



**Long-Term Care Facility Access Policy Workgroup Kick-Off Meeting  
February 8, 2023**

(AUTOMATED ZOOM TRANSCRIPT)

0:04

HELLO AND WELCOME EVERYONE TO THE KICKOFF MEETING FOR THE CALIFORNIA LONG-TERM CARE FACILITY ACCESS POLICY

0:12

WORK GROUP MY NAME IS MEGAN AND I'M HERE TODAY WITH THE CALIFORNIA DEPARTMENT OF AGING I'LL BE HELPING TO KICK OFF THIS

0:19

MEETING TODAY THROUGHOUT THE MEETING THE CDA TEAM AND I WILL BE IN THE BACKGROUND ANSWERING

0:24

ANY QUESTIONS ZOOM AND OTHERWISE THAT YOU MIGHT HAVE IF YOU EXPERIENCE ANY

0:29

DIFFICULTIES PLEASE JUST TYPE YOUR QUESTION INTO THE Q A BOX WHICH IS LOCATED AT THE BOTTOM OF YOUR SCREEN AND

0:36

THE CHAT PANEL IS ALSO AVAILABLE IN THAT SAME SPACE FOR YOU TO PROVIDE COMMENTS AND FEEDBACK AND WE'LL BE PROVIDING

0:43

ADDITIONAL INFORMATION ON THAT SHORTLY DURING TODAY'S LIVE EVENT YOU'LL SEE

0:48

THAT WE HAVE LIVED CLOSED CAPTIONING THAT'S AVAILABLE YOU CAN ALSO CLICK THAT FROM THE TOOLBAR AT THE BOTTOM OF YOUR

0:54

SCREEN AND WE ALSO HAVE AMERICAN SIGN LANGUAGE INTERPRETATION AS YOU CAN SEE ALONGSIDE

1:02

EACH SPEAKER TODAY WILL BE TOGGLED BACK AND FORTH BETWEEN TWO INDIVIDUALS WHO ARE HELPING US WITH THAT

1:08

SO, ON THE NEXT SLIDE WE'RE GOING TO GO INTO A LITTLE BIT MORE OF THE PURPOSE OF

1:14

THE LONG-TERM CARE FACILITY ACCESS POLICY WORK GROUP SO BEFORE REVIEWING

1:19

THE LOGISTICS JUST REMINDING EVERYONE OF WHY WE'RE HERE WHAT WE'RE KICKING OFF

1:24

WITH TODAY SO WE'RE COMMITTED TO UM

1:30

ENSURING IT'S OPEN TRANSPARENT AND ACCESSIBLE PROCESS AND ALL WORK GROUP

1:35

MEETINGS WILL BE HELD PUBLICLY AND ARE SUBJECT TO THE BAGLEY KEEN MEETING ACT

1:41

ALL MEETINGS AND DELIBERATIONS OF THIS WORK GROUP WILL BE MADE AVAILABLE TO THE PUBLIC

1:48

SO, I'M READING SOME OF THIS OUT LOUD BUT YOU CAN ALSO SEE IT ON THE SLIDE AND IN

1:54

THE NEXT SLIDE WE'LL GET INTO A LITTLE BIT MORE ABOUT THE POLICY WORK GROUP MEMBERS

2:02

SO, LOOKING AT THIS SLIDE THE BUDGET ACT OF 2022 IDENTIFIED THE FALLEN GROUPS AS

2:07

PARTICIPANTS FOR THIS WORK GROUP THE CALIFORNIA DEPARTMENT OF AGING THE OFFICE OF THE STATE LONG-TERM CARE

2:14

OMBUDSMAN THE STATE DEPARTMENT OF PUBLIC HEALTH THE STATE DEPARTMENT OF SOCIAL SERVICES AND STAKEHOLDERS REPRESENTING

2:22

PUBLIC HEALTH OFFICIALS LONG-TERM CARE FACILITY OPERATORS AND RESIDENTS AND

2:27

CONSUMER ADVOCATES SO CDA IN PARTNERSHIP WITH THE CALIFORNIA HEALTH AND HUMAN SERVICES AND

2:34

LEGISLATIVE PARTNERS IDENTIFIED AND INVITED OVER 30 ORGANIZATIONS TO REPRESENT THESE STAKEHOLDER GROUPS AND

2:40

AGENCIES AND THERE'S A LITTLE REFERENCE THERE AT THE BOTTOM OF THE SLIDE  
2:46

AND SO IN REGARD TO PUBLIC PARTICIPATION ON THE NEXT SLIDE HERE

2:52

WE'VE LISTED OFF ALL THE PLANNED MEETING DATES INCLUDING STARTING WITH  
TODAY WHICH WILL GO FROM 2 TO 3 30 PM THESE

2:59

MEETINGS ARE OPEN TO THE PUBLIC AND MEMBERS OF THE PUBLIC WILL HAVE AN  
OPPORTUNITY TO PROVIDE COMMENTS AT EVERY

3:05

MEETING ALL OF THE MEETING INFORMATION AGENDAS AND MATERIALS FROM  
PAST MEETINGS WILL BE

3:11

AVAILABLE ON THE FOLLOWING WEB PAGE WHICH IS LISTED THERE SO IT'S AT THE  
AGING.CA.GOV WEBSITE AND THE LONG-TERM

3:18

CARE FACILITY ACCESS POLICY WORK GROUP PAGE I WILL BE POSTING THESE LINKS  
INTO THE CHAT

3:24

AS WE GO ALONG SO THAT YOU CAN FIND THAT INFORMATION EASILY

3:29

SO, IN TERMS OF PARTICIPATING IN TODAY'S SECTION FOR WORK GROUP MEMBERS  
YOU CAN RAISE

3:36

YOUR HAND ON YOUR ZOOM SCREEN IN THE REACTIONS FEATURE OF ZOOM WHICH  
CAN BE FOUND AT THE BOTTOM OF YOUR SCREEN AND

3:42

AT MULTIPLE POINTS THROUGHOUT THE MEETING, WE'LL TAKE COMMENTS OR  
QUESTIONS FROM THE WORK GROUP MEMBERS IN THE LINE

3:48

AND MEMBERS CAN UNMUTE THEMSELVES AND THEN FOR WRITTEN COMMENTS  
YOU CAN ALSO SUBMIT THOSE COMMENTS AND QUESTIONS

3:54

THROUGH THE MEETING USING THE ZOOM CHAT WHICH IS ALSO LOCATED AT THE  
BOTTOM OF YOUR SCREEN AND WORK GROUP MEMBERS SHOULD TRY TO

4:01

REMEMBER TO SEND THEIR COMMENTS TO EVERYONE AND THEN ALL THOSE  
COMMENTS WILL BE RECORDED AND REVIEWED BY THE CDA

4:07

STAFF FOR MEMBERS OF THE PUBLIC THERE WILL BE

4:14

DESIGNATED TIMES WHERE WE'LL TAKE PUBLIC COMMENTS AS INDICATED IN THE  
MEETING AGENDA THAT WAS POSTED LAST WEEK AND SO

4:22

THE LOGISTICS FOR THOSE ARE WORK GROUP MEMBERS MAY RAISE THEIR HAND IN THE REACTIONS FEATURE OF ZOOM TO ENTER THE

4:28

LINE TO MAKE A VERBAL COMMENT OR ASK A QUESTION IF YOU'RE JOINING MY PHONE

4:33

PRESS THE STAR 9 ON YOUR DIAL PAD TO JOIN THE LINE AND THEN WHEN YOU'RE CALLED ON FOR A COMMENT I'LL JUST

4:40

ANNOUNCE YOUR NAME OR THE LAST FOUR DIGITS OF YOUR PHONE NUMBER WHICHEVER SHOWS UP ON YOUR ACCOUNT I'LL UNMUTE

4:46

YOUR LINE AND THEN YOU'LL ALSO HAVE TO UNMUTE AGAIN TO BE ABLE TO SPEAK YOUR COMMENT AND WE JUST ASK THAT

4:53

EVERYONE STICK TO TWO MINUTES SO THAT WE CAN BE SURE TO GET TO EVERYBODY WHO MIGHT BE WAITING IN LINE

5:03

SO, FOR MEMBERS OF THE PUBLIC AS WELL YOU CAN SUBMIT COMMENTS AND QUESTIONS THROUGH THE MEETING ZOOM MEETING FORMAT

5:10

USING THE Q, A AND WE'LL BE RECORDING AND REVIEWING ALL OF THOSE AS WELL AND YEAH WORK GROUP MEMBERS AND MEMBERS

5:18

OF THE PUBLIC CAN PROVIDE WRITTEN COMMENTS FOR THIS WORK BETWEEN MEETINGS SO CDA WILL PROVIDE DETAILS ON HOW TO

5:24

PROVIDE THOSE COMMENTS A LITTLE BIT LATER ON IN THIS MEETING SO THERE'S LOTS OF WAYS FOR YOU TO BE INVOLVED AND SHARE

5:31

QUESTIONS AND COMMENTS AND SO JUST SOME GENERAL COMMENTS ABOUT

5:36

PARTICIPATING TODAY WE WILL TAKE COMMENTS FROM WORK GROUP MEMBERS AND MEMBERS OF THE PUBLIC AT DESIGNATED

5:42

TIMES THROUGHOUT THE MEETING SO WHEN THAT TIME COMES, PLEASE JUST RAISE YOUR HAND IF YOU'D LIKE TO SPEAK AND JUST

5:47

WAIT TO BE CALLED ON BEFORE TAKING YOURSELF OFF MUTE AND THEN PLEASE TRY TO KEEP ALL COMMENTS RESPECTFUL AND BRIEF

5:54

NO MORE THAN TWO MINUTES UH PER COMMENT

5:59

AND SO JUST GOING THROUGH A LITTLE BIT OF THE ROLLOUT FOR TODAY'S  
AGENDA

6:05

SO, STARTING NOW INTRODUCTION AND WORK GROUP MEMBER ROLL CALL WE'RE  
GOING TO GET INTO A WELCOME DOING A WORK GROUP

6:12

OVERVIEW AND A WORK GROUP PROCESSES TAKING QUESTIONS AND COMMENTS  
FROM THE

6:17

WORK GROUP MEMBERS AS WELL AS ENGAGING WITH PUBLIC COMMENT AND THEN  
NEXT STEPS AND CLOSING REMARKS

6:29

THE LONG-TERM CARE FACILITY ACCESS POLICY WORK GROUP WILL HOLD ITS  
VERSUS THE KICKOFF MEETING SO THE NEXT FIRST

6:36

MEETING WILL BE ON MARCH THE 14TH AND THESE ARE JUST SOME OF THE  
ORGANIZATIONS WHO HAVE BEEN IDENTIFIED FOR THIS WORK

6:43

GROUP AND I THINK THERE'S SEVERAL SLIDES AND SEVERAL REPRESENTATIVES  
FROM EACH OF THESE ORGANIZATIONS WHO ARE HERE TODAY

