. **Mr. John Albrechtsen, President, Bandera** (Ensign's Arizona-based portfolio subsidiary), stated that they have had a few in-person visitors. He explained that the new CMS policies went into place at a similar time as these guidelines came out and so having both to implement was a challenging adjustment. However, overall seems like we are heading to a healthy new normal and are able to get through challenging times.
- S. **Mr. Mason Hunter, President, Haven Health Group**, is working closely with Mr. John Albrechtsen, Mr. Dave Voepel, and Ms. Heather Friebus and echoed their comments above.
- T. **Ms. Heather Friebus, Administrator, Devon Gabels Rehab Center**, stated that she has worked with 186 family members through the new guidance and overall, they have been perceived really well. There have been challenges with the confusion on the charts and she agrees with the "essential caregiver" having an alternative name.
- U. **Mr. Scott McCutcheon, Chief Operating Officer, LivGenerations**, stated that things are going well and most families are opting to do the outdoor visits, especially while the weather is getting better. Very much in favor of a "designated visitor" that maintains reasonable guidelines.
- V. **Ms. Tiffany Wilkins, Vice President for Operations, Spectrum Retirement**, stated that communicating with families is the most important part and ensuring that they have multiple options for visitation.
- W. **Ms. Donna Taylor, Chief Operating Officer, LifeStream Complete Senior Living**, stated that CMS guidelines and DHS guidelines are different in terms of some of their definitions. For example, CMS is defining an outbreak as "one or more cases" whereas DHS's is different. There was confusion on the level of autonomy assisted living homes/facilities could have when using the DHS guidelines and establishing their own.
- X. **Mr. Mark Clark, President and CEO, Pima Council on Aging**, explained that he has heard many of the same confusion that has already been mentioned. Would like to see more understandable communication. There has been inconsistent information being relayed from local health departments and AzDHS.
- Y. **Ms. Lisa Pollock, State Long Term Care Ombudsman, Arizona Department of Economic Security** stated that Ombudsman have been in homes and more clarity has been brought forth by DHS. A FAQ sheet would be greatly beneficial. She added that there have been many testing issues with the 48-hour requirement.
- Z. **Ms. Virginia Rountree, Deputy Director of Programs, Arizona Department of Economic Security**, agrees with many of what has already been stated about language in the DHS document and the 48-hour testing requirement. She would like to reiterate that the verbiage on the DHS requirement is inconsistent (may, shall, should, etc.). Wanting to know if a facility is in "yellow and green", but a visitor is coming from a "red" county, is there guidance around that?
- AA. **Ms. Jakenna Lebsock, Assistant Director, Arizona Health Care Cost Containment System** Her feedback largely echoed **Ms. Virginia Rountree's** (and others) in that we have heard from several providers that they are grateful for the starting point but do not believe our work is done. Additionally, the requirements seem to have a disproportionate administrative burden on the smaller providers. Many providers have expressed concerns around the clarity of the data and what should be their point of reference for which stage they are in. Also, there are questions around what happens if they are not in compliance (e.g. if they had implemented alternate plans ahead of our efforts and there is no alignment).
- BB. **Ms. Christina Corieri** thanked everyone and stated that there will be a draft on "essential visitors" and expect that on Friday before the end-of-business. Then on Tuesday, we can discuss, make any changes at that time, and vote. If there is more information that you would like to share, then send them to Grace, Tuesday, and myself before Thursday afternoon.

## V. Upcoming Meeting Dates

- A. **Ms. Christina Corieri, Chair**, asked members to send any comments to either Ms. Tuesday Elias or Ms. Grace Appelbe. **Dr. Cara Christ** will be joining the Task Force on Long Term Care, next week to speak on behalf of the Arizona Department of Health Services.
- B. Next meeting will be Tuesday, September 22, 2020, at 1:00 p.m-2:30 pm. For members of the task force, Zoom information will be provided at a later time. Call in for the public is made available here: <https://goyff.az.gov/meeting/lctf/2020/08/11>

## VI. Call to the Public

A. **Ms. Christina Corieri, Chair**, reminded members on Zoom and within the public call line, that call to the public are written only, submitted here: <https://goyff.az.gov/webform/written-public-comment>

