Task Force on Long Term Care
March 19, 2021, 12:30 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 March 19, 2021, 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 12:03 p.m. with twenty-seven (27) members and two (2) staff members present; Ms. Tuesday Elias and Ms. Alyssa Salvaggio.

II. Roll Call
   A. Ms. Christina Corieri, Chair, welcomed everyone that had joined Zoom and on the public call-in line. We would like to welcome two new members; Senator Nancy Barto and Mr. Mike Meehan from Brookdale Senior Living.
   B. The following members were absent from the meeting: Ms. Rosie Abad, Archie Hendricks Sr. Skilled Nursing Facility, The Honorable Regina Cobb, Arizona State Representative, Ms. Diane Drazenski, family member, The Honorable Tyler Pace, Arizona State Senator, Ms. Tiffany Wilkins, Vice President for Operations, Spectrum Retirement.

III. Approval of Minutes
   A. Ms. Christina Corieri, Chair, requested a motion to approve the February 19, 2021, meeting minutes.
   B. Ms. Dana Kennedy, State Director, AARP Arizona motioned to accept the minutes as drafted. The Honorable Jennifer Longdon, Arizona State Representative, seconded the motion. The minutes were approved.

IV. Update and Discussion on Vaccinations in Long Term Care Homes/Facilities: Mr. Colby Bower, Assistant Director of Policy and Intergovernmental Affairs, Arizona Department of Health Services;
   A. Hello everyone, Colby Bower from the Arizona Department of Health Services.
   B. As of March 17th, we currently have 1506 facilities enrolled in the CDC Partnership. A total of 126,451 vaccines have been administered:
      1. 72,045 are first doses and,
      2. 54,406 are second doses,
      3. 76,386 are residents and,
      4. 50,065 are staff.
   C. Program progress as 1600: 03/16/21
      1. SNF first dose 100%
      2. SNF second dose 100%
      3. SNF third clinic 90%
      4. ALF first dose 100%
      5. ALF second dose 94%
      6. ALF third visit 13%
   D. A total of 2,979 clinics have been completed
   E. All facilities have been scheduled for three visits that are running through mid-April
   F. Federal Government Update: Starting this week, the federal government will provide a direct allocation to long-term care pharmacies participating in the Federal Retail Pharmacy Program through three group purchasing organizations. Overall weekly allocations to the Federal Retail Pharmacy Program continue to increase as more supply becomes available, and the three group purchasing organizations will
receive a small proportion of vaccine through the program to distribute to their member long-term care pharmacies with the goal to assist in maintaining vaccination coverage in select high-risk sites. The weekly allocation to the Federal Retail Pharmacy Program is expected to rise as vaccine supply increases and will help to maintain the safe and effective vaccination of this prioritized population. With new staff onboarding and medically fragile residents being admitted to these facilities each day, as well as individuals who may now wish to be vaccinated, providing steady access to the COVID-19 vaccine is critical. CDC is working closely with partners to understand the demand and capacity of LTC pharmacies in these networks. Jurisdictions will also be able to utilize the allocation made to retail pharmacy partners to supplement their own allocation in support of long-term care facilities.

G. Ms. Kate Brophy McGee, Family Advocate, I am hearing from a number of constituents that they have taken the vaccine and would like to be out and about. However, there are staff and residents declining the vaccine, which is withholding those who have been vaccinated. Therefore, the whole facility stays locked down due to the concern of the unvaccinated individuals.

H. Ms. Christina Corieri, Chair, stated that there are opportunities for indoor visitation, even when there are residents that are unvaccinated. We will get into that when we review the new guidance.

I. The Honorable Jennifer Longdon, Arizona State Representative, I would like to add, I appreciate the work being done by this Task Force and from AZDHS. This is a slight departure, but in terms of vulnerable adults, many were classified as 1C. But now the new guidelines are vaccinating those who are 55 years old and up. I would like to ask, what is the plan to ensure that those who were in 1C get their vaccination, even if they are under 55.