6:58

AND THEN WE ARE PRIVILEGED TO BE JOINED TODAY BY

7:04

CDA'S DIRECTOR SUSAN DAMARIS WHO WILL BE SHARING WELCOME REMARKS FOR  
THE LONG-TERM CARE

7:10

FACILITY ACCESS POLICY WORK GROUP AND WE'LL BE THEN COVERING ALL THE  
KEY DETAILS ABOUT THE CHARGE AND SCOPE OF

7:16

THE WORK GROUP IN THE WORK GROUP OVERVIEW SECTION IN THE WORK GROUP  
PROCESS SECTION WE

7:22

WILL EXPLAIN HOW EACH OF THE FOUR WORK GROUP MEETINGS WILL RUN  
BEGINNING IN MARCH AND WE'LL HAVE AMPLE TIME FOR

7:28

COMMENTS AND QUESTIONS FROM THE WORK GROUP MEMBERS AND MEMBERS OF  
THE PUBLIC

7:34

SO JUST BEFORE I HAND IT OVER TO DIRECTOR DAMORIS WE JUST WANT TO REVIEW  
OUR WORK GROUP MEMBERS WE'VE KIND OF

7:41

POSTED THE LIST OF THE FULL ORGANIZATIONS WHO ARE MEMBERS THEY'VE BEEN  
PART OF CD'S OUTREACH AND INVITED

7:47

TO JOIN THIS WORK GROUP UM SO BECAUSE EVERYONE'S HERE TODAY AND FOR THE VERSION OF THE ROLL CALL

7:53

WE'D LIKE EVERYBODY WHO'S HERE FROM THESE WORK GROUPS AND AS MEMBERS TO INTRODUCE THEMSELVES IN THE CHAT AND

8:00

WE'LL BE USING THIS FOR A ROLL CALL SO JUST PLEASE PROVIDE YOUR NAME YOUR TITLE AND THE ORGANIZATION THAT

8:06

YOU'RE REPRESENTING TODAY AND WE'LL JUST WAIT A FEW MOMENTS TO GIVE EVERYBODY A CHANCE TO DO THAT AS

8:13

THEIR SIGNING THEMSELVES OVER I WANT TO THANK YOU AGAIN EVERYONE FOR

8:18

BEING HERE FOR TAKING THE TIME TO BE PART OF THIS

8:25

AND PERHAPS WE'LL CONTINUE TO DO THIS PROMPT THROUGHOUT THE MEETING TO ENCOURAGE ANYONE WHO MAY HAVE COME A FEW

8:30

MINUTES LATE TO BE SURE TO INTRODUCE THEMSELVES INTO THE CHAT AND TO THANK

8:35

EVERYONE AGAIN

8:41

GREAT THANK YOU SO MUCH EVERYONE AND AS WE'RE ALL DOING THAT JUST FINISHING UP INTRODUCING OURSELVES IN THE CHAT, I'M

8:47

GOING TO PASS IT OVER TO CDA DIRECTOR SUSAN DEMARIS TO GET EVERYTHING STARTED

8:52

FOR TODAY THANK YOU MEGAN VERY MUCH FOR OPENING UP

8:58

THE MEETING AND WELCOME TO THE OFFICIAL MEETING OF THE LONG-TERM CARE FACILITY

9:03

ACCESS WORK GROUP AND TODAY'S KICKOFF I WANT TO OPEN THIS WORK GROUP TODAY BY

9:09

THANKING YOU ALL FOR BEING HERE TO ADDRESS THE ESSENTIAL ISSUE OF ACCESS AND VISITATION IN LONG-TERM CARE

9:16

FACILITIES DURING A DECLARED STATE OF EMERGENCY MANY ON THIS CALL KNOW THAT

9:22

PUBLIC HEALTH EMERGENCY WILL BE ENDING IN CALIFORNIA NEXT WEEK AND  
LATER IN

9:28

THE SPRING THE FEDERAL EMERGENCY WILL BE CONCLUDING SO OUR TIMING IS  
EXCELLENT

9:34

THIS AUDIENCE KNOWS ALL TOO WELL THAT LONG-TERM CARE FACILITIES  
NATIONWIDE AND ACROSS CALIFORNIA

9:40

IMPLEMENTED ROBUST SOCIAL DISTANCING MEASURES TO ENSURE THAT ALL  
RESIDENTS

9:46

WHO HAVE FACED A UNIQUE AND ELEVATED RISK THROUGHOUT THE COVID-19  
PANDEMIC STAY SAFE

9:53

HOWEVER WE'RE HERE TODAY BECAUSE THESE MEASURES RESULTED IN MANY  
RESIDENTS EXPERIENCING LONG

10:01

PERIODS WITHOUT VISITATION THEY WERE NOT ABLE TO SEE THEIR LOVED ONES  
FOR MONTHS

10:06

AT A TIME EVEN IN PERIODS OF DISTRESS IN SOME CASES THEY WERE NOT ABLE TO

10:12

ACCESS CERTAIN TYPES OF OUTSIDE SERVICES SUCH AS HEALTH CARE OR SOCIAL  
SERVICES

10:19

AND PROVIDERS OUTSIDE OF THE FACILITY WHETHER PAID OR VOLUNTEER SUCH AS  
FAITH

10:25

LEADERS WHO DID NOT WORK AT THE FACILITY AND WERE NOT ABLE TO COME ON  
SITE TO DELIVER SUPPORT

10:31

OVER THE COMING MONTHS THIS WORK GROUP WILL EXAMINE THE DETRIMENTAL  
IMPACT THAT RESTRICTED ACCESS HAD ON RESIDENTS OF

10:38

LICENSED FACILITIES AS WELL AS LOOK CLOSELY AT THE IMPACTS ON FRIENDS  
FAMILIES AND CHOSEN FAMILIES WHO COULD

10:46

NOT VISIT BY THE END OF THE FOUR MEETINGS THIS GROUP WILL IDENTIFY  
ACTIONABLE POLICIES

10:52

AND BEST PRACTICES RELATED TO FACILITY ACCESS FOR FUTURE STATES OF  
EMERGENCY

10:59

THE RECOMMENDATIONS OF THIS WORK GROUP WILL BE MADE TO THE STATE  
LEGISLATURE FOR THEIR CONSIDERATION IN POLICY MAKING

11:07

THE CALIFORNIA DEPARTMENT OF AGING IS HONORED TO BE TASKED WITH  
CHAIRING THIS WORK GROUP AND FACILITATING THE

11:13

DEVELOPMENT OF ITS RECOMMENDATIONS WE ARE COMMITTED TO AN OPEN

11:20

COLLABORATIVE AND INCLUSIVE PROCESS MOREOVER WE'RE COMMITTED TO  
ELICITING

11:25

AND CONSIDERING DIVERSE PERSPECTIVES EXPERIENCES AND IDEAS ON HOW TO  
ADDRESS

11:32

THIS QUESTION FROM ALL OF YOU AS WORK GROUP MEMBERS AND AS YOU HEARD  
AT THE

11:37

OPENING FROM MEMBERS OF THE PUBLIC AS WELL I WANT TO EXTEND A SPECIAL  
THANK YOU IN

11:42

ADVANCE TO ALL OF YOU FOR PARTICIPATING IN A RESPECTFUL AND INFORMATIVE  
DIALOGUE

11:48

ON THIS ISSUE OVER THE COMING MONTHS, WE'VE ASSEMBLED A WIDE RANGE OF  
ORGANIZATIONS AND STAKEHOLDERS AS YOU

11:55

SAW ON THE SLIDE TO PROVIDE INPUT AND GUIDE THE DEVELOPMENT OF  
RECOMMENDATIONS ON THIS ISSUE

12:02

THANK YOU ALL FOR AGREEING TO BE HERE AND FOR JOINING TODAY TO DO THIS

12:07

IMPORTANT WORK TOGETHER I WANT TO ESPECIALLY THANK THE RESIDENTS AND  
LOVED ONES

12:13

OF SKILLED NURSING FACILITIES RESIDENTIAL CARE FACILITIES FOR THE ELDERLY

12:18

INTERMEDIATE CARE FACILITIES AND ADULT RESIDENTIAL FACILITIES WHO HAVE  
KINDLY

12:24

AGREED TO JOIN THIS WORK GROUP WELCOME TO YOU ESPECIALLY

12:29

YOUR LIVED EXPERIENCE AND PERSPECTIVE ON THIS ISSUE IS ESSENTIAL IN  
ESTABLISHING

12:34



A SHARED UNDERSTANDING OF THE IMPACTS OF RESTRICTED ACCESS AND IN DEVELOPING

12:40

ACTIONABLE PRINCIPLES AND POLICIES FOR CALIFORNIA'S FUTURE WE APPRECIATE YOUR WILLINGNESS TO SHARE

12:47

YOUR STORY WITH US TODAY AND OVER THE NEXT SEVERAL MONTHS AND FOR TAKING THE

12:52

TIME TO BE HERE FINALLY I WANT TO THANK ALL THE MEMBERS OF THE PUBLIC FOR JOINING THIS MEETING

12:58

AS I NOTED ALREADY THE DEPARTMENT OF AGING IS COMMITTED TO A PUBLIC AND TRANSPARENT PROCESS FOR DEVELOPING THESE

13:05

RECOMMENDATIONS AND WE WELCOME THE PARTICIPATION OF ALL WHO ARE INTERESTED

13:10

IN THIS WORK THROUGHOUT AND BETWEEN OUR MEETINGS WE WILL PROVIDE OPPORTUNITIES FOR ALL

13:16

MEMBERS OF THE PUBLIC TO PARTICIPATE IN THIS WORK AND SO WITH THAT I WOULD LIKE TO

13:22

INTRODUCE TO YOU MY COLLEAGUES MARK BECKLEY CHIEF DEPUTY DIRECTOR AT THE

13:27

CALIFORNIA DEPARTMENT OF AGING AND BRANDI DUVALL AN ATTORNEY LEVEL THREE AT

13:32

THE DEPARTMENT MARK AND BRANDY WILL BE LEADING US THROUGH THE DEVELOPMENT OF THESE RECOMMENDATIONS OVER THE COMING

13:38

MONTHS I'M INCREDIBLY GRATEFUL TO MARK BRANDY AND THE ENTIRE CDA TEAM FOR

13:44

ACTING WITH URGENCY SO THAT WE COULD ALL BE HERE TODAY TO START THIS IMPORTANT

13:49

WORK AND NOW I TURN IT OVER TO MARK THANK YOU GREAT THANK YOU SO MUCH SUSAN AND GOOD

13:57

AFTERNOON TO EVERYBODY UM I WANT TO THANK YOU FOR ATTENDING TODAY'S WORK GROUP SESSION AND IT'S JUST

14:02

SO GREAT TO SEE THE LARGE TURNOUT THAT WE HAVE UH FOR TODAY'S SESSION

14:07

UM I'D LIKE TO START BY ELABORATING A LITTLE ON UH SUSAN'S COMMENTS ABOUT THE IMPETUS OF THIS WAR GROUP

14:14

UM SO AS WE KNOW OVER THE COURSE OF THE PANDEMIC RESIDENTS AND WORKERS IN LONG-TERM CARE FACILITIES FACE A UNIQUE

14:21

RISK FOR COVID-19 OUTBREAKS AND DISPROPORTIONATELY HIGHER MORTALITY RATES

14:26

ACCORDING TO 2020 CMS NURSING HOME VISITATION GUIDANCE THE VULNERABLE NATURE OF NURSING OF THE NURSING HOME

14:33

POPULATION COMBINED WITH THE INHERENT RISKS OF CONGREGATE LIVING IN A HEALTH CARE SETTING HAVE REQUIRED AGGRESSIVE

14:40

EFFORTS TO LIMIT COVID-19 EXPOSURE AND TO PREVENT THE SPREAD OF COVID-19 WITHIN

14:45

NURSING HOMES RESTRICTING VISITATION DURING PERIODS OF HIGH COVID-19 TRANSMISSION

14:52

WERE AMONG THE SOCIAL DISTANCING MEASURES THAT WERE TAKEN TO PREVENT OUTBREAKS AND MORTALITY AMONG RESIDENTS

14:59

AND PATIENTS OF LONG-TERM CARE FACILITIES NEXT SLIDE TODAY HEALTHCARE LEADERS' RESEARCHERS AND

15:07

OTHER EXPERTS HAVE ACKNOWLEDGED THAT RESTRICTED VISITATION POLICIES THROUGH THE COVID-19 PUBLIC HEALTH EMERGENCY MAY

15:15

HAVE IMPACTED THE PHYSICAL AND MENTAL HEALTH OF RESIDENTS AND THEIR LOVED ONES

15:20

IN 2020 CMS REVISED NURSING HOME VISITATION GUIDANCE NOTING THAT THEY

15:25

RECOGNIZE THAT PHYSICAL SEPARATION FROM FAMILY AND OTHER LOVED ONES HAS TAKEN A

15:31

PHYSICAL AND EMOTIONAL TOLL ON RESIDENTS AND THEIR LOVED ONES

RESIDENTS MAY FEEL

15:36

SOCIALLY ISOLATED LEADING TO INCREASED RISK OF DEPRESSION ANXIETY AND  
EXPRESSIONS OF DISTRESS RESIDENTS LIVING

15:43

WITH COGNITIVE IMPAIRMENT AND OTHER DISABILITIES MAY FIND VISITOR  
RESTRICTIONS AND OTHER ONGOING CHANGES

15:50

RELATED TO GOVERNMENT 19 CONFUSING AND UPSETTING NEXT SLIDE

15:55

AND SO, IN THIS WORK GROUP WE'RE BRINGING TOGETHER DIVERSE PERSPECTIVES  
AMONG ALL OF YOU FROM ACROSS THE STATE AND TRYING