B. The following remarks were submitted before September 15, 2020, and have been redacted and summarized for confidentiality purposes:

- A member of the public shared her frustrations about the restrictions that are placed on visitors while explaining that other establishments (gyms, restaurants, salons, etc.) do not have to abide by many of the same rules. She added, "I have witnessed staff walking campus without masks, with co-workers, going out to grab lunch and who knows what they do after hours. Nevertheless, they are considered safe and they have no restrictions on how they spend their time." - *Cindy Quenneville*
- "As a healthcare provider, I know for a fact that COVID test results take way longer than 48 hours to result, much less get a paper stating that it is negative. What is in place to remedy this to allow visitation and yet meet compliance?" - *Bridget Deprey*
- A member of the public explained that guidelines are necessary for visitors in long term care facilities/homes however, what this task force has recommended is too limiting, arbitrary, and causes more harm than healing. Similarly, other establishments such as the gym, do not follow these requirements. They added, "Seeing family members and loved ones is proven to accelerate healing and well-being. The random criteria and arbitrary nature of these standards only exacerbate the suffering of the clients in these organizations' care, as well as, those who sadly and patiently await reason to prevail so they can visit and enhance the lives of their loved ones." - *Gordon Sims*
- "My mother is a resident of a long term care facility in East Mesa. The facility director told my father they are not reopening to visitors. I don't understand why my father and I cannot be allowed to visit if we get tested and are negative for COVID-19. I believe there will be too much discretion by the facility when it comes to visitation, and I ask that additional clarity be provided regarding visitation." - *Theresa Nuckoles*
- A member of the public explained how her daughter suffered and survived COVID-19 and that she could not imagine what the process would have been like if they were not able to see each other. She added, "If our community is free to go to the gym, the mall, out to eat and get a haircut--including those who work in long-term care facilities--why can't a family member be allowed to comfort those who have been isolated?" - *Cheryl Hurd*
- "Other states are allowing an essential family caregiver in for a few hours a week. Why isn't AZ doing this? Also, why are rapid tests not yet available in AZ?" - *Nora Encinas*
- A member of the public expressed that 15 minutes visiting in a loved one's bedroom is not enough in comparison to how long visitation has been halted. "It is important to take into consideration the impact stress and anxiety has on health- not just for the patient, but for their family as well. It is critical that agencies understand that for patients who lived with their families prior to COVID-19 and experienced an event that has led them to a long-term care facility, the sudden lack of family and emotional/physical connection can be a traumatic experience. We have learned from science that "physiological stress responses can directly influence wound healing processes. Furthermore, psychological stress can indirectly modulate the repair process by promoting the adoption of health-damaging behaviors". Understanding this shows us that poor healing increases the risk for wound infections or complications, lengthens hospital stays, magnifies patient discomfort, and slows return to activities of daily living (Gousin, 2012). Families need quality time to connect and heal together. As a State and as humanity, I know we can do better in providing compassionate care for all." - *Julie Peterson*
- A member of the public expressed how excited she was to be able to visit her mother again, however, the unrealistic guidelines have created a barrier for her to do so. "Physical health is important, but mental health is important as well...At her age, she does not have a lot of time left and I have been robbed of some of that time with her. I am fairly certain that your task force that came up with this unrealistic plan does not have elderly family members in assisted care. I am begging you to please reconsider this unrealistic plan, and make a different plan that is possible for family members to comply with." - *Nadine Baler*
- "Can the guidelines please be clearer regarding the 48-hour negative test? If I get tested, must I visit within 48 hours of that test if it is negative? Or, is it within 48 hours after receiving negative results? Are all testing

locations confirming results within 48 hours? Must we be tested again and again just to visit our loved ones in long term care? Does that mean that workers are also tested every day?" - *Theresa Nuckoles*