J. Ms. Christina Corieri, Chair, stated that perhaps she and Representative Longdon could set up a separate call to discuss this question. This question went in front of the Vaccine Priority Committee, who voted unanimously on that change. I can share with you those meeting minutes and I can send a DD update to the group that was provided to me by DES.

V. Open Discussion: Update and Review of ADHS Updated Guidance for Visitation at Congregate Settings for Vulnerable Adults and Children

A. LINK TO UPDATED GUIDANCE

B. Ms. Christina Corieri, Colby Bower from the Arizona Department of Health is going to walk through the new updates. This guidance was shared with Task Force members on Wednesday, so they should have had a chance to review and provide feedback. We will discuss the changes and then open the Task Force up to Question, Answer, and Discussion.

C. Mr. Colby Bower, Assistant Director of Policy and Intergovernmental Affairs, Arizona Department of Health Services, Thank you, everyone. We wanted to mirror the CMS guidelines in Arizona’s guidelines. This proved more challenging than initially anticipated, so we appreciate everyone’s patience. The Department of Health Services digested the new guidance and looks forward to hearing from the task force.

D. On the first page, you will see the most recent version of the guidance, which is March 16th. Next page, you will see the benchmark that you need to use to see what phase your county is in. You can also see the benchmarks on the AZDHS website. The next page shows which chart you should be looking at. It is the middle chart.

E. Ms. Christina Corieri, I would like to share that 12 of our 15 counties are in moderate (yellow), 3 counties are in minimal (green).

County - [State] | [Federal]

- Apache County - Minimal | Minimal
- Cochise County - Moderate | Moderate
- Coconino County - Moderate | Minimal
- Gila County - Moderate | Moderate
- Graham County - Moderate | Moderate
- Greenlee County - Moderate | Minimal
- La Paz County - Minimal | Minimal
- Maricopa County - Moderate | Moderate
- Mohave County - Moderate | Moderate


- Navajo County - Moderate | Minimal
- Pima County - Moderate | Moderate
- Pinal County - Moderate | Moderate
- Santa Cruz County - Minimal | Minimal
- Yavapai County - Moderate | Minimal
- Yuma County - Moderate | Moderate

F. Mr. Colby Bower, Assistant Director of Policy and Intergovernmental Affairs, Arizona Department of Health Services, Under the new guidance, when a county goes to substantial, the guidance is very strong and limited. However, there is very little difference between minimal and moderate. Please see page 4 of the guidance to know when visitation is appropriate. Page 5 is a summary of the changes, this will help individuals who are looking at the guidance for the first time. Page 6 should not be new to anyone, it just recaps the recommendations for screening individuals before they enter and home or facility. Please note that a bandana and neck gaiters do not count as facemasks anymore. We receive that question quite often. Outdoor visitations should be allowed in any phase, permitting healthy weather conditions. This information has not changed. Indoor visitations should be allowed at all times, considering a facility or home's visitation hours. Facilities shall enforce all required mitigation measures. Slide 9 addresses compassionate care visitation, this information has stayed the same as previous guidance. Residents, if vaccinated, can have increased close contact with family members. Page 10 addresses privacy, and this is the same as old guidance. Page 11 of the guidance addresses visitation exceptions. This page is to help provide clarity for those who have been exposed to COVID-19. Page 12 addresses the definition of an outbreak and discusses recommendations for home or facility to follow. Page 13 starts with the frequently asked questions. These FAQs were in the previous guidance.

G. The Honorable Nancy Barto, Arizona State Senator, I would like to know more about community visitation. What does that mean? I am assuming that means residents can leave their facility?

H. Mr. Colby Bower, correct, offsite visitation means that they can leave the facility.

I. Ms. Christina Corieri, Senator Barto, you may be asking to clarify what is a community visit? Does that include overnight visits, etc? The Honorable Nancy Barto, Arizona State Senator, exactly. I wrote some comments to you earlier in preparation for this meeting, pushing for that to be a reality. The isolation is having an effect on the elderly who have been vaccinated and are longing to be social and have more contact with their friends and family,

J. Ms. Christina Corieri, The intent of this guidance is to get folks back into the community, but we can put some more meat on the bones regarding your comment. If you have been vaccinated, then you no longer need to quarantine, but we will confirm that this is included in the long-term care setting.