16:02

TO BUILD ON THE LEARNINGS FROM THE COVID-19 PUBLIC HEALTH EMERGENCY  
THIS WORK GROUP WILL DEVELOP RECOMMENDATIONS

16:09

FOR ACCESS AND VISITATION POLICIES FOR FUTURE STATES OF EMERGENCY

16:15

OKAY SO LET'S START OFF THINKING ABOUT SCOPE CONSIDERATIONS SO IN  
DEVELOPING

16:21

THESE RECOMMENDATIONS THE WORK GROUP IS GOING TO CONSIDER VARIOUS  
TYPES OF

16:28

UM UH VISITORS' MODALITIES OF VISITATION PURPOSE OF VISITATION THE TYPES  
OF

16:36

LONG-TERM CARE FACILITIES THAT THIS WORK GROUP WILL DISCUSS AS WELL AS  
THE TYPES OF EMERGENCIES THAT SHOULD ALSO BE

16:42

CONSIDERED BY THIS WORKER OVER THE COMING SLIDES WE'RE GOING TO TAKE A  
LOOK AT SOME OF THESE OPTIONS TO

16:48

CONSIDER FOR EACH OF THESE PIECES OUR TEAM AS WELL AS OUR CONTRACTED

16:54

PARTNER ON THIS PROJECT AND AT HEALTH HAVE LOOKED AT EXISTING  
OPERATIONAL PRACTICES REGULATIONS LAWS AND RESEARCH

17:01

TO IDENTIFY PRELIMINARY LIST FOR EACH OF THE ELEMENTS OF OUR WORK GROUP  
SCOPE

17:08

BUT PLEASE CONSIDER THESE LISTS AS A STARTING POINT WE'RE REALLY LOOKING  
TO

17:13

ALL OF YOU AS EXPERTS AND PEOPLE WITH LIVED EXPERIENCE TO PROVIDE US  
WITH

17:18

FEEDBACK ON THE UM SCOPE AND IF WE'RE MISSING ANY KEY ISSUES UH DURING THE

17:27

COMMENT SECTIONS WE WILL BE INVITING YOU TO ENTER YOUR THOUGHTS ABOUT THE SCOPE

17:32

WITHIN THE VIRTUAL CHAT OKAY NEXT SLIDE SO LET'S START WITH VISITORS AND

17:40

MODALITIES THE LONG-TERM CARE FACILITY ACCESS WORK GROUP MAY CONSIDER A RANGE OF VISITOR

17:47

TYPES AND VISITATION MODALITIES AND ITS RECOMMENDATIONS THE TYPES OF VISITORS THAT WE HAVE

17:53

IDENTIFIED TODAY INCLUDE FRIENDS FAMILY AND CHOSEN FAMILY

17:58

HEALTH CARE WORKERS NOT EMPLOYED BY A FACILITY SOCIAL SERVICES AND OTHER

18:04

SERVICE PROVIDERS SPIRITUAL CARE PROVIDERS AND OMBUDSMAN SURVEYORS

18:09

REGULATORS AUDITORS AND OTHER SIMILAR TYPES OF OUTSIDE PROVIDERS

18:14

IN TERMS OF MODALITIES, WE'VE IDENTIFIED INDOOR VISITS OUTDOOR VISITS WINDOW

18:20

VISITS AS WELL AS REMOTE VISITS WITH THESE PRELIMINARY OPTIONS OF

18:26

CATEGORIES OF VISITORS AND MODALITIES WE'D NOW LIKE TO PAUSE AND GET YOUR INPUT ARE THERE ANY KEY VISIT VISITOR

18:34

TYPES OR TYPES MODALITIES OF VISITS THAT WE MAY HAVE MISSED

18:40

UM JULIET MULLEN SENIOR CONSULTANT FROM MINETTE HEALTH IS GOING TO READ SOME

18:47

COMMENTS YOU HAVE IN IN THE CHAT FUNCTION SO IF YOU'D LIKE TO INPUT YOUR THOUGHTS AND IDEAS INTO THE CHAT AS YOU

18:53

WOULD PUT YOUR THOUGHTS AND IDEAS UH JULIET WILL START READING SOME OF THEM SO THAT WE CAN HEAR AS A GROUP WHAT THE

19:00

THOUGHTS ARE SO I'M GOING TO PAUSE FOR A SECOND TO ALLOW YOU TO INPUT YOUR CHAT

19:08

HERE UM AROUND THIS

19:14

UM THERE'S ONE NOTE AROUND WHERE MENTAL HEALTH AND SUBSTANCE USE DISORDER

19:19

PROVIDERS MIGHT FIT IN AS WE THINK ABOUT THE SCOPE OF THE TYPES OF VISITORS IN THIS WORK GROUP

19:32

I'M NOT SEEING OTHER NOTES HERE WE GO WE HAVE ANOTHER ONE HERE

19:37

UM A NOTE AROUND UH DIFFERENT TYPES OF PROFESSIONALS UM THAT MAY NEED TO COME ON SITE OF A

19:44

LONG-TERM CARE FACILITY FOR EXAMPLE A PROFESSIONAL WHO'S PROVIDING FINANCIAL PLANNING ASSISTANCE

19:55

ADDITIONAL THOUGHTS FROM THE GROUP ON WHERE TO LOOK HERE GREAT SO WE'VE GOT A

20:03

NOTE AROUND AS WE THINK ABOUT THE MODALITY OF VISITATIONS GETTING EVEN MORE GRANULAR THAN INDOOR VISITS BUT

20:09

ALSO THINKING ABOUT WHERE INSIDE SO WE HAVE A NOTE FROM A WORK GROUP MEMBER ABOUT VISITS THAT ARE LIMITED TO

20:15

INDIVIDUAL PRIVATE ROOMS VERSUS IN LARGER AREAS UM OR MORE PUBLIC AREAS AND ALSO A NOTE

20:22

TO CONSIDER UM TESTING REQUIREMENTS AROUND VISITORS TO

20:28

MINIMIZE EXPOSURES AS WELL GREAT UM WE HAVE ANOTHER COMMENT AROUND UH

20:35

POTENTIALLY ACTUALLY LOOKING AT FRIENDS FAMILY AND CHOSEN FAMILY AS DISTINCT

20:40

CATEGORIES UM NOTING THAT FAMILY THAT VISITS

20:46

INTERMITTENTLY AND ESSENTIAL CARE WORKERS WHO VISIT MORE ROUTINELY AND PROVIDE CARE MIGHT BE CONSIDERED DIFFERENTLY

20:52

UM AND THEN JUST A HIGHLIGHT AND A DOUBLE CLICK ON FAMILY CAREGIVERS UM WHO ARE COLLABORATORS IN CARE AND

20:58

SUPPORT FOR RESIDENTS OF LONG-TERM CARE FACILITIES UH AND NOTING THAT A GENERAL VISITOR

21:05

CATEGORY ISN'T SUFFICIENT FOR CHOSEN SUPPORT PEOPLE

21:10

ALSO, A MENTION AROUND CONSERVATORS OH THEY'RE COMING IN QUICK NOW ALSO EVENTS IN AROUND CONSERVATORS

21:17

PEACE I'M SEEING SOME NOTES AROUND UM ACTUALLY UH CREATING SPECIFIC AREAS

21:24

TO SUPPORT VISITATION UM IN A WAY THAT IS SAFE

21:29

A COUPLE NOTES AROUND ESSENTIAL CAREGIVER A COUPLE ADDITIONAL WE'RE SEEING SOME

21:36

DOUBLE CLICKS ON HAVING DESIGNATED VISITATION SPACE LOTS OF GREAT FEEDBACK IN THE CHAT HERE

21:43

I KNOW WE'RE PROBABLY UH COMING AT AROUND TIME FOR THIS PIECE MARK SO I'LL

21:48

HAND IT BACK TO YOU BUT WE ARE CONTINUING TO KEEP AN EYE ON WHAT'S IN THE CHAT AND WE'LL JOT ALL OF THIS DOWN THAT'S GREAT YES THANK YOU SO MUCH FOR

