Our Seat at the Table
The Society has been involved more than ever in advocating for the safety of patients, residents, and staff in PALTC settings. In the face of uncertainty, Society members quickly mobilized and looked for opportunities to make their voice heard with policy makers so that they can safely care for the nation’s most vulnerable. As a result, Society members of are now serving in key roles within their state COVID-19 task forces, helping to spearhead the PALTC response to the pandemic. These committed individuals have met weekly under the leadership of Christian Bergman, MD, CMD, a member of a number of Society committees and subcommittees, to share ideas and best practices, which undoubtedly has saved many lives across the country. The group quickly developed a public policy playbook to help others navigate the difficult policy/advocacy landscape in their states. In the face of ranging, changing federal guidance, keeping each other informed and sharing practices has proven vital to the success of facilities across the nation. Nationally, the Society has made sure it has a seat at every table. It has communicated on a weekly basis with the Centers for Medicare & Medicaid Services and the Centers for Disease Control and Prevention. When a new nursing home commission was announced by President Trump, the Society immediately and successfully nominated its own president, David Nace, MD, MPH, CMD, to serve. Several other Society members also have participated in this important process. Many Society members were also key to educating and providing information to the public through the mass media. By appearing in multiple mainstream media outlets, Society members have highlighted the ongoing challenges that surround testing and access to personal protective equipment (PPE) in nursing facilities.

Meaningful Change
Despite all these actions, without any doubt nursing facilities have faced a great challenge as the epicenter of the COVID-19 pandemic. The pandemic placed under a spotlight all that has been known to PALTC professionals but hidden from the public eye: the vulnerability of our population, where any infection can be deadly; the lack of infrastructure to handle a public health emergency and lack of public understanding about our setting; and the policy makers’ insistence on increased oversight and threats of penalties — with no understanding of our challenges or willingness to work together with our facilities. Although it is difficult to label anything a success at a time when we have had to say goodbye to so many of our patients and residents, the Society is aiming to bring forward meaningful change through its advocacy efforts to help clinicians on the ground.

• Lifting restrictions on telehealth. Our ongoing advocacy seeks to make permanent the changes that have been enacted under the COVID-19 public health emergency policies.

• Increasing testing for all nursing facilities. The Society continues to seek clarification and guidance on the use of rapid antigen testing in nursing facilities. The Society also has expressed its concerns over the rates of false positives for both staff and residents.

• Eliminating PPE shortages. The Society has been advocating that PALTC clinicians be on the priority list for PPE. Our limited supply of PPE is not an adequate long-term solution.

• Initiating a medical director registry. The Society has worked with members of Congress on a letter sent to CMS asking the agency to create a database of medical directors across the country. The Society believes this information is vital to any emergency response in nursing facilities. Both policy makers and the public have the right to know about the clinical leadership of the facilities where their loved ones are receiving care.

• Advocating for safe visitation. Social isolation is a real issue for all nursing facility residents, and it impacts behavioral health issues and cognitive impairment. Providing our patients and residents with continued connection with others is vital to ensuring they have a good quality of life.

• Defending our workforce. The Society is strongly opposed to any policy that would exacerbate the already challenged workforce. Thus, the Society is opposing the dangerous proposal by CMS to cut Medicare reimbursement for nursing facility visits by 8% to 10%. The Society also believes more support is necessary to staff who have been working on the front lines, often juggling concerns for their own family and their obligation to the patients and residents for whom they care.

• Calling attention to assisted living. The Society has continued to stress that assisted living is another epicenter for the COVID-19 pandemic. We must pay attention and protect the vulnerable residents in these communities. No one knows where this goes from here, but there is no doubt that the setting and the industry will reshape itself. If we have learned anything, hopefully we have learned that we must lean on the experts on the ground who can help guide the next response.

The energy and the ability of Society members to do their work and continue to advocate for their profession, their patients, and their residents has been incredible. We are thankful for all they have done and continue to do. We all owe a debt of gratitude to everyone who has continued to provide care during this difficult time. Thank you.

Mr. Bardakh is director of public policy and advocacy for the Society.