K. Ms. Becky Hill, family member, Has this guidance already been sent to facilities?

L. Ms. Christina Corieri, Yes, we did not want to delay posting the guidance.

M. Ms. Becky Hill, family member, I have another question regarding testing. There seem to be fewer and fewer places for individuals to get tested.

N. Mr. Colby Bower, That is a good question moving forward. To your point, we are going to need to monitor this moving forward. Ms. Becky Hill, family member, Yes, this could be a barrier for some who need frequent testing in order to visit their loved one.

O. Ms. Becky Hill, family member, I know where to go on the website, but I am confused about which metric to look at. On that slide you shared, that shows the metric, could you clarify that better on the guidance? It carries so much importance. My mom’s facility and I disagree on which metric to be looking at. My other question is regarding clarity and consistency. I am concerned about the catch-all phrase on slide 8, “facilities setting their own policies”. Could that include “pursuant to CMS and CDC guidance”? My mom’s facility has made adjustments to their guidance based on their own desire to have a policy be their own certain way. Mr. Colby Bower, I don't disagree with your comment. This was in the old policy as well. Ms. Becky Hill, family member, The old policy was narrower than this. We need to hold communities accountable for sharing these guidelines with friends and family.

P. Ms. Christina Corieri, We will work on clarification to the issues you have raised.
Q. Ms. Becky Hill, family member, Lastly, I want to also echo the comments from Ms. Kate Brophy McGee and Senator Barto. There is confusion on where to look.

R. The Honorable Jennifer Longdon, Arizona State Representative, As I was listening to Ms. Becky Hill, I would also like to discuss how the length of visits is being limited. How tight can a facility make policy? Limiting visits to 15 minutes, an hour? How do we make sure time is not taken away?

S. Mr. Colby Bower, Yes, this is absolutely a concern of ours. CMS does not have guidance on this but we were able to flesh out issues on slide 8. We can refine that a bit and provide clarification on the length of a visit.

T. Mr. Scott McCutcheon, To me, as you read all of the guidelines, the answers are there. If a person is vaccinated, their abilities are greater. We are so happy with these guidelines. Back to some of the protocols, as a company, we need the flexibility to create a policy that makes sense to us. Personally, we will be allowing vaccination when we have enough staff to ensure proper mitigation measures. We cannot let individuals come after hours.

U. Ms. Christina Corieri, Scott, that is helpful thank you. We know that there are times when visitation is considered “after hours”. I don’t think that Ms. Becky Hill or Representative Longdon was getting at. They want to make sure that facilities are not limited to 15 minutes. We can provide clarity to that.

V. Mr. Scott McCutcheon, I get that point, that was one example. There are facilities out there that are far too limiting. Most families have been supportive, but there are families out there that are trying to bend the rules. There is a percent that tries to bend and we need rules to protect against those.

W. The Honorable Jennifer Longdon, Arizona State Representative, I appreciate the work being done in facilities and I agree with Christina's suggestion. Once someone is screened in, they should be able to stay for a reasonable amount of time so they can have a substantive visit with their loved one. Some facilities are being more restrictive than warranted. We need to focus on the emotional and physical wellbeing of the resident.

X. Ms. Dana Kennedy, State Director, AARP Arizona, I had a question regarding the length of the visit on page 15 but we have covered that. Additionally, there is still reference to essential visitors. Are we still limited to 2 essential visitors? Ms. Christina Corieri, we removed the essential visitors, because this new guidance opens indoor visitation to anyone when a facility or individual is vaccinated. As Scott mentioned, an individual could have multiple visitors a day. Ms. Dana Kennedy, however, although some members have been vaccinated, families are still not being let in. There is a concern of retaliation coming from the home or facility. Family members don’t feel safe going to the state. I just want to make sure there is confidentiality when individuals want to submit a complaint or concern with the state.