21:55

ALL OF YOUR COMMENTS AND UM RANDY WILL COVER THIS IN THE NEXT SECTION WHERE WE TALK ABOUT PROCESS EVEN AFTER THIS

22:02

MEETING YOU'LL HAVE AN OPPORTUNITY TO UM SUBMIT UM COMMENTS ABOUT YOU KNOW ANY SKILL CONSIDERATIONS YOU MAY HAVE

22:08

THOUGHT OF AFTER THIS MEETING CONCLUDES SO WE'RE GOING TO MOVE INTO THE NEXT SECTION

22:14

UM SO UH LET'S SEE NEXT SLIDE THANK YOU SO MUCH AND THIS IS ABOUT VISITATION

22:19

PURPOSE SO THIS WORK GROUP'S ALSO GOING TO THINK ABOUT THE TYPES OF VISITATIONS

22:26

OR VISITATION PURPOSES THAT THE WORK GROUP MIGHT WANT TO LOOK AT WE'VE CONDUCTED SOME RESEARCH LIKE I SAY WE'VE

22:33

BEEN LOOKING AT POLICY PROCEDURES FROM WITHIN THE STATE YOU KNOW AT OTHER

22:38

STATES TO COMPILE THIS LIST AND THIS IS WHAT WE'VE COME UP WITH SO FAR SO

22:44

COMPASSIONATE CARE AND THIS GENERALLY REFERS TO VISITS FOR INDIVIDUALS WHOSE

22:49

HEALTH IS DECLINED HAVE EXPERIENCED A SIGNIFICANT CHANGE IN CIRCUMSTANCES OR HAVE AN ACUTE NEED FOR SUPPORT

22:56

THE NEXT CATEGORY IS VISITS FOR PERSONS WITH DISABILITIES SO THIS REFERS TO

23:02

VISITS FROM A CAREGIVER TO SUPPORT THE PHYSICAL MENTAL EMOTIONAL AND OVERALL

23:07

WELL-BEING OF PERSONS WITH DISABILITIES THE NEXT CATEGORY OF SOCIAL VISITS SO

23:13

VISITS TO SUPPORT THE MENTAL AND EMOTIONAL WELL-BEING OF A

23:19

LONG-TERM CARE FACILITY RESIDENT HEALTH CARE OR SOCIAL SERVICES VISITS AND THIS REFERS TO

23:26

UM OBVIOUSLY YOU KNOW HEALTH CARE SOCIAL OR CARE COORDINATION FOR RESIDENTS

23:31

VISITS FOR SPIRITUAL CARE SO ANY RELIGIOUS OR SPIRITUAL SUPPORT RESIDENT

23:37

MAY NEED AND THEN FINALLY VISIT SUPERVISED SERVICES SO THIS COULD BE HARBOR VISITS

23:44

BEAUTY VISITS OF THAT NATURE SO MORE SERVICE ORIENTED

23:49

UM AND AGAIN WHAT I'D LIKE TO DO IS OPEN UP YOUR THOUGHTS AND COMMENTS USING THE CHAT AND AGAIN JULIET WILL READ SOME OF

23:58

YOUR RESPONSES SO THAT WE CAN GET SOME IDEAS OR THOUGHTS AROUND THE TYPES OF VISITS THAT THIS WORK GROUP SHOULD

24:04

CONSIDER SO I'LL GO AHEAD AND PAUSE HERE AS YOU TAKE TIME TO WRITE SOME COMMENTS

24:10

OH, GREAT AND WE'RE GETTING

24:18

UM ON THIS ALREADY UM I SEE A NOTE UH SPECIFICALLY AROUND

24:24

PERSONS WITH DISABILITY COMPASSIONATE CARE AND SOCIAL VISITS SHOULD ALLOW VISITATION FOR MOST OF US FRIENDS FAMILY

24:30

AND LOVED ONES SO KIND OF DOUBLE CLICKING WHAT I'M HEARING ON A FEW OF THESE AND HIGHLIGHTING THAT THESE ARE

24:37

ESPECIALLY IMPORTANT UH FOR A CERTAIN CATEGORY OF VISITORS GREAT

24:46

UH MARK AND UH JULIET THIS IS BLANC I JUST WANTED TO

24:51

UM JUMP IN REALLY QUICKLY I THINK THERE'S A YOU KNOW JUST A QUESTION FROM ONE OF THE UH PARTICIPANTS ABOUT WHO'S

24:59

DEFINING THESE CATEGORIES AND I JUST WANT TO RE I WANT TO EMPHASIZE THE 25:04

PURPOSE OF THIS WORK GROUP IS TO COME YOU KNOW WITH RECOMMENDATIONS AND THAT WILL INCLUDE

25:10

UH DEFINING CATEGORIES AND SO I DON'T THINK UM THAT THERE IS A UH

25:17

THE ADMINISTRATORS OR NURSING FACILITY PROVIDERS ARE NOT DEFINING THESE CATEGORIES THAT'S PART OF WHAT WE'RE

25:24

GOING TO BE DISCUSSING IS WHAT WHICH DIFFERENT UH AS MARK AND SUSAN SAID

25:30

WHAT ARE THE UH INDIVIDUALS OR WHAT ARE THE VISITORS AND PEOPLE THAT ARE

25:35

COMING IN HOW DO WE UM DEFINE THEM WHAT'S THE MODALITY WHAT'S THE WAY IN DOING IT SO

25:42

UM THAT'S PART OF WHAT WE'RE ALL DISCUSSING AND SO THERE HASN'T BEEN ANY UM FORMALIZED DEFINITION OF ANY OF THIS

25:49

SO, I WANTED TO ADDRESS TERESA PALMER'S COMMENT YES

25:56



UM THANK YOU FOR HIGHLIGHTING THAT UM ABSOLUTELY THAT'S THE REASON WHY WE'RE SEEKING UH WORK GROUP FEEDBACK AND

26:02

PUBLIC FEEDBACK UH TO REALLY HELP DEFINE THE SKIP OF THIS WORK GROUP NONE OF THIS HAS BEEN FIRMLY DEFINED YET

26:10

UM SO I APPRECIATE YOUR UM HIGHLIGHTING THAT BLOG ACT YEAH SO KEEP YOUR KEEP YOUR COMMENTS COMING

26:19

GREAT THANK YOU FOR THAT ADDITION AND THAT CLARIFICATION

26:25

CONTINUING TO SEE SOME COMMENTS AROUND TYPES OF VISITATIONS THAT THIS WORK GROUP

26:31

SHOULD LOOK AT UM AND WE'RE SEEING IT I SEE A

26:37

NOTE JUST UM POINTING OUT THAT IDENTIFYING SOCIAL VISITS MAY ACTUALLY BE WHERE MOST FAMILY

26:43

MEMBERS FALL UH AND JUST NOTING THAT THIS CAN BE AN AREA WHERE VISITATION

26:48

ENDS UP GETTING LIMITED SO HIGHLIGHTING THAT AND MAKING SURE WE'RE LOOKING AT THAT SPECIFICALLY

26:54

UM AND RECOMMENDING THAT WE COMBINE WITH FAMILY MEMBERS WITH VISITS TO PERSONS WITH DISABILITIES AND OLDER

27:00

ADULTS FROM FAMILY MEMBERS TO SUPPORT THE PHYSICAL AND MENTAL EMOTIONAL EMOTIONS THANK YOU FOR THAT

27:06

UM WE HAVE A COMMENT AROUND UH THE ROLE OF UH LICENSING ORGANIZATIONS AND

27:12

OMBUDSMAN REPRESENTATIVES IN COMING TO VISIT AND ENSURE SERVICES ARE BEING PROVIDED APPROPRIATELY IN THOSE TYPES OF

27:18

VISITATIONS UM ADVOCACY BUT SO KIND OF FOLLOWING ON

27:23

THAT THREAD SOMEONE TITLED THAT AN ADVOCACY VISIT UM THAT THE TERM THAT THEY'RE PUTTING IN

27:29

THE CHAT FOR THAT UM BEING AN OMBUDSMAN AN ATTORNEY OR OTHER VISITORS WHO VOICE CONCERNS THAT THE RESIDENT HAS ABOUT

27:35

THEIR CARE OR RIGHTS BUT THAT'S RELATED TO ENTERTAINMENT ARTS MUSIC AND CLASSES YEAH

27:43

UM AND A HIGHLIGHT SPECIFICALLY THAT UH TRANSLATIONS AND ADVOCACY ARE OFTEN

27:48

PROVIDED BY FAMILY MEMBERS SO HIGHLIGHTING THAT UM DIFFERENT TYPES OF VISITORS MAY FALL

27:55

UNDER DIFFERENT TYPES OF VISITATION PURPOSES, I THINK THERE UM SPECIFICALLY WITH A CALL OUT SPECIFICALLY AROUND TRANSLATION AND

