

**Selected Reports Received by Nursing Home Chains, March – June 2020<sup>1</sup>**

Date	State	Company	Full Text
6/18/2020	GA	Sava	The caller stated due to COVID-19, residents were given surgical masks and were instructed to wear the masks when they leave their rooms. The caller stated most of the employees (names/position titles withheld) do not wear masks, while walking throughout the facility. The caller stated he/she was told it is optional for employees to wear masks. The caller stated he/she would like to ensure corporate is aware the employees do not wear masks to protect themselves and residents from exposure to COVID-19.
6/10/2020	GA	Sava	The caller stated June 9, 2020, he/she was told the facility only scheduled one nurse to care for 35 residents per shift in the rehabilitation unit since the COVID-19 pandemic began (exact date unknown). The caller stated he/she was concerned residents are not receiving the care they need. The caller stated he/she is not aware of any injury or harm to the residents. The caller requested to be informed what the proper nurse to resident ratio is.
6/9/2020	CA	Sava	[Redacted] stated since May 2020 (exact date unknown), she has not been able to speak with anyone at the facility about her mother, [Redacted], resident (room [Redacted]). [Redacted] stated during the beginning stages of the COVID-19 crisis (dates unknown), the facility informed loved ones about new positive COVID-19 cases. [Redacted] stated as of late, the facility has not provided any updates about new COVID-19 cases. [Redacted] stated she was made aware there are still several residents (names unknown) who have COVID-19. [Redacted] stated she has continuously tried to speak with a staff member, but has not been able to report any of her concerns. [Redacted] stated she spoke with the receptionist, but the receptionist transferred her to staff members who were unavailable and/or abruptly disconnected the line. [Redacted] stated she has concerns with the level of care [Redacted] is being provided. [Redacted] stated [Redacted] is 95 years old with diabetes and asthma. [Redacted] stated [Redacted] has a history of not being provided her medication on time. [Redacted] stated [Redacted] has experienced continuous delays receiving bathroom assistance and changing herself. [Redacted] stated [Redacted] has had to assist herself in the bathroom, although she is unable to care for herself properly. [Redacted] stated [Redacted] has an infection in her private area due to experiences delays in changing. [Redacted] believes [Redacted] has not been provided satisfactory care because the facility is severely

<sup>1</sup> This chart contains a selection of reports made by nursing home residents, staff, their friends and family members, and other stakeholders to hotlines and other reporting programs set up by the below-referenced companies to facilitate the reporting of complaints, concerns, questions, or issues. The full text of each report has been reproduced in full, as produced to the Select Subcommittee on the Coronavirus Crisis, with the exception of the application of redactions of personally identifiable information. The reports may reflect the viewpoint of the reporting party and have not been independently investigated or substantiated by the Select Subcommittee. Statements in reports may be disputed by the receiving company.

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			understaffed. [Redacted] stated there are approximately 15 to 16 patients per nurse. [Redacted] stated she has tried to speak with [Redacted] (last name unknown), nurse manager, but she always says she is busy. [Redacted] believes the facility should have a staff member available to speak with loved ones at all times. [Redacted] requested to be contacted as soon as possible.
5/22/2020	CO	Sava	[Redacted] stated for the past couple of weeks (exact date unknown), his mother (name/position title withheld) has been working on the COVID-19 unit. [Redacted] on May 22, 2020, his mother tested positive for COVID-19. [Redacted] stated since his mother began working on the COVID-19 unit (exact date unknown), [Redacted] (last name unknown), DON, and [Redacted] (last name unknown), administrator, have informed the staff members they can continue to work even if they test positive for COVID-19. [Redacted] stated his mother informed him HR (name/position title unknown) is refusing to give her sick time and she has to use her PTO to cover her quarantine. [Redacted] stated his mother has enough PTO time to cover her time in quarantine, which she should not have to use.
5/8/2020	TX	Sava	nursing staff have repeatedly asked for appropriate PPE from management including unit manager and DON. Nursing staff have to sign out isolation gowns prior to use, not enough is left for over the weekend they are under lock and key, we have patients in isolation that require nursing staff to use the appropriate PPE for safety and sometimes none is available. nursing staff was told that we can not be over using PPE so therefore Unit Manager has made makeshift isolation gowns out of plastic paper bags, they are stabled and taped together, when there is enough proper PPE locked in office. Company has provided cloth mask for resident use and when asked if we can get one for a resident, it is denied or the run around is given. if N95 mask tears or surgical mask is torn there isnt any left especially over the weekend for staff to use. nursing staff is working with isolation patients and proper protocols are not being followed to ensure nursing staff and other employees safety and well being including resident safety. residents are being denied cloth mask when asking for them. handkerchiefs are being given to the residents for use, however they do not fit all the patients adequately and appropriately especially on patients who are confused, the handkerchiefs are being tied to there necks therefore raising safety concerns. nursing staff was told that PPE was reserved for emergency use only, so we have to use make shift gowns that do not protect the resident nor staff especially over the weekend. i ask that this concern be properly over looked. Housekeeping/dietary personal when entering isolation rooms do not get PPE to use, Management states that they only have to wear face shield and cloth mask when entering droplet precaution rooms. they are entering potential infectious environment with out following the proper infection control protocols this should raise a big concern for employees and resident safety.