Y. Mr. Colby Bower, We are required to ask for the individuals’ information, especially call back information. However, Arizona law states that the department does not need to expose who submitted the request. Your information can be kept confidential. Perhaps we could add that in the guidance.

Z. Ms. Heather Friebus, Administrator, Devon Gabels Rehab Center, I have a question regarding Executive Order 20-2022 because there may be a conflict. Ms. Christina Corieri, we have a call scheduled to discuss that next week, if you would like to be added to that call. Just shoot me an email.

AA. Ms. Heather Friebus, Administrator, Devon Gabels Rehab Center, We can take into account Arizona guidelines, but overall, we still need to still look at the CMS percent positivities. I know sometimes that can be challenging if it is different from the state. Ms. Christina Corieri, We can also put that in the guidance. Ms. Heather Friebus, I agree with Scott about the staffing issue and visitation guidelines, we have to set guidelines and parameters.

BB. Ms. Kate Brophy McGee, Family Advocate, I wanted to clarify quarantine requirements for individuals who have been vaccinated. Additionally, how can we get this information out to the facilities? There is a breakdown of communication.

CC. Ms. Christina Corieri, in regard to the communication, whenever there is updated guidance, it is sent to an updated licensed facility. We know that they check DHS’s email because they are their regulator. Mr. Colby Bower, we have shared the guidance with a large association for them to share with their membership.
DD. Ms. Karen Barno, President and CEO, Arizona Assisted Living Federation of America, These guidelines went out Wednesday, we need to expect individuals to take a week or two to draft policies.

EE. The Honorable Nancy Barto, Arizona State Senator, I agree with Representative Longdon, time limits should not be restrictive; whether indoors or offsite. I appreciate the opportunity to share these comments.

FF. Ms. Donna Taylor, Chief Operating Officer, LifeStream Complete Senior Living, I have a question regarding testing and outbreaks. Thank you, DHS for these guidelines. We want our families back and that is a general feeling around. By talking with association leadership, I would be happy to reach out to other facilities to help explain the guidance. Regarding outbreak, on page 12, it talks about when an outbreak occurs. Regarding outbreak testing, some of our members have not been doing testing in that regard because it is not mandated. CMS has, but not assisted living.

GG. Mike Meehan, District Director of Operations, Brookdale Senior Living, on page 15, the guidance references ‘Designated Essential Visitors’, should that come off? Mr. Colby Bower, yes.

HH. Ms. Christina Corieri, Thank you all for your questions and feedback. We will come back with suggested edits, and follow up with another meeting. Thank you and have a great weekend.

VI. Upcoming Meeting Dates
   A. Ms. Christina Corieri, Chair, asked members to send any comments to Ms. Tuesday Elias.
   B. The next meeting will be communicated to the Task Force Members as soon as possible. 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/ltcf/2020/08/11

VII. 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 29, 2020, and if needed, have been redacted and summarized for confidentiality purposes:

   “I appreciate the existence of this task force and in particular the focus of several members on the mental and emotional health of residents in congregate care facilities. My 89-year old mom is in assisted living at _____, and has been barred from leaving the facility since March, except for "necessary" medical appointments. The only reason I am allowed to visit her is that my dad, her husband of 70 years, passed Nov 16 (from Covid19), and I continue under "compassionate care". She’s been fully vaccinated as of Feb 17. _____ says they cannot change any policies loosen the confinement until AZDHS says so. PLEASE out rational guidelines for family visits and for vaccinated residents to be able to leave the facility. The toll this enforced incarceration is taking is terribly high. Much too high.”

   “What if the resident is not vaccinated per doctor recommendation? Can we still visit indoors and or take residents out for an excursion? I'm taking my Mom to her doctor's visits. Can I take her to lunch after her visit? Mom's facility put out guidelines this morning. Requiring testing weekly regardless of vaccination status. They set the length of the visit to 40 minutes. Someone from the staff is at the visit the entire time. If I'm allowed to take Mom to doctors and be with her (both unvaccinated) Why I cannot be involved with her care while in the facility. Mom's facility does not recognize DEV visitation for me to be involved in Mom's care. Her facility is 70% vaccinated. Limited to only two visitors and only once a day and 40 minutes. She is in SNF.”