28:01

ADVOCACY AND THEN A NOTE AROUND TRANSPORTATION PROVIDERS AS WELL

28:07

RIGHT THANK YOU ALL FOR THIS INPUT UM AND I SEE A COUPLE ADDITIONAL COMMENTS IN

28:13

THERE SO WE'LL RECORD ALL OF THESE GREAT UM YEAH THANK YOU ALL FOR YOUR

28:19

COMMENTS UM I THINK THAT SOME OF THE CATEGORIES THAT YOU WOULD IDENTIFY COULD FALL INTO

28:25

IN SUBCATEGORIES OR EXAMPLES OF UM YOU KNOW SOME OF THE LISTED CATEGORIES IN

28:32

OTHER CASES WE MAY WANT TO COMBINE CATEGORIES BUT DEFINITELY APPRECIATE YOUR INPUT AND LIKE I SAY KEEP YOUR

28:38

COMMENTS COMING IT'S REALLY IMPORTANT THAT WE REALLY MAKE SURE THAT WE CAPTURE ALL OF THE APPROPRIATE VISITS AND

28:45

VISITOR TYPES SO THAT WE WE'RE MAKING SURE THAT WE'RE NOT MISSING ANYONE OR INADVERTENTLY EXCLUDING ANYONE

28:52

OKAY WE'LL MOVE ON TO FACILITIES AND FACILITY TYPES

28:57

UM SO UH IN LOOKING AT THE SCOPE OF THIS WORK GROUP I THINK IT'S ALSO IMPORTANT TO

29:02

IDENTIFY THE TYPES OF LONG-TERM CARE FACILITIES UM THAT WE'RE TALKING ABOUT

29:08

UM IN THIS WORK GROUP AND YOU KNOW WHO ANY OF THESE FUTURE POLICY RECOMMENDATIONS WOULD APPLY TO

29:15

UM WHAT WE'VE COME UP WITH TO DATE AGAIN OPEN TO YOUR ADDITIONAL SUGGESTIONS AND

29:20

COMMENTS OUR SKILLED NURSING FACILITIES SO THESE ARE 24-HOUR SKILLED NURSING

29:27

CARE AS WELL AS RELATED REHABILITATIVE SERVICES TO AN INDIVIDUAL WHO IS

29:33

CHRONICALLY ILL OR RECUPERATING FROM AN ILLNESS OR SURGERY NEXT IS INTERMEDIATE CARE FACILITIES OR

29:40

ICFS THESE ARE FACILITIES THAT PROVIDE COMPREHENSIVE AND INDIVIDUALIZED HEALTH

29:45

CARE AND REHABILITATION SERVICES TO PROMOTE FUNCTIONAL STATUS AND INDEPENDENCE AMONG INDIVIDUALS WITH

29:52

DEVELOPMENTAL DISABILITIES THE NEXT CATEGORY IS ADULT RESIDENTIAL FACILITIES OR ARTS THESE PROVIDE 24-HOUR

30:00

NON-MEDICAL CARE AND SUPERVISION TO ADULTS AGED 18 TO 59 WHO ARE PRIMARILY

30:07

DEVELOPMENTALLY OR MENTALLY DISABLED AND THEN FINALLY WE HAVE RESIDENTIAL CARE FACILITIES FOR THE ELDERLY OR RCFES

30:14

THESE PROVIDE 24-HOUR NON-MEDICAL CARE AND SUPERVISION TO ADULTS 60 YEARS OR

30:20

OLDER WHO MAY NEED ASSISTANCE WITH CERTAIN ACTIVITIES OF DAILY LIVING OR ADLS

30:26

SO AGAIN, WANT TO OPEN UP THE COMMENT AND CHAT TO ALL OF YOU IN TERMS OF ANY

30:32

ADDITIONAL FACILITY TYPES THAT WE MAY MISS THAT YOU FEEL IS IMPORTANT FOR THIS

30:37

WORKER TO COVER GREAT AND WE'RE SEEING SOME COMMENTS

30:43

HERE I'LL READ A FEW OUT UM WE HAD A NOTE TO CONSIDER

30:48

SUB-ACUTENESS SCHOOL NURSING FACILITIES UM A NOTE AROUND

30:54

UM LOOKING AT MEMORY CARE AS THEIR OWN CATEGORY UH A COMMENT AROUND  
STP SMITH

31:03

UM WE HAD A QUESTION ABOUT GROUP HOMES FOR CHILDREN AND WHETHER  
THEY WOULD SIT IN THE SCOPE OF THIS WORK OR WHETHER

31:10

THEY WOULD HAVE THEIR OWN FORM FOR REVIEW

31:15

UM WE HAVE A QUESTION PLEASE DELINEATE AND LIST WHICH OF THESE  
CATEGORIES ASSISTED LIVING FACILITIES FALL UNDER

31:23

UM A QUESTION ON POST-ACUTE FACILITIES AND WHETHER THOSE FALL UNDER  
SKILLED NURSING

31:29

FACILITIES AND An UM A SECOND THING THAT MEMORY CARE

31:35

SHOULD BE LOOKED AT AS THEIR OWN CATEGORY

31:46

AND I THINK THAT EVEN ECHOING OF THE QUESTION AROUND

31:51

PEDIATRIC AND YOUNGER ADULTS RIGHT I THINK

31:57

YEAH, THE SUBACUTE IN MEMORY CARE AND DEFINITELY HEAR ABOUT ASSISTED  
LIVING

32:02

FACILITIES WE WILL HAVE TO YEAH DEFINITELY THINK ABOUT THAT AND WHERE  
THESE WOULD FALL WHEN IT COMES TO

32:10

UM HOMES FOR CHILDREN YOU KNOW GROUP HOMES LIVING HOMES WITH THESE  
ALSO UH WHAT ANY

32:16

RECOMMENDATIONS APPLY FOR THOSE SETTINGS RIGHT NOW IS TO FIND THESE  
HAVE BEEN REALLY TARGETED ON UM YOU KNOW THESE

32:23

SPECIFIC LONG-TERM CARE FACILITIES BUT WE'LL DEFINITELY YOU KNOW TAKE  
THAT BACK AS WELL

32:31

OKAY WELL THANKS AGAIN EVERYONE FOR YOUR COMMENTS FEEDBACK UM LIKE I  
SAY KEEP THE COMMENTS AND THE FEEDBACK COMING

32:38

UM AND WE'RE GOING TO MOVE INTO THE NEXT AND FINAL SCOPE CONSIDERATION FOR THIS WORK GROUP AND AGAIN IF THERE'S ANY KEY

32:45

SCOPE CONSIDERATIONS THAT YOU DON'T FEEL THAT WE'VE IDENTIFIED PLEASE GIVE US THOSE COMMENTS AS WELL

32:51

UM BUT IN OUR INTERNAL WORK SO FAR, WE THOUGHT THAT THESE ARE REALLY THE KEY SCOPE AREAS OKAY SO THE FINAL AREA

32:59

WE'RE GOING TO LOOK AT IS THE DIFFERENT TYPES OF EMERGENCIES THAT SHOULD BE CONSIDERED BY THIS WORK GROUP SO WE

33:05

STARTED OFF BY LOOKING AT THE CENTER FOR DISEASE CONTROL AND PREVENTION EMERGENCY TYPES AND THEY HAVE THE FOLLOWING LISTED

33:13

PANDEMICS NATURAL DISASTERS BIOTERRORISM EMERGENCIES CHEMICAL

33:19

EMERGENCIES RADIATION EMERGENCIES AND OTHER AGENTS DISEASES AND THREATS

33:26

AND IN THINKING ABOUT YOU KNOW HOW DIFFERENT TYPES OF EMERGENCIES MAY

33:31

IMPACT RESIDENTS IN DIFFERENT WAYS UM JUST SOME YOU KNOW A COUPLE OF HIGH-LEVEL THOUGHTS

33:36

UM THAT WE'VE HAD ON OUR END SO FAR IN THE CASE OF THE COVID-19 PANDEMIC I MEAN

33:42

UH OBVIOUSLY THIS WAS DUE TO THE RISK OF INFECTION AND ILLNESS THAT'S WHY CERTAIN PROTOCOLS WERE PUT INTO PLACE

33:48

AND THERE MIGHT BE SIMILAR PROTOCOLS THAT MIGHT ALSO BE PUT INTO PLACE FOR CHEMICAL OR RADIATION EMERGENCIES AS

33:55

WELL, A NATURAL DISASTERS THAT COULD HAVE THE IMPACT RESIDENTS OF CREATING PHYSICAL BARRIERS TO ACCESS FOR A

34:03

FACILITY FORCE OR FOR SERVICES SUCH AS IN THE CASES OF A FIRE OR AN EARTHQUAKE

34:09

FOR INSTANCE, SO AGAIN WE'D LIKE TO GET YOUR INPUT ARE

34:16

THERE ANY ADDITIONAL EMERGENCIES THAT YOU CAN THINK OF THAT AREN'T COVERED BY THE CDC GUIDELINES AND ARE THERE ANY

34:23

OTHER SORT OF UH UNIQUE IMPACTS THAT YOU THINK CERTAIN TYPES OF EMERGENCIES MAY HAVE ON RESIDENTS

34:29

UM SO AGAIN WOULD LOVE TO GET YOUR FEEDBACK ON THIS AREA

34:35

GREAT AND WE HAVE SOME COMMENTS IN THE CHAT ON THIS ONE ALREADY

34:40

UM WE'RE SEEING I SEE A QUESTION ABOUT WHERE FLU WOULD FALL IN THIS UH

34:46

DELINEATION OF WHETHER THAT WOULD BE CONSIDERED PART OF THE OTHER AGENTS DISEASES AND THREATS

34:52

UM A QUESTION ABOUT WHETHER AN EXTENDED ROLLING BLACKOUT UH WOULD COUNT UNDER

34:57

THIS UNDER THIS DEFINITION AND AN ECHOING OF THAT AGAIN AROUND POWER OUTAGES

35:03

UM AND SIGNIFICANT WEATHER EVENTS UM A NOTE THAT PANDEMICS DOESN'T

35:09

NECESSARILY ADDRESS COMMUNICABLE DISEASES IN AN EARLY OR A REGIONAL STAGE

35:14

UM SO HIGHLIGHT THERE UM A SIMILARLY A NOTE THAT UH PANDEMIC IT

35:21

MAY NOT BE A PANDEMIC BUT FACILITIES HAVE SHUT OUT VISITORS FOR SEASONAL FLU UM THE COMMENT USES THAT USES QUOTATIONS

35:28

AROUND SEASONAL UM A NUMBER OF ADDITIONAL COMMENTS AROUND

35:34

THE FLU UM SO WE'LL TRACK ALL OF THOSE A COMMENT AROUND

35:39

UM THE UH IMPACT OF A MASS SHOOTING OR A TERRORISM EVENT BE IT DOMESTIC OR

35:45

FOREIGN AND HOW THAT MIGHT BE CONSIDERED IN THESE RECOMMENDATIONS

35:50

UM AGAIN A KIND OF ADDITIONAL ECHOING OF THE COMMENT AROUND PRIOR TO COVID

35:56

FACILITIES WOULD OCCASIONALLY PROHIBITED VISITATION BASED ON FACILITY SPECIFIC OUTBREAK OF INFECTIOUS DISEASE SO THE

36:03

MORE LOCALIZED DISEASE OUTBREAK THEIR INFRASTRUCTURE BREAKDOWN PIPES  
ELECTRICITY ETC

36:11

UM A HIGHLIGHTS THAT LOCAL EMERGENCIES CAN BE LIMITED TO ONE OR FEW  
NURSING HOMES

36:18

UM

36:24

AND THEN A GENERAL COMMENT UM AT A BROADER LEVEL AROUND LOCKDOWNS

36:30

THAT FACILITIES APPEAR TO BE THAT THE FREQUENCY OF LOCKDOWNS APPEARS  
TO BE

36:36

INCREASING

36:41

AND SOME ADDITIONAL COMMENTS AROUND THE FLU AND A COMMENT AROUND  
UM WHAT HAPPENS IF THERE IS A CYBER

36:48

ATTACK ON AN EMR SYSTEM RIGHT WE'RE CONTINUING TO GET SOME

36:53

COMMENTS HERE UM WE WILL TRACK ALL OF THESE AND THANK YOU FOR THESE  
ADDITIONAL NOTES AROUND

37:00

PEACE RAY THANK YOU FOR UH READING OUT THE COMMENTS AND THE FEEDBACK  
JULIET AND

37:06

AGAIN, GREAT THOUGHTS GREAT IDEAS I THINK MANY OF UM YOUR

37:12

UM SUGGESTIONS COULD FALL UNDER THESE EXISTING CATEGORIES AND AGAIN IT  
MIGHT JUST BE A MATTER OF LISTING OUT THESE UH

37:18

SPECIFIC YOU KNOW INFECTION TYPES UNDER THE DIFFERENT CATEGORIES OR YOU  
KNOW IF

37:26

YOU SEE FIT YOU KNOW WE'RE NOT TIED DOWN TO THE CDC CATEGORIES UH WE  
COULD CREATE OUR OWN SORT OF WHITE CATEGORY GROUPINGS

37:32

LIKE ONE SPECIFIC FOR COMMUNICABLE DISEASES UM IF WE THINK THAT WOULD  
BE MORE

37:37

CLEAR UH YOU KNOW FOR A CERTAIN UM TYPES OF HEALTH PROTOCOLS AND  
EMERGENCIES

37:45

OKAY SO UM NEXT SLIDE SO THE FINAL THING YOU KNOW THAT I REALLY WANTED TO COVER

37:51

ARE SOME KEY I GUESS PRINCIPLES OR YOU KNOW CONSIDERATIONS THAT WE REALLY WANT

37:57

TO UM APPROACH THIS WORK WITH UM AND THIS WAS REALLY

38:02

UM CREATED IN SOME CONVERSATIONS WE HAD WITH UM UH LEGISLATIVE STAFF WHO HAVE

38:08

WORKED ON THIS ISSUE UM AND WE AND WE DEFINITELY THINK THAT THESE ARE UM KEY SORT OF LIKE PRINCIPLES

38:13

GUIDELINES UH TO CONSIDER WHEN WE'RE LOOKING AT DIFFERENT RECOMMENDATIONS OR

38:20

UM YOU KNOW UM HOW WE MAY WANT TO ADVOCATE FOR DIFFERENT POLICY CHANGES

38:26

WHEN IT COMES TO HANDLING DIFFERENT TYPES OF EMERGENCIES SO THE FIRST

38:31

UM THE FIRST PRINCIPLE OR YOU KNOW CONSIDERATION IS BALANCE SO YOU KNOW I THINK THIS IS REALLY

38:38

GOING TO BE THE CRUX OF A LOT OF OUR WORK UH TRYING TO DEFINE THAT RELATIONSHIP OR THAT BALANCE FOR THE

38:44

NEED TO PROTECT THE HEALTH OF LONG-TERM CARE RESIDENTS

38:50

UM AS WELL AS BALANCING THAT AGAINST THEIR UM PHYSICAL MENTAL HEALTH AND ADVOCACY

38:56

NEEDS SO WHERE DO WE STRIKE THAT BALANCE YOU KNOW IN THE CASE OF A PANDEMIC WHERE YOU WANT TO PROTECT PEOPLE FROM GETTING

39:02

SICK OR DYING VERSUS OF COURSE ALSO CONSIDERING AND TAKING CARE OF THEIR

39:07

PHYSICAL MENTAL AND YOU KNOW SOCIAL SUPPORT NEEDS AS WELL UM PARITY SO THIS REALLY LOOKS AT

39:15

UM THE SAMENESS OR DIFFERENCES UH AMONG VISITATION REQUIREMENTS OUT OF THIS THAT A FACILITY MAY REQUIRE SUPPORT

39:21



REQUIREMENTS DO THEY HAVE FOR THEIR OWN STAFF TO ENTER A FACILITY AND TO PROVIDE SERVICES AND WHAT REQUIREMENTS DO THEY

39:28

HAVE SAY TO VISITORS OF A FACILITY SHOULD THOSE BE DIFFERENT AND WHY OR

39:33

SHOULD THEY BE THE SAME AND WHY AND THEN FINALLY REGIONALISM SO THIS

39:39

ACKNOWLEDGES THAT THERE WILL BE DIFFERENCES IN DIFFERENT CALIFORNIA

39:44

REGIONS THAT MAY RESULT IN YOU KNOW FLEXIBILITIES OR DIFFERENT POLICIES

39:50

MAYBE YOU KNOW IN RURAL REGIONS THE RISK OF LIKE OUTBREAKS OR INFECTIONS MAY BE

39:56

LOWER IF PEOPLE ARE MORE SPREAD OUT AND YOU KNOW MORE CONCENTRATED URBAN AREAS MAYBE THERE WOULD BE A NEED FOR

40:02

MORE STRINGENT REQUIREMENTS FOR DIFFERENT REQUIREMENTS SO THAT'S REALLY WHAT UM THAT THAT PRINCIPLE OR THAT

40:08

CONCEPT LOOKS AT UM BUT REALLY AGAIN WOULD LOVE TO GET YOUR FEEDBACK IN TERMS OF ANY OTHER

40:14

PRINCIPLES OR CONCEPTS WE SHOULD APPROACH THIS WORK BY OUTSIDE OF THOSE

40:20

UM BECAUSE I THINK THERE'S PROBABLY A LOT OF PRINCIPLES THAT WE COULD APPROACH THIS WORK WITH

40:29

SO AGAIN, PLEASE FEEL FREE TO ENTER YOUR COMMENTS ON THE SHOT

40:39

GREAT AND I'M SEEING UM A RECOMMENDATION AROUND UH BUILDING

40:44

IN A SPECIFIC COMMENT A SPECIFIC UH CONCEPT AROUND EQUITY

40:50

UM AND I'LL JUST READ THE COMMENT HERE UH WE RUN INTO SCENARIOS WHERE INDIVIDUALS WHO ARE INCLUDED FOR ACCESS TO EMERGENCY LONG-TERM CARE AND HOUSING