- A member of the public explained how they frequently visit a neighbor who resides in a facility in Sun City. They have explained the effects of isolation and how now the facility is no longer permitting the window visits as they used to. Further, they expressed that the task force really needs to come together to create more reasonable guidance, the current is just too strict. "There are no more activities for him to look forward to; no bingo, no entertainment, no cards, no visitors, no therapy pets are even allowed, only tv. Depression for this gentleman would be so detrimental to his remaining time and would surely contribute to an earlier demise." - *Cheri Thomas*
- "I respectfully suggest that one person in the family should be designated as part of the "care team" and be allowed the same restrictions as the health care workers who can come and go and live their lives as they want - as well they should. That designated family member should have to follow all of the rules of the people who have daily contact with the resident and only interact with their loved ones. Common sense tells me this would eliminate all these nearly unobtainable regulations and simplify the whole matter. Thank you for your attention to this terrible situation that can not be allowed to go on." - *Patricia Vincent*
- "I was informed that visits to my mother's facility would begin Tuesday, September 8. I called Sunday, Monday and Tuesday to schedule a visit and was told every time, "I don't have any information about that yet". I just want to know when long term care facilities will open. My mother needs me and my father as much as she needs medical care. Stop killing her. We are no longer free in America. So heartbreaking that the country I love is no longer." - *Ther Nuckoles*
- A member of the public described how he and his wife are in assisted living facilities located in two different buildings. They believe that indoor visiting of different types requires different regulations, based on the fact that some facilities can provide complete, transparent separation of the visitor and resident, with few or no other additional restrictions. He stated that many facilities should look at their settings and be creative with coming up visitation settings and gave many examples of how that could work at the facility that he is at. - *Leon Radziemski*
- A member of the public expressed her frustration with the guidelines put forth by the Task Force. She explained that pre-COVID she wore a mask and distanced herself and now she is unable to even hug her husband. She is considering removing her husband from the home in order to spend the remainder of his life with him. - *Sharon Treasure*
- A member of the public expressed that with these guidelines, it is impossible to visit her mother who resides in a private residential home. She expressed the task results are consistently coming back between 2-5 days and that the rapid testing is not only inaccurate but extremely expensive with long wait times. "If you are going to continue with these guidelines then there has to be the accessibility to free rapid tests and it should be available in assisted living homes." - *Debra Ramsey*
- "The COVID-19 test result requirement would appear to require a rapid results test. The availability of these is limited and unless I choose to lie on the screening I don't qualify. Was this considered when setting up the guidelines? Have you instructed testing facilities in AZ that long term care visitation is a valid approval for a rapid result test?" - *Mike Budzowski*
- A member of the public expressed that after 6 months, they were able to finally visit their mother in an outdoor setting. However, one of the family members went about three feet close to their mom and tossed her a bag of candy. Although masked up and clean, the facility is not requiring a 14-day quarantine of their mother. They feel that this is extreme and would like to better understand if this was the intent. - *Dina De La Ossa*
- A member of the public appreciated the effort the committee has put towards this review but was disappointed with the limited recommendations offered out of the August 25 meeting that includes minimal interaction with the resident and resident's room. They are frustrated that employees do not undergo the same standards as family members. "Facilities are doing a good job of keeping COVID-19 out by screening and following the 3 protocols of masks, hand washing, distancing - both at work and not at work. Please consider treating families the same as employees and other members of the public." Additionally, they added that testing is not coming back within 48 hours. Lastly, they added, "I respectfully feel CMS and DHS are not prioritizing this health issue with the decision to continue to keep people in LTCs isolated. Recognition is being given to the mental health

aspects of other vulnerable populations as a result of this pandemic. That recognition should apply to the LTC population as well” - *Cindy Frazier*