   “Where would the inside visitation take place? Common areas or in resident rooms?”

   “Comment: I have a 66-year-old handicapped brother that lives in a group home. I have guardianship. I also have a 97-year-old father who lives at home but does not drive and has medical issues, He and his wife have had both vaccines. My son who lives with me and myself will have our second vaccine on March 12th. I would like to bring my brother home for a few days at Easter. I know several of the staff in his group home have chosen not to get the vaccine. I don't understand why he would not be allowed to stay with me for a weekend since the staff does not have a vaccine but we all do. This has been hard for all of the family and my father would like to see his son before he dies.”
• “I am uncomfortable with how a care facility can close the facility to all outside people including hospice nurses. There is no way to see what is going in in the facility. No way to check if abuse is happening by physical signs of bruises, bedsores, etc. Our hospice nurse wears full PPE, is covid tested sometimes more than once a week and she was not allowed in to see my mother. In the summer she was allowed but only outside in the heat wearing full PPE. This is an unacceptable visit for her and my mother. She is not able to see the surroundings or to physically see anything on here that is covered up by clothing. The shower aids were not allowed in either. The staff of the facility does not wear full PPE and they are not covid tested often like this but they are allowed to come in and out.

The new rule made up for families as you have to make an appointment. You can come to the window for a visit. I sat outside when it was 115 degrees. It was so hard to stay half an hour. By golly, I was going to take it all though. There are ten residents and 4 available times per day for a visit. If you do not show up for your visit you are erased on the calendar for future visits already booked. You then can only call one at a time. You know life happens. If someone was not able to make it, you should not get basically kicked off. I was told I had too many days that I was booked so they could not book me anymore. I had to allow other people a chance? Why am I restricted at all? I should be able to visit once a day and so should the other 9 residents’ families. The appointments are only for 1/2 hour. We do have to work around breakfast, lunch, dinner. If I have an appointment then no one else in my family can make one on the same day. Why are they allowed to just make up stuff?

Please get some guidelines in place. They have been able to rule themselves for too long now. There is no communication whatsoever from the homeowner or staff. When I call and ask questions, the answers are different to the same question from different employees. This makes me very uneasy. I am unable to go to the place to see or observe anything. The only communication I received is from the Hospice nurse. She could tell me what she learned from a FaceTime medical visit. At least she is allowed in now.

There are cameras in there. It would be nice to be able to see your loved one. We were told no. I do understand the privacy of other residents on this one. I would love to see that they do need to communicate with the family-like once a week. This should be part of their license. It should not be ok to do business with someone’s actual life and not have to share with the family. Even a week is too long for me, but it would have to be something that is doable for both parties. My mom has not seen a dentist in a year now. She would have to quarantine for 14 days afterward if I did take her. She could not understand why she could not leave her room.

The facility was not required to do anything to help us see our loved ones. This Covid will always be with us now, as the flu is. New ways to see our loved ones must be made available. FaceTime would be one option. More than one phone in the facility should be required. If a resident is speaking with a loved one, there is no way to get through, especially if ten families are trying to get through each day.

If the residents have been immunized and many others are now, please let us see and touch our loved ones once again. Now is perfect to take them for a walk. I can wear a mask and she is vaccinated, we are outside, so why should I be stopped from being with her? We should be allowed in also. Of course with precautions. Soon I will be vaccinated also. Please open them up, but most importantly make some new rules. Thank you for allowing me to submit my comments. I honestly appreciate it. Thank you for being on the commission to help us also.”