Date	State	Company	Full Text
5/6/2020	CT	Sava	The caller stated employees were told they would have to exhaust their available PTO before the company pays for a leave of absence due to contracting COVID-19. The caller believes it is unfair for employees to have to use their PTO after contracting COVID-19 while working in the facility. The caller questioned if employees were given correct company policy information, and requested to be provided with the correct information as soon as possible.
5/2/2020	GA	Sava	The caller stated staff members (names withheld) do not have adequate protective equipment when servicing patients (names withheld) who tested positive for COVID-19. The caller stated the lack of adequate equipment has been ongoing, infrequently. The caller believes his/her personal safety is being jeopardized. The caller stated protective equipment is being reused and recycled. The caller stated approximately two weeks ago (exact date unknown), he/she had to wear the same protective mask for six days in a row. The caller stated there are staff members (names withheld), who are currently not working due to testing positive for COVID-19. The caller stated staff members are not receiving ‘hazardous pay.’ The caller stated the facility should monitor the use of equipment to ensure that staff members have what they need to perform their job duties in a safe manner.
5/1/2020	MD	Sava	During an unscheduled follow-up call, resolution information had not yet been received. The following information was provided regarding the originally reported concern. [Redacted] stated during the week of April 19, 2020, (exact date unknown), the confirmed COVID-19 cases at the facility increased to 56. [Redacted] stated as of May 1, there is still a staffing issue at the facility, which she believes needs to be addressed as soon as possible. [Redacted] stated [Redacted], CNA, had her job threatened by [Redacted] (last name unknown), DON (details unknown). [Redacted] stated [Redacted] told [Redacted] she would be terminated if she did not come to work. [Redacted] stated [Redacted] was tested for COVID-19, and her doctor advised her to remain quarantined. [Redacted] stated [Redacted] was aware [Redacted] was having symptoms of COVID-19, but she is unaware if she ([Redacted]) tested positive for the virus. [Redacted] stated [Redacted], CNA, was present when [Redacted] threatened [Redacted] with termination, and she is unaware of the last shift she ([Redacted]) worked. [Redacted] stated during the week of April 26 (exact date unknown), she contacted the Health Department and the Governor’s office and filed a complaint about the ongoing staffing issues.