40:56

SETTINGS DUE TO THEIR BEHAVIORAL HEALTH AND OR CRIMINAL BACKGROUNDS IT'S JUST DEEP IN STRUCTURAL INEQUITIES IN TIMES

41:02

OF EMERGENCY IN CRISIS THANK YOU FOR THAT COMMENT UM A RECOMMENDATION TO ADD AUTONOMY TO

41:09

THE BALANCE CONCEPT THERE MUST BE SOME ACCOUNTING FOR WHAT RESIDENTS WANT IN ADDITION TO CONCERNS ABOUT THEIR SAFETY

41:21

SOME ADDITIONAL COMMENTS ABOUT THAT

41:26

SOME OF THE LEARNINGS FROM COVID UM SO ONE PERSON NOTING UH THAT IN THE

41:35

BEGINNING OF COVID THE WHOLE WORLD IS SCRAMBLING WITH WHAT TO DO AND HOW TO HOW TO REACT

41:43

UM AND HOW THAT IMPACTED THE UH ACTIONS OF LONG-TERM CARE FACILITIES

41:49

WE HAVE A RECOMMENDATION TO LOOK AT COMPASSION AS A CONCEPT UH IN IN THE

41:55

RECOMMENDATIONS FOR THOSE IN THE FACILITIES THAT NEED THEIR LOVED ONES WITH THEM

42:03

A NOTE AROUND FLEXIBILITY CONSIDERING INDIVIDUAL NEEDS AND AN ECHO ON THIS TO CONSIDER

42:09

INDIVIDUAL RIGHTS NOW THERE'S SOME ADDITIONAL THAT ARE IN

42:15

THE CHAT HERE SO WE'LL WE WILL NOTE THESE ALL UM AND LOOK AT THEM THANK YOU FOR CONTINUING TO COMMENT ON THE SCOPE

42:22

ELEMENTS HERE GREAT YES THANK YOU ALL SO MUCH YEAH I SEE A LOT UM AROUND AUTONOMY A LOT OF

42:29

COMMENTS AROUND FLEXIBILITY UM SO WE'LL DEFINITELY TAKE UM THESE ADDITIONAL

42:35

UM CONCEPTS BACK UM FOR DISCUSSION UM AND POSSIBLE INCLUSION INTO THE WORK GROUP SCOPE

42:41

UM SO THANK YOU AGAIN UM FOR ALL OF YOUR COMMENTS UH THANK YOU ALL SO MUCH FOR HELPING US TO THINK

42:48

ABOUT THE SCOPE AND MAYBE MORE PRECISELY DEFINE THE SCOPE OF THIS WORK GROUP TO

42:53

MAKE SURE THAT WE'RE ADDRESSING UM YOU KNOW ALL THE CRITICAL ISSUES ALL THE CRITICAL ITEMS

42:59

UM YOU KNOW THAT WILL ULTIMATELY UM YOU KNOW BE FOR THE BENEFIT OF LONG-TERM CARE FACILITY RESIDENTS SO UM

43:07

YEAH, THANK YOU SO MUCH UH NEXT WHAT I WOULD LIKE TO DO IS BEFORE WE MOVE INTO

43:13

THE PROCESS DISCUSSION WHICH OUR ATTORNEY BRANDI DUVALL WILL BE LEADING I'D LIKE TO INVITE LIZ FULLER WHO'S THE

43:20

CHIEF CONSULTANT FOR THE CALIFORNIA ASSEMBLY COMMITTEE ON AGING AND LONG-TERM CARE UH TO SAY A FEW WORDS

43:26

UM LIZ HAS BEEN VERY INVOLVED WITH THIS ISSUE UM SO I'D LIKE HER TO PROVIDE HER

43:31

COMMENTS SOME THOUGHTS ON THIS WORK GROUP IN THE SCOPE LIZ HI HELLO HI THANKS MARK

43:40

UM WHAT I MEAN I'M SEEING IN THE CHAT THIS IS THIS IS PROBABLY THE MOST AGGRESSIVE CHAT ZOOM I'VE HAD UH IN A

43:47

WHILE AND I THINK IT JUST SHOWS THE INTEREST IN ENGAGEMENT I THINK THAT UH

43:52

HOW THIS ORIGINATED WAS UM AS SOME HAVE SAID IN THE CHAT IS THAT WE NEED MORE CONSISTENCY AND KIND OF

44:01

UM GREATER UNDERSTANDING OF EVERYONE WHO PLAYS A ROLE IN THIS SPACE

44:07

UM ACROSS THE BOARD AND THAT HAPPENED IN A BILL WHICH WAS LATER UH AGREED THAT

44:14

THAT WHAT WE NEEDED WAS MORE CONSENSUS WHEN YOU SAY THERE NEEDS TO BE AN INTERAGENCY, I SAW DEREK I THINK PUT IN

44:20

THE CHAT THERE NEEDS TO BE AN INTERAGENCY WORKING GROUP ON THESE PROTOCOLS UM THAT IS WHAT WE'RE REALLY TRYING TO

44:27

ACCOMPLISH HERE IN KIND OF A SMALLER AND ORGANIC CONVERSATION UH SOMETHING

44:33

THAT COULD REALLY HAPPEN AND THEN POTENTIALLY BUILD POLICY THAT UM  
THAT GIVES US SOME VERY UNIFORM

44:41

UM UNDERSTANDINGS OF WHAT MAY HAPPEN IN UH

44:46

ANY TYPE OF EMERGENCY THROUGHOUT THE STATE SO I THINK UM LIKE I SAID I IT'S  
44:51

IT'S UH THE CHAT IS COMING SO FAST AND FURIOUS THAT I REALLY WANT TO SEE  
WHAT PEOPLE

44:57

ARE SAYING AND I THINK IT SHOWS UH THE DESIRE FOR ENGAGEMENT AMONGST  
THIS GROUP IS FELT THAT PERHAPS THIS SPACE HAS

45:06

NOT HAD AN OPPORTUNITY FOR PEOPLE TO SHARE SOME OF THEIR FEELINGS AND  
THIS REALLY SHOWS THAT WE ALL HAVE CONCERNS

45:14

WE ALL HAVE FEELINGS I HAVE SAID THIS IN ALMOST EVERY MEETING THAT I'VE  
HAD THAT

45:20

CLOSING THE DOORS OF FACILITIES CAUSED ISOLATION ON BOTH SIDES OF THE  
DOOR I THINK THAT YOU HAVE THOSE THAT WERE IN

45:27

FACILITIES THAT WERE SO UM

45:32

IN IN SOME UM EXPERIENCED AN END OF LIFE THAT IS SOMETHING THAT NONE OF  
US WOULD HAVE

45:38

HOPED FOR PEOPLE THAT WE CARE ABOUT BUT ALSO THE IMPACT THAT THAT HAD  
FOR THE PEOPLE WHO LOVED THEM ON THE OTHER SIDE

45:43

OF THE DOOR AND HOW IMPORTANT IT IS FOR THEIR LIFE AND WELL-BEING UH TO  
HAVE

45:48

ACCESS TO THE PEOPLE THAT THEY CARE ABOUT SO I THINK THAT SO MANY OF  
YOUR UM I SEE

45:55

IN THE CHAT ARE PEOPLE THAT I BUILT A RELATIONSHIP WITH WHO I ADMIRE THE  
WORK

46:00

THAT YOU DO UH WHETHER IT'S PROFESSIONALLY OR IT'S YOUR PERSONAL LIFE  
WORK AND I'M EXCITED TO

46:06

HEAR WHAT EVERYONE HAS TO SAY AND REALLY WHAT WE COME UP WITH UM

46:11

IN RECOMMENDATIONS I KNOW THAT WE'RE ALL PUTTING RECOMMENDATIONS  
KIND OF FAST AND FURIOUS TODAY BUT THAT'S REALLY THE END