• “I’ve read the minutes from the last meeting. I had been listening in prior to breakouts and will be going forward. I have submitted my thoughts and I will share them here. Here is my concern. Not every family member or even staff member wants to be vaccinated. Do people still have the option of a personal decision to receive or not to receive the vaccine? People have personal reasons not to receive the vaccine based on their medical issues or perhaps religious reasons. If a family member does not want to be vaccinated, does that preclude them from visiting their family in the LTC facility? If so, why even though most residents and staff have been vaccinated? Testing weekly to visit should also be an option. Just being able to visit and not have the ability to not only be affectionate with their family or participate in their care is not healthy. Personally, I am heavily involved in my family members’ care. My family member has a multitude of medical issues and I want the ability to oversee it like I once did and have the ability to get information from the staff which has been very difficult over the past year. Communication has been greatly decreased. I have to make life and death decisions for my Loved Ones. I need to have information and be hands-on. I am the MPOA. Does being in that position carry any weight? I have tested weekly for six months. No problem continuing to do so. I want to take my Loved One to her doctor appointments not just merely follow the transport. When will I be allowed to do so? No one is in my vehicle except me. It’s only a year old. I am with my Loved One at the appointment. She cannot be alone and I need to discuss her issues with her doctors. I want to spend the time I need with
my loved one in her room at the facility and do for her what she needs and take care of her. I don't want my
time or movement in her room limited. My Loved One would prefer me to help her. I am concerned about what
I witnessed over the last year regarding her care. I'm tired of feeling helpless to be there for her and attend to
her needs. I know we all have opinions about this. I'm sharing my feelings. I've lost a year of her life and
according to her doctors, may only have a year left. She feels like a prisoner and wants to be able to go
outside. She just wants to be with me like we were. If I could care for her in my home as I did for four years
prior, I would. I'm doing the best I can. Please also consider that the mental wellbeing isn't just the residents.
It's also the family members such as myself who have suffered a terrific loss and put in a place of grieving the
loss. Please consider my thoughts. Thank you!"

- **The Beauty of Rose** - By Stew Cohen

  Sitting in the courtyard,
The sun, aglow.

  Rose was quite the card,
  From a few years ago.

  Her family took turns hugging
  And mending her heart.
  This was by far the best drug
  Pure love for a sweetheart.

  2019 at Rose's nursing home
  Was as normal as could be.
  Visits were in monochrome
  But nothing is guaranteed.

  2020 was just ahead.
  Now the family looks through a window
  Trying to avoid COVID's spread.
  No more games, no more bingo.

  Through a window, she looks
  Absent on her face, a glow.
  Nothing like this ever, no guidebook.
  Today, Rose sees no rainbows.

  Cause COVID has robbed us of humanity
  Of love, of closeness, of a hug.
  The kisses she got were not fantasy
  We remember the love, but now we see her shrug.

  Thought the tender moments would last
  Into Rose’s final years.
  But COVID’s forecast
  Leaves us all in tears.

  We've done our best
  In the heat and in the cold.
  Standing or sitting, never at rest
  Rules are rules, we’re told.

  Can't shake the feeling
  That's deep inside.
  We're been reeling
  In a place where love should reside.

  Beyond the window's protection
  Sits Rose moving her fingertips.
  Lessons learned without infection
  Watching the movement of her lips.
Just a window away
Visits her daughter, Diane, every day.
A window away
Please help us pray.

For bringing humanity back
to a world that's lost its way.

- “Given the CDC’s recent announcement regarding activities that may be resumed with minimal risk for individuals who have been fully Covid-vaccinated, it seems an urgent priority for the Long-Term Task Force to publish updates to the October 2020 guidelines for various types of long-term care facilities. My mother in Assisted Living in Friendship Village, and residents I’ve spoken with there, are desperate to see family and friends and have ALREADY suffered mental and emotional degradation as a result of the enforced isolation still being imposed on them. Administrators for assisted living there refuse to change any policies unless the AZ Long Term Task Force issues updated guidelines, citing the October 2020 guidelines as still being in force. For the health and well-being of thousands of Arizona seniors in assisted living, you must provide guidance appropriate to March 2021.”

- “Dear Gov Ducey and LTC task force. It's time to get the task force back together to update the guidelines. My mother's LTC facility residents are fully vaccinated and the management seems to have their hands tied on what step to make next? Please hurry. It's been over a year since I've seen my mother. The LTC facility won't move until you do. Thank you for your expeditious consideration.”