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4/24/2020	SC	Sava	<p>The caller stated the facility previously (exact date unknown), had several residents (names withheld) diagnosed with the coronavirus. The caller stated when [Redacted], administrator, was asked about the confirmed cases of the coronavirus at the facility, he denied that anyone had been diagnosed with the coronavirus. The caller stated [Redacted] has promised to give all employees at the facility a raise, but he has only given raises to the nurses (names withheld) and not the CNAs (names withheld). The caller stated he/she has been working at the facility for [Redacted] years and he/she has never received a raise. The caller stated agency workers (names withheld) are being paid more than the facility workers. The caller stated last week (exact date unknown), the state of South Carolina said that all healthcare providers would be paid hazard pay. The caller stated when employees (names/position titles withheld) asked [Redacted] about receiving the hazard pay, he informed them that it would not be paid out. The caller stated other healthcare facilities in South Carolina are receiving the hazard pay. The caller stated if all employees are not treated fairly, then a walkout will be staged. The caller also stated all of the residents pay too much money for them not to be provided with good food. The caller also stated a few weeks ago (exact date unknown), the facility was out of toilet tissue for weeks and had to borrow from local churches.</p>
4/23/2020	MD	Sava	<p>[Redacted] stated he works in the kitchen which is close to the unit that is treating COVID-19 patients. [Redacted] believes employees should receive hazard pay for the potential harm they and their families may face. [Redacted] stated he voiced his concerns to [Redacted], supervisor, but he is not aware if any action has been taken.</p>
4/23/2020	PA	Sava	<p>[Redacted] stated since April 20, 2020, she has been out of the office because she tested positive for COVID-19. [Redacted] stated on April 23, she called the payroll department, and was told she cannot receive the government 14-day pay for COVID-19, until she has used all of her PTO hours. [Redacted] stated she is supposed to receive a major surgery later this year (exact date unknown), so she has been saving her PTO for the surgery.</p>
4/23/2020	GA	Sava	<p>[Redacted] stated the facility has confirmed COVID-19 cases, and he/she believes CNAs should be receiving hazard pay. [Redacted] stated CNAs do not have adequate protective equipment to prevent a viral infection, and should be rewarded for putting their lives at risk by maintaining close contact with COVID-19 positive residents.</p>

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4/22/2020		Sava	<p>[Redacted] stated on April 20, 2020, [Redacted] (last name unknown), cook, was screened for COVID-19 upon entrance and his temperature read 102 degrees. [Redacted] stated [Redacted]’s temperature was supposed to be taken again with a different thermometer for accuracy, but it was not. [Redacted] stated [Redacted] was sent home. [Redacted] stated he asked [Redacted], infectious disease nurse, via text message, about [Redacted]’s temperature not being taken again, but she did not respond. [Redacted] stated later, [Redacted], cook, had a temperature of 101 degrees upon entrance, but the nurse (name unknown) who performed the screening, instructed her to put a wet rag on her head before her temperature was taken again. [Redacted] stated [Redacted]’s second temperature read 92 degrees and her first temperature was not recorded. [Redacted] stated [Redacted] was allowed to work. [Redacted] stated he reported the issue to [Redacted], administrator, but she told him to take it up with [Redacted]. [Redacted] stated he did not take it up with [Redacted], because she did not respond to him about [Redacted]. [Redacted] stated on April 21, [Redacted] was off of work, but on April 22, [Redacted] is scheduled to work from 12:30 pm until 8:30 pm.</p>
4/15/2020	CO	Sava	<p>[Redacted] stated [Redacted] (last name unknown), DON, is pressuring employees (names/position titles unknown) to work even if they feel bad and have concerns they may be sick with COVID-19. [Redacted] stated [Redacted] told employees that ‘running a fever’ was not a reason to call out of work. [Redacted] stated [Redacted] told employees not to share with their coworkers if they test positive for COVID-19. [Redacted] stated [Redacted] is placing employees and residents at risk of contracting COVID-19. [Redacted] stated one employee (name/position title withheld) had a sore throat, headache, and fever, but [Redacted] told her (employees) to come to work. [Redacted] stated [Redacted] (last name/position title unknown), demanded information from his/her mother (name withheld), nurse, about her COVID-19 test and pressured her (mother) to come to work. [Redacted] stated one nurse (name unknown) and her husband (name unknown), who is a physician, both tested positive for COVID-19. [Redacted] stated the nurse was sent home from work after she tested positive for COVID-19. [Redacted] stated currently there are no residents who tested positive for COVID-19.</p>
4/15/2020	GA	Sava	<p>[Redacted] stated on April 14, 2020, the second shift, on the east wing, was short staffed. [Redacted] stated there was only one nurse and one CNA present for approximately 39 skilled nursing patients. [Redacted] stated it is ‘criminal’ for there to be so few staff members present. [Redacted] stated she tried to call the facility, to alert someone of the problem on April 14, but she was left on hold for 20 minutes before terminating the line.</p>