46:16

PRODUCT OF WHAT WE HOPE TO SEE COMING OUT OF THIS SO THANK YOU ALL FOR  
BEING HERE

46:26

RAY THANK YOU SO MUCH LIZ UM THANK YOU THANK YOU FOR YOUR COMMENTS  
AND JUST THANK YOU FOR

46:32

UM BEING SO INVOLVED WITH THIS ISSUE UM WE CERTAINLY DO APPRECIATE IT UM  
SO WHAT I'D LIKE TO DO IS TO

46:38

TRANSITION TO OUR NEXT SECTION WHICH IS UM ON WORK GROUP PROCESS SO  
THIS SECTION WILL BE LED BY UH BRANDI DUVALL WHO'S

46:46

ONE OF THE ATTORNEYS WITH THE DEPARTMENT AND UM SHE WILL BE WORKING  
AS UH SORT OF THE

46:52

THE PROJECT MANAGER FOR THIS WORK GROUP GOING FORWARD AND SHE'LL  
WALK YOU THROUGH THE UH PROJECT UH PROCESSES THAT

46:59

WE'LL BE FOLLOWING UH BRANDY THANK YOU

47:05

UM THANKS TO EVERYONE FOR JOINING I'M SO GLAD TO SEE EVERYONE HERE  
VIRTUALLY

47:10

LIKE MARK SAID I'M GOING TO TALK ABOUT WORK GROUP PROCESS

47:15

AND UH SPECIFICALLY I'M GOING TO TALK ABOUT

47:20

HOW WE'RE GROUP MEMBERS CAN HELP TO DEVELOP RECOMMENDATIONS

47:26

SO, THROUGH CONSENSUS AND COLLABORATION THE LONG-TERM CARE FACILITY  
ACCESS THE

47:32

POLICY WORK GROUP WILL BUILD TOWARD JOINT RECOMMENDATIONS FOR LTCF  
ACCESS AND VISITATION OVER FOUR

47:41

MEETINGS AND THE MEETINGS WILL BUILD ON ONE ANOTHER SO MEETING ONE  
WILL FOCUS ON KEY

47:48

LEARNINGS FROM RESEARCH AND FROM THE LIVED EXPERIENCE OF WORK GROUP  
MEMBERS

47:54

AND THE PUBLIC ON LTCF ACCESS AND VISITATION POLICIES DURING THE UH  
48:01

THE COVID-19 PANDEMIC THEN FOR EACH OF THE LEARNINGS FROM  
48:07

MEETING ONE LEADING TWO WILL IDENTIFY A SET OF  
48:13

ACTIONABLE PRINCIPLES OR FUTURE EMERGENCIES  
48:18

FOR EACH OF THE PRINCIPAL MEETINGS THREE AND FOUR WILL IDENTIFY POLICY  
AND

48:25

PRACTICE RECOMMENDATIONS FOR FUTURE EMERGENCIES AND SO AS YOU CAN  
SEE AND I HOPE IT'S

48:32

BEEN EVIDENT HERE TODAY WE ARE FOCUSED ON WORKING TOGETHER TO BUILD  
CONSENSUS

48:37

OVER THESE FOUR MEETINGS AND TO ENSURE THAT WE ARE FULLY  
INCORPORATING THE

48:43

FEEDBACK AND THE INPUT OF THE WORK GROUP AND THE PUBLIC IN EACH STEP OF  
THIS

48:49

PROCESS AND I WANT TO SAY UM A WORD ABOUT HOW WORK GROUP MEMBERS  
48:56

CAN PROVIDE INPUT WE ENCOURAGE WORK GROUP MEMBERS AND

49:01

MEMBERS OF THE PUBLIC TO SUBMIT COMMENTS DURING AND IN BETWEEN  
MEETINGS

49:08

INSTRUCTIONS TO PROVIDE THESE COMMENTS DIFFER FOR WORK GROUP MEMBERS  
AND THE

49:13

PUBLIC SO DURING THE MEETINGS WRITTEN COMMENTS

49:20

CAN BE SUBMITTED AND VERBAL COMMENTS CAN BE SUBMITTED SO AS FAR AS  
WRITTEN

49:25

COMMENTS WORK GROUP MEMBERS MAY SUBMIT COMMENTS AND QUESTIONS  
THROUGHOUT THE MEETING USING THE ZOOM CHAT ALL COMMENTS

49:34

WILL BE REVIEWED BY CDA STAFF AS FAR AS VERBAL COMMENTS AT MULTIPLE

49:40

POINTS THROUGHOUT THE MEETING CDA WILL TAKE COMMENTS OR QUESTIONS FROM WORK

49:45

GROUP MEMBERS IN THE LINE FOR TIME AND TO GIVE ALL MEMBERS THE OPPORTUNITY TO SPEAK COMMENTS WILL BE

49:53

LIMITED TO TWO MINUTES PER COMMENT THEN THERE'S ALSO THE TIME IN BETWEEN

49:59

MEETINGS IN BETWEEN MEETINGS MEMBERS CAN DIRECT ANY ADDITIONAL COMMENTS OR

50:07

QUESTIONS TO UM THE EMAIL ADDRESS WHICH IS

50:13

LTC F A POLICY WORK GROUP AT

50:19

AGING.CA.GOV AND AGAIN ALL COMMENTS WILL BE REVIEWED BY CDA STAFF

50:28

SO THAT'S FOR MEMBERS AS FAR AS THE PUBLIC THE PUBLIC CAN PROVIDE INPUT

50:35

THROUGH THE FOLLOWING WAYS DURING MEETINGS THE PUBLIC CAN ALSO PROVIDE WRITTEN AND

50:42

VERBAL COMMENTS UH FROM WRITTEN COMMENTS MEMBERS OF THE PUBLIC MAY SUBMIT COMMENTS AND QUESTIONS

50:49

THROUGHOUT THE MEETING USING THE ZOOM Q A AND THOSE COMMENTS WILL ALL BE REVIEWED

50:56

BY CDA STAFF AND THEN FOR VERBAL COMMENTS AT DESIGNATED POINTS IN THE MEETINGS CDA

51:03

WILL TAKE COMMENTS OR QUESTIONS FROM MEMBERS OF THE PUBLIC WHO ARE IN THE

51:09

ZOOM COMMENTS LINE UNLESS OTHERWISE SPECIFIED COMMENTS WILL

51:15

BE LIMITED TO TWO MEETINGS PER INDIVIDUAL AND IN BETWEEN MEETINGS SIMILAR TO THE

51:24

WORK GROUP MEMBERS OF THE PUBLIC CAN DIRECT ANY ADDITIONAL COMMENTS OR QUESTIONS TO THE UH EMAIL AGAIN LTCFA

51:36

POLICY WORK GROUP AT AGING.CA.GOV

51:41

AND ALL COMMENTS WILL BE REVIEWED BY CDA STAFF

51:48

SO, NOW UM I SEE JULIET HAS DROPPED THAT INTO THE CHAT SHE'S DROPPED THE EMAIL ADDRESS

51:53

INTO THE CHAT AND I'M GOING TO HAND IT BACK TO JULIET

51:59

GREAT THANK YOU BRANDI UM SO AT THIS POINT WE'D LIKE TO OPEN IT UP FOR ANY QUESTIONS OR COMMENTS FROM

52:07

THE WORK GROUP AT THIS POINT SO IF YOU HAVE ANY QUESTIONS ABOUT THE SCOPE OR THE PROCESSES THAT WE'LL BE TAKING OVER

52:13

THE COMING FOUR MEETINGS UM TO DEVELOP LONG-TERM CARE FACILITY ACCESS POLICY RECOMMENDATIONS AS A AS A

52:22

WORK GROUP UH WE INVITE THOSE QUESTIONS AND WE ALSO INVITE GENERAL COMMENTS ON THE CHARGE OF THIS WORK

52:29

GROUP AND I SEE LET ME GO OVER TO MY VIEW HERE

52:37

I SEE WE HAVE A COUPLE PEOPLE WITH THEIR HANDS RAISED UH TONY UM WOULD YOU LIKE TO TAKE YOURSELF OFF

52:43

MUTE AND PROVIDE YOUR COMMENTS YEAH THANK YOU SO MUCH HI EVERYONE THIS IS TONY UM JUST WANT TO MAKE A COUPLE COMMENTS

52:49

ONE FIRST AND FOREMOST TO THANK LIZ FULLER FOR HER LEADERSHIP AND ASSEMBLY MEMBER NAZARIAN

52:56

UM GETTING US TO THIS POINT UM SUPER FUNDAMENTAL

53:01

UM I STILL SHAKE WHEN I THINK ABOUT 2020 AND 2021 ALL THE CALLS AND DESPERATE

53:07

EMAILS I RECEIVE FROM RESIDENTS AND FAMILY MEMBERS OF RESIDENTS IN LONG-TERM CARE FACILITIES

53:13

WHO COULDN'T SEE ONE ANOTHER COULDN'T TALK TO ONE ANOTHER IT WAS AN AWFUL TIME I THINK WE MADE

53:19

HORRIFIC POLICY MISTAKES AND I'M HOPING THAT WE SET THE GROUND SO THAT WE DON'T



53:25

MAKE THOSE SAME MISTAKES TWICE UM SO I'M REALLY ENTHUSIASTIC ABOUT THE  
53:30

MISSION OF THIS GROUP I'M SUPER HAPPY WITH THE ROBUST PARTICIPATION  
FROM SO MANY PERSPECTIVES I THINK IT'S REALLY

53:37

FANTASTIC THE MOST IMPORTANT POINT I WANT TO MAKE IS ADDING ADDITIONAL  
53:45

UM VALUE TO THE IDEA OF WHAT ESSENTIAL CAREGIVERS BRING TO RESIDENTS  
AND I

53:50

FUNDAMENTALLY MISUNDERSTOOD THIS UP UNTIL 2020 MYSELF WE EVEN SAW IN  
THE CMS MEMOS THAT

53:57

MARK WAS TALKING ABOUT ONE OF THE SLIDES THE REFERENCES TO ISOLATION  
AND HOW IMPORTANT

54:02

VISITATION IS FOR RESIDENT WELL-BEING AND I AGREE WITH ALL THAT AND THAT  
ALL THAT IN AND OF ITSELF SHOULD BE ENOUGH

54:08

TO JUSTIFY A DIFFERENT POLICY PATH IN FUTURE PANDEMICS BUT WHAT I DIDN'T  
54:13

APPRECIATE AND I WOULD WHAT I THINK SO MANY PEOPLE STILL DON'T  
APPRECIATE PEOPLE WHO ARE PROFESSIONALS IN THIS

54:18

LONG-TERM CARE BUSINESS DON'T APPRECIATE IS HOW MUCH HANDS-ON CARE  
ESSENTIAL

54:24

CAREGIVERS BRING TO THEIR LOVED ONES HOW MUCH TURNING AND  
REPOSITIONING THEY DO HOW MUCH GROOMING THEY DO HOW MUCH

54:30

AMBULATING THEY DO WITH RESIDENTS AND MOST IMPORTANTLY HOW MUCH  
FEEDING THEY DO WITH RESIDENTS AND I THINK THAT WE'VE

54:37

GOT TO GIVE THAT MORE VALUE AS WE GO THROUGH THIS PROCESS THE  
VISITATION THE

54:42

THE SOCIAL INTERACTION IS FANTASTIC AND SUPER CRITICAL BUT THAT THAT  
HANDS-ON

54:48

CARE THAT SO MANY FAMILY MEMBERS PROVIDE UM IS

54:53

IS LIFE-SAVING

55:00

THANK YOU FOR THAT COMMENT, TONY AND FOR SHARING THAT I'M GOING TO GO TO THE NEXT PERSON WE

55:06

HAVE IN LINE BLANCA

55:13

THANK YOU VERY MUCH AND I JUST WANTED TO SHARE BLANCA CASTRO LONG-TERM CARE

55:18

OMBUDSMAN UM WANTED JUST TO SHARE THAT WE'LL BE UH WE JUST SUBMITTED OUR DATA TO THE

55:26

ADMINISTRATION ON COMMUNITY LIVING AND I WANTED TO SHARE WITH EVERYONE HERE THAT ONE OF THE UH THINGS THAT WE UH OR THE

55:34

COMPLAINTS THAT WE SAW THAT HAS GONE FROM BEING YOU KNOW DOWN AT NUMBER 10 IS

55:39

NOW UP AT NUMBER FOUR WAS POLICIES UH THAT'S A TOP COMPLAINT FROM RESIDENTS

55:45

AND SO, I THINK UM WITH THE DATA IT USED IT PREVIOUSLY

55:50

WAS PHYSICAL ABUSE AND NEGLECT UM BUT I THINK WHAT THIS UH IS TELLING

55:56

US IS AND WE NEED TO HEAR THAT RESIDENTS AND FAMILIES ARE TELLING US THE POLICIES DID NOT WORK