- “I've just read through the updated CMS LTC visitation guidelines. So, they are realizing that residents need their families and want to have a patient-centered care approach, however, you can't touch them when you visit and stay six feet away. New guidelines are now being discussed of three feet distance. Anyway, recognizing that families need to touch (it's desperately needed) and this is what is come up with? When will the "DEV" be recognized for our families' care? What will it take for CMS to agree to this? All guidance must be equal and in the agreement or this will never be fair or equal to all families.”

- “Hello. My name is ___ and I am a resident of ______. I have an auto-immune disease that has and is affecting my mobility. Other than this disability, I am an intelligent, curious, and sociable 67 years old. Many of the friends that I live with share these qualities. Now, after painting a picture of residents of Avamere, we would like to visit the treasures in the valley without facing a cruel, isolating 14-day room quarantine. Over 90% of the residents have been fully vaccinated for Covid 19. I am included in this 90% and have been for almost a month. The justification for the quarantine policy is that not all residents have been vaccinated. Logically then all residents would have to be vaccinated so that I and my friends may live a full life. Does that make sense? Unless vaccinations are made mandatory in assisted living I could never live a full life. These circumstances lead me to some suggestions for your consideration. First staff at ____ are free to go to lunch, visit relatives, and other activities they enjoy. What a blatant inconsistency. I would gladly take a weekly Covid test just as the staff does in order to avoid 14 days of isolation. Alternatively, those residents who choose not to be vaccinated could be asked to sign a waiver acknowledging the risks they are taking. Next, ____ is a state-contracted _____ facility. In that regard, I would like the state to review these contracts to ensure that residents' mental health is given the highest priority in view of the room isolation policy. As an aside, I fully support and adhere to all safety protocols. And no, I don't want to go to a crowded restaurant. I want to visit the Desert Botanical Garden, the Heard Museum, and the Japanese Friendship Garden all of which continue to have safety protocols in place. Thank you for your consideration.”

- Comments from a constituent/member of the public:
  - Our facility director has 2 employees that refuse to get the vaccine and 2 residents that may not get a vaccine. The director said that because of this, she will not allow ANY inside visitation until/unless she gets a guarantee in writing from the state and CDC that the vaccine will prevent a vaccinated person from transmitting the virus.
  - I said I wanted to be appointed as one of my mother's "essential caregivers," as described in guidelines from the state...allowing me to visit inside...she again said no. ("Even though you are
vaccinated, you could still transmit the virus to one of my 2 unvaccinated employees, possibly killing them. I have to protect my employees.

- When I pointed out that she was allowing those few who refuse vaccines...to make vaccinated residents and family members continue suffering...she again stated that she must protect those 2 employees.

- She eventually stated that she would allow my mother to leave on outings with us, beginning March 24 (2 weeks after the March 10 2nd vaccine was given.)

- She claimed ignorance of the recent CDC guidelines, the ones that said it reasonable for facilities to allow in-person visiting after being fully vaccinated...stating that she is "too busy to read that shit."

- She admitted many employees have quit, that she is understaffed, and that the nurse stopped coming to work over a month ago. She said that she tried to get another one, but couldn't...and hasn't had time to continue looking.

- I think it is obvious that the director simply wants to keep visitors/family from seeing living quarters. The concern is obviously NOT one of transmission, proven by her eventual willingness to allow vaccinated residents to leave the facility for outings...and then return.

- I have compassion/understanding for the difficult job she has...the stress of being understaffed (and told her so.) But it is important to my brother and me to see our mother's living quarters, to be able to assess her level of care. This is especially important because our mother has Alzheimer's.

VIII. Adjourn

A. Christina Corrieri, Chair, called for adjournment at 1:17 p.m.
B. The Honorable Lela Alston, Arizona State Senator, motioned to adjourn, and Ms. Dana Kennedy, State Director, AARP Arizona, seconded the motion, and the task force voted unanimously to adjourn.

Dated March 19, 2021
Task Force on Long Term Care
Submitted by Tuesday Elias
Policy Assistant, Office of Governor Doug Ducey