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4/14/2020	GA	Sava	<p>[Redacted] stated on April 13, 2020, she was called by [Redacted] (last name unknown), DON, and was told she was being terminated since she had not been to work since March 23, due to the COVID-19 pandemic. [Redacted] stated [Redacted] said the corporate office told her she would have to terminate her ([Redacted]). [Redacted] stated [Redacted] said her separation notice would be in the mail. [Redacted] stated she asked to come get her separation notice in person. [Redacted] believes this termination is unfair because on April 12, [Redacted] reached out to her and asked her what hours she would be able to work. [Redacted] stated she she was originally sent home on March 23 by [Redacted] because she had bad allergies. [Redacted] stated [Redacted] was the one who sent her home for a 14-day quarantine period. [Redacted] stated when she found out in March (exact date unknown), that her children’s schools were released for the rest of the year, she told [Redacted] she would not be able to work until April 28. [Redacted] stated [Redacted] approved this extension and told her she would be taken off of the schedule in the meantime. [Redacted] stated she is in possession of screenshots of text messages between her and [Redacted].</p>
4/7/2020		Sava	<p>The caller stated on April 6, 2020, he/she became aware that employees are only given one protective face mask to wear for a week. The caller believes it is not safe for employees to wear contaminated face masks for seven days. The caller stated corporate should be able to provide a backup supply of materials for the employees during the COVID-19 pandemic.</p>
4/7/2020	NV	Sava	<p>The caller stated he/she has heard from residents (names unknown) that the CNAs (names unknown) are not answering call lights in a timely manner. The caller stated he/she has heard the facility is short-staffed and on April 7, 2020, one nurse (name unknown) had to cover two floors. The caller stated he/she was told several days ago (date unknown) someone (name unknown) had to wait four hours to get water provided to them. The caller stated he/she was told the resident had to get water him/herself even though he/she was ill. The caller stated two or three days ago, a friend (name withheld) vomited on herself, and as of present, she has been left in the same clothing and has not been showered. The caller stated he/she was told [Redacted] and [Redacted](last name unknown), nurses, continue to be stern and severe with the residents. The caller stated some nurses (names unknown) are not coming in and the nurses who are working are getting agitated and have an ‘attitude.’ The caller stated the rehabilitation, activities, and food staff are fine, and it is only the clinical staff he/she has been hearing complaints about. The caller stated he/she has not reported his/her concern locally because he/she does not think he/she will be taken seriously.</p>

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3/26/2020	CO	Sava	The caller stated he/she is a nurse. The caller stated since October 2019 (exact date unknown), the facility has been inadequately staffed. The caller stated every weekend, the ratio has been 38 residents to one nurse. The caller stated on March 21, and on March 22, while working third shift, he/she assisted 38 residents. The caller stated on March 22, he/she reported the issue to [Redacted], DON, and she said, 'Deal with the issue because it is going to be like that for a while.' The caller stated when he/she checked the schedule, he/she noticed on March 28, he/she has to assist 38 residents alone. The caller requested more CNAs be scheduled to assist residents.
3/25/2020	CO	Sava	New Staffer has been here in boulder manor for over a month now, he continues to under staff the building. Either because he does not know how or because he just don't care. Staffer [Redacted] has said we cannot over staff the building, we are always short staffed and its very hard and also unfair to the people we take care of. As a employee here that is always working short I am asking you to please look into this concern. I understand the building needs to save money, but I feel we are being over worked and taken advantage of so administration can save money and look good to corporate. Does corporate know how the building is being ran? Do they know that staff considers SAVA to be a company that dont care about there employees. I have went to managment several times about this concern along with many co-workers. And get treated like we are just a bother, Like its not a big deal and they are to busy to address or even acknowledge our concern. I don't think they will be to busy if they all have to work the floor due to no staff in building because this concern not getting addressed. Please help look into the people we can not, Adminatration and Management and why they are making these decisions
3/30/2020	CA	Ensign	The facility did not provide one mask per day to employees.
4/3/2020	CA	Ensign	Since the beginning of March 2020, the caller and other staff member have been exposed to patients who are positive for covid-19. However, the facility does not provide the staff with PPE supplies for them to prevent getting infected. Moreover, the caller has addressed the situation about receiving a hazard pay during the covid-19 pandemic without a response
4/20/2020	AZ	Ensign	Direct care staff in the therapy department do not routinely have their temperature taken as is required per COVID-19 policies.
4/24/2020	TX	Ensign	Allegation that employees are reusing their PPE equipment and this is dangerous and employees cannot use reuse from another employee