- A member of the public expressed concern about how many hoops that she and her 89-year-old dad have had to jump through in order to visit their mom in a long term care facility. They explained that the COVID-19 tests are not coming back within 48 hours. She added, “I know people have wanted to protect the most vulnerable, but this isolation and lack of clarity on rules is doing more damage to my parents in the long run. We want our freedom back, please open the facilities and let families decide how to visit their loved ones!” - *Anne Belding*
- A member of the public expressed her frustration with the most guidelines when trying to navigate visitation with her 86 year old father. As her father’s Power of Attorney and principal caregiver, she would like more guidance and clarification around “Essential Caregiver”. Additionally, she stated that for \$125 a test, “...received a COVID-19 test through Embry Women’s Health. I was told that I would receive my test results in three days. After three days, I contacted Embry Women’s Health and was told I should receive my test results in five to seven days. After the eighth day, I again contacted Embry Women’s Health and was told I should receive my results in 14 days due to the back up in the lab. I told them then why would I schedule COVID testing if the results are received after the 14-day quarantine as recommended by the state. I then received my negative results after 10 days.” - *Debra Ohlinger*
- Two members of the public stated that even though guidelines are out and visitation is allowed, their loved one’s home/facility is not letting anyone over to visit. They would like to see action taken from DHS or the task force to ensure accountability. - *Lisa Abbott and Amy Schuster*
- “Although it appears this task force is clearing not listening to families and loved ones who are in healthcare facilities. Families are experiencing extreme difficulties to be able to visit their loved ones. The hurdles they must jump through for a 20 minute once a week visit is inappropriate. Staff come and go each and every day, come in the next day and a temperature check is done and they go about their daily duties (where have they been after hours, why don’t they have to test every 48 hours?) Why are you insistent on making families jump through all these hurdles? You allow each facility to make their own rules, why is a task force needed? Stand up, make this easier for families and loved ones to visit. Set guidelines (reasonable) and make ALL healthcare facilities follow, stop passing the buck, allow family members to be part of this task force, they are dealing with this each and every day, they have the insight and can help you decide what is best. As we all know, allowing family members to visit their loved ones, it helps with healing and depression. Put yourself in a patient’s position. Sitting or lying in a bed all day with no family, no human touch, not hearing I love you, feeling family support to heal and get better. Doesn’t sound too good does it? This is your time to ACTUALLY DO SOMETHING for them. Stop punishing the families and patients, stop the extreme amount of hurdles they must jump, stop sitting on your laurels and DO SOMETHING!” - *Lynn McDonald*
- A member of the public explained that both of their parents reside in assisted living homes. “I’ve been prevented from visiting them, and they’ve been prevented from seeing each other for > 6 months. Your guidelines require a negative COVID-19 test that is no more than 48 hours old - a nearly impossible standard to meet, both because testing in AZ almost never meets that timeline and because facilities require appointments for visitations.” - *Nancy Short*
- One visit a day for 15-20 minutes? Must be tested every 48 hours to go visit your loved one? No weekend visits in some cases? Are we trying to get these patients better or more lonely? Let’s please step this up and make it easier to visit our loved ones. - *Gary Quenneville*
- A member of the public expressed their frustration with the current guidelines and how limiting visitation has been. “ When will people be able to visit their loved ones without draconian rules? When will rapid saliva tests be available to all throughout the state, especially for visitors to care facilities? When will the state pass rules to allow a patient in a care facility to have at least one family member designated as an essential care worker assigned specifically to them, especially if that person is the legal guardian?” - *Steve Encinas*
- “I submit for your consideration the MITRE organization’s latest publication INDEPENDENT CORONAVIRUS COMMISSION FOR SAFETY AND QUALITY IN NURSING HOMES FINAL REPORT - [HERE](#) The 186-page report contains 27 principal recommendations and over 100 accompanying action steps organized into 10 themes: Testing and Screening; Equipment and Personal Protective Equipment (PPE); Cohorting; Visitation; Communication; Workforce Ecosystem–Stopgaps for Resident Safety; Workforce Ecosystem–Strategic

Reinforcement; Technical Assistance and Quality Improvement; Facilities; and Nursing Home Data. Thank you for your work on helping to open up assisted living facilities in the valley. Be well.” - *Carol Rehak*

- “ Went to visit my family member who is living in a memory care facility this afternoon. Both my husband and I tested Covid-19 negative prior to the visit. The visit was conducted outside(103degrees) which was fine. They required me to wear 2 masks but would NOT allow my Zshield to be one of them. I do not fare well with the regular face masks and have purchased Zshields to comply. We were outside more than 6 ft apart and my family member was behind a plexiglass partition. I'm voicing my distress at such overkill. I also want Zshields to be considered compliant with face masking!” - *Cathy Daichendt*

## VII. Adjourn

- A. Christina Corieri, Chair**, called for adjournment at 2:31 p.m.
- B. Mr. Dave Voepel, CEO, Arizona Health Care Association**, motioned to adjourn, and **The Honorable Lela Alston, Arizona State Representative**, seconded the motion, and the task force voted unanimously to adjourn.

Dated September 15, 2020  
Task Force on Long Term Care  
Submitted by Tuesday Elias  
Policy Assistant, Office of Governor Doug Ducey