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4/24/2020	TX	Ensign	Employee alleged wrongful termination after refusing to come to work due to COVID-19.
5/2020	TX	Ensign	Since April [Redacted], 2020, the caller and other employees have not been getting enough PPE to protect themselves from COVID-19. The caller states they were told to share PPE with other employees. Sharing the PPE creates the possibility of COVID-19 spread at the facility. Since April [Redacted], new patients that have COVID-19 have been transferred to the facility, which makes it even more dangerous for the employees to contract the virus.
5/6/2020	CA	Ensign	DSD has been allowing the employees to go to work, even though some of them are displaying symptoms of COVID-19. There are three patients and one employee who tested positive for COVID-19. There is no equipment to screen people or to take their temperatures.
5/6/2020	CA	Ensign	LVN tested positive for the Coronavirus; she was sent home and took a three-day quarantine. On 5/5/20, the LVN returned to work, without any safety countermeasure.
5/7/2020	SC	Ensign	The caller states that the facility allows the employees who tested positive to come back to work as usual.
5/12/2020	SC	Ensign	The caller has tested positive for COVID-19 from working and being told that he/she will not be paid for days missed due to quarantining Caller also alleged staffing concerns given COVID.
5/22/2020	WA	Ensign	Former employee concern that they were terminated while on leave for being positive for COVID-19.
5/29/2020	TX	Ensign	Nurse not receiving hazard pay and works with COVID-19 resident.
6/22/2020	CA	Ensign	A patient who was exposed to COVID-19 moved next to dialysis patients. Later, the dialysis patient diagnosed with COVID-19. There is no infection preventionist. Concerns with PPE.
6/26/2020	CA	Ensign	The facility failed to provider proper PPE/safety equipment or hand sanitizer despite having two positive COVID-19 cases.
6/26/2020	AZ	Ensign	Staffing coordinator has been making CNAs and nurses work despite reporting COVID symptoms, and refusing to let people call off when they report symptoms.
6/30/2020	TX	Ensign	Caller tested positive for Coronavirus and manager told them they were not able to go on paid medical leave.

Date	State	Company	Full Text
3/17/2020	VA	Consulate	The caller stated an employee was sent home because of his/her temperature level, but the executive director instructed the employee to take Tylenol and come back to work.
5/18/2020	NY	Consulate	The caller stated an HR representative questioned all the CNAs to find out who reported her regarding the staff's need for PPE. The caller stated quarantined CNAs were paid using their own PTO, but should have been paid their hourly wages. The caller stated the HR representative is unprofessional.
4/9/2020	NC	Consulate	The caller believes employees should receive raises or bonuses for working through the COVID-19 pandemic.
4/19/2020	NC	Consulate	The caller believes employees should receive raises or bonuses for working through the COVID-19 pandemic.
5/4/2020	MS	Consulate	The caller stated a CNA tested positive for COVID-19, and the proper precautions were not taken after this was discovered, including employees being paid hazard pay.
5/14/2020	MS	Consulate	The caller requested to know why she cannot be paid for the time she is out of work to be tested for COVID-19.
5/6/2020	MS	Consulate	The caller stated he/she was concerned a CNA, who tested positive for COVID-19, was allowed to continue working due to staffing issues. The caller believes a resident contracted COVID-19 from the infected CNA, who was allowed to continue working.
5/18/2020	MS	Consulate	The caller requested to be paid more for working the COVID-19 hall alone. The caller also requested more staff members be scheduled to work the COVID-19 hall.
5/13/2020	MS	Consulate	The caller stated the facility is short-staffed, and a process is creating a pattern of exposure to COVID-19.