56:03

UM AND SO THIS IS JUST A PERFECT UH FORUM TO BEGIN TO ADDRESS UH ONE OF THE

56:10

THINGS THAT THAT WE ALL INTUITIVELY KNEW BUT WE HAVE DATA TO TELL US SO WE'LL

56:15

SHARE EVERYONE THE DATA ONCE WE WHEN IT'S SINCE BEEN VALIDATED BY ACL AND

56:22

HAPPY TO YOU KNOW DO MORE BRIEFINGS ON THAT BUT I WANTED TO SHARE WE JUST I JUST HEARD LEARNED OF THAT UH TODAY ONCE

56:29

IT WAS FINALIZED THANK YOU FOR THAT COMMENT AND I THINK A

56:36

LITTLE LATER IN THE MEETING TODAY WE WILL ALSO UM PROVIDE SOME ADDITIONAL INFORMATION ABOUT HOW TO SUBMIT UH

56:42

RESEARCH AND REPORTS LIKE WHAT YOU JUST MENTIONED BLANCA FOR THIS  
WORKER'S CONSIDERATION SO THANK YOU FOR RAISING

56:48

THAT AND WE WILL ALSO PROVIDE A LITTLE ADDITIONAL CONTEXT AND  
INFORMATION ON THAT AT THE END OF TODAY'S CONVERSATION

56:56

NANCY, I SEE YOU ARE NEXT IN OUR LINE

57:02

HI NANCY STEVENS HERE UH RESIDENT OF RANCHO MIRAGE HEALTHCARE AND  
REHABILITATION CENTER

57:09

UM I HAVE A CONCERN THAT UM ENFORCEMENT IS NOT HAPPENING WHEN I

57:15

CONSIDER IT AN EMERGENCY FOR THE RESIDENTS ACTUALLY UM WHEN VISITATION  
IS RESTRICTED

57:23

UM AND STRICTLY ENFORCED WITH CUT OFF TIMES BEING AT LIKE SUNDOWN

57:29

UM THERE'S WAY TOO MUCH HAPPENING HERE IN THE EVENINGS THAT THE PUBLIC

57:34

DOESN'T KNOW ABOUT UM VISITATION IS STRICTLY ENFORCED UM OR VISITATION  
RESTRICTIONS ARE STRICTLY

57:41

ENFORCED BUT NOTHING'S BEING DONE ABOUT IT THE OMBUDSMAN HAS BEEN  
HERE THERE'S TWO BIG SIGNS ON THE FRONT ENTRYWAY

57:48

UM THAT THAT STATE THE HOURS UM AND THAT IT'S STRICTLY ENFORCED BUT  
WHEN

57:53

UM WHEN AGENCIES COME OUT, THEY SAY WELL THE FACILITY CAN POST  
WHATEVER SIGNS

58:00

THEY WANT EVEN THOUGH THERE AREN'T ANY UM CODE CASES THERE'S NO  
INFECTION THERE'S NO

58:06

UM YOU KNOW FLU GOING ON THEY CAN STILL POST WHATEVER THEY WANT ON  
THEIR FRONT DOORS ALL THE ALL THE RESIDENTS AND THE

58:14

ESSENTIAL CAREGIVERS HAVE TO DO IS JUST ASK BUT IT STATES IN BOLD LETTERS  
ON

58:19

THOSE ON BOTH OF THE SIGNS UM THAT SAYS VISITATION HOURS ARE

58:25

STRICTLY ENFORCED AND THAT'S JUST A DETERRENT PEOPLE AREN'T GOING TO  
KNOW TO ASK THAT THEY HAVE THE RIGHT TO ASK

58:32

THAT THEY HAVE THE RIGHT TO COME IN UM WHEN THEY SEE THOSE SIGNS  
POSTED ON

58:38

THE FRONT DOORS AND NURSES ARE VERBALLY ASKING PEOPLE TO LEAVE EXIT THE  
BUILDING

58:43

AT 6 30 PROMPTLY SO THAT TO ME IS AN EMERGENCY IN ITSELF

58:52

THANK YOU SO MUCH FOR THAT COMMENT, NANCY UM REALLY APPRECIATE YOUR  
INPUT AND

58:58

SHARING THAT CONSIDERATION FOR THE WORK GROUP AND ALSO WANT TO ECHO  
UM COMMENTS EARLIER IN THE MEETING TODAY

59:03

THANKING UM, YOU AND RESIDENTS OF LONG-TERM CARE FACILITIES FOR JOINING  
THE FOUR GROUPS AND SHARING YOUR LIVED

59:10

EXPERIENCE OF THESE ISSUES UM FOR THIS CONVERSATION SO THANK YOU

59:15

UM OF COURSE UM NEXT WE HAVE DEREK IF YOU'D

59:22

LIKE TO TAKE YOURSELF OFF MUTE YEAH SURE UM HI EVERYONE AS A FORMER  
OWNER

59:27

OPERATOR OF SKEW NURSING ASSISTED LIVING MEMORY CARE AND ALSO

59:33

A CONSUMER OF UH ASSISTED LIVING WHERE MY MOM WAS STAYING AT OUR CFG  
SPECIALIZING IN

59:42

HOSPICE I DEFINITELY CAN SAY THAT THERE NEEDS TO BE CONSISTENCY IN THE  
WAY HOW BOTH CDPH

59:51

AND CDSS DESIGN AND IMPLEMENT THE POLICY ALSO WE HAVE TO UNDERSTAND A  
LOT OF

59:57

TIMES IT'S REALLY HOW THE STAFF CARRY OUT THE BULK OF THE WORK IN TERMS  
OF

1:00:03

ALLOWING AND PROVIDE ACCOMMODATIONS FOR FAMILY MEMBERS TO DO THE  
VISITATION

1:00:09

SO, I HOPE THAT DURING THE NEXT FOUR MEETINGS WE'RE ABLE TO COME UP  
SOMETHING

1:00:15

THAT WILL BE COMPASSIONATE AS WELL AS TO UNDERSTAND THAT WE DO HAVE A  
LARGER

1:00:20

MANDATE TO MAKE SURE THAT WE WILL ORDER SOMETHING WHICH IS GOING TO  
SOLVE ALL

1:00:27

THE ISSUES WE ARE BRINGING UP TODAY THANK YOU

1:00:34

THANK YOU, DEREK, FOR THAT COMMENT I APPRECIATE YOUR INPUT

1:00:40

EXPERIENCE

1:00:46

DO WE HAVE ANY ADDITIONAL QUESTIONS OR COMMENTS FOR MEMBERS OF THE

1:00:52

WORKERS AT THIS TIME I DO SEE THAT WE HAVE A HAND RAISED AMONG OUR  
PUBLIC ATTENDEES

1:00:58

UM AND WE WILL TURN TO THAT IN A MOMENT UM

1:01:03

I'LL TAKE ANOTHER BEEP HERE TO SEE IF THERE'S ANYONE ELSE IN THE WORK  
GROUP

1:01:13

AND I AM SEEING SOME QUESTIONS IN THE CHAT UM THAT WE CAN ANSWER AS  
WELL THERE'S SOME QUESTIONS IN THE CHAT ABOUT WHETHER THESE SLIDES UH  
AND THE

1:01:21

RECORDING AND THE CHAT WILL BE AVAILABLE FOR THIS MEETING UM YES UH MY  
COLLEAGUE CAROLINE JUST

1:01:27

DROPPED A LINK TO THE WEBPAGE FOR THIS WORK GROUP IN THE CHAT

1:01:32

UM THERE YOU WILL FIND THE DECK FOR THIS MEETING UM AND WE WILL ALSO BE  
POSTING UH THE

1:01:38

RECORDINGS AND UM UH COMMENT VLOGS UH FROM THESE MEETINGS ON THAT  
WEBPAGE

1:01:58

AND I SEE THAT JAKE HAS RAISED HIS HAND JAKE

1:02:05

IT MIGHT BE ME AND ANISSA DAVIS UM I'M REPRESENTING CCLHO YOUR NAME IS

1:02:12

COMING UP DIFFERENTLY PLEASE GO AHEAD I'M SORRY UM I WAS JUST GOING TO  
UH PUT OUT A

1:02:19

SUGGESTION OF WHEN WE DO THE RECOMMENDATIONS SOME OF THE THINGS  
THAT MAY BE UH SOME GUIDING PRINCIPLES WOULD

1:02:26

BE THINGS THAT UM I'VE SEEN IN THE LEGAL SPHERE WHICH IS LIKE LEAST  
RESTRICTIVE

1:02:33

UM LEAST RESTRICTIVE MEASURES FOR THE SMALLEST OR SHORTEST AMOUNT OF  
TIME SO I

1:02:38

WAS JUST GONNA I JUST WANTED TO PUT THAT UP THERE AS ANOTHER UM  
ASPECT TO CONSIDER

1:02:44

THANK YOU THANK YOU WE APPRECIATE THAT YEAH

1:02:57

ALL RIGHT I THINK IF THERE ARE NO ADDITIONAL COMMENTS OR QUESTIONS FROM

1:03:02

THE WORK GROUP AT THIS MOMENT IN THE MEETING WE CAN SHIFT OVER TO  
TAKING ANY COMMENTS OR

1:03:10

UM FROM THE PUBLIC UH AND WITH THAT I WILL HAND IT BACK TO

1:03:16

THE CDA COMMUNICATIONS TEAM FOR THIS PIECE MEGAN

1:03:25

HI EVERYBODY JUST A REMINDER THAT NOW IS THE TIME FOR MEMBERS OF THE  
PUBLIC TO HAVE THE

1:03:31

OPPORTUNITY TO MAKE COMMENTS ABOUT THE PURPOSE AND SCOPE OF THIS  
WORK GROUP SO

1:03:36

WE ARE ASKING YOU TO LIMIT YOUR COMMENTS TO TWO MINUTES AND PRIOR TO  
MAKING YOUR COMMENTS PLEASE STATE YOUR NAME FOR THE

1:03:43

RECORD AND IDENTIFY ANY GROUP OR ORGANIZATION THAT YOU REPRESENT  
COMMENTS WILL BE TAKEN IN IN THE ORDER

1:03:50

THAT THEY'RE RAISED WORK GROUP MEMBERS MAY ALSO RAISE THEIR HAND IN  
THE REACTIONS FEATURE OF ZOOM TO ENTER THE

1:03:56

LINE FOR A VERBAL COMMENT OR QUESTION AND FOR THOSE ATTENDEES WHO ARE  
JOINING US BY PHONE UH FURTHER INSTRUCTIONS ARE

1:04:02

THAT YOU CAN PRESS STAR 9 ON YOUR DIAL PAD TO JOIN THE LINE AND ONCE YOU'RE CALLED ON I'LL ANNOUNCE

1:04:09

YOUR NAME OR THE LAST FOUR DIGITS OF YOUR PHONE NUMBER AND THEN WE'LL UNMUTE YOUR LINE AND THEN YOU'LL ALSO HAVE TO

1:04:16

UNMUTE YOURSELF AS WELL AND THEN WHEN COMMENTS ARE DONE AND NO ONE IS LEFT IN

1:04:21

LINE I'LL TURN IT BACK OVER TO BRANDY FOR NEXT STEPS SO IT LOOKS LIKE RIGHT

1:04:26

NOW YOU HAVE TWO HANDS RAISED FIRST PERSON I SEE HERE IS KAREN KLINK KAREN

1:04:32

I'LL UNMUTE YOUR LINE AND YOU CAN PROCEED WITH YOUR TWO MINUTES

1:04:38

OKAY CAN YOU HEAR ME YES IF I DON'T HEAR ME YOU WANT TO SEE ME MY NAME IS KAREN KLINK I'M THE DAUGHTER

1:04:45

I AM A DAUGHTER WITH A MOM IF YOU MENTIONED MEMORY CARE AND THE CENTRAL CAREGIVER AND A LOT OF ADVOCATES I LOVE

1:04:52

MY MOM AND I WANT WHAT'S BEST FOR HER I DID NOT CHECK THAT LOVE MY RIGHTS OR NOR HERS AT THE DOOR OF THE LONG-TERM CARE

1:04:58

FACILITY UM I HAVE A LOT TO SAY BUT A MONTH AGO

1:05:04

THERE WAS AN OUTBREAK AT MY MOM'S FACILITY THERE ARE ONLY FOUR RESIDENTS THERE THEY LOCKED US DOWN THEY LOCKED US

1:05:10

OUT UM WE COULDN'T COME IN EVEN THOUGH THEY SAID IT WAS ONLY ONE RESIDENT WHICH

1:05:16

TURNED OUT NOT TO BE TRUE WE FOUND OUT THERE WAS MORE OH MY MOM WAS NOT MY MOM DID NOT HAVE COVID THEY SAID IT WAS

1:05:22

THEIR POLICY I SAID WHAT POLICY WAS THAT THE DSS POLICY OR PUBLIC HEALTH

1:05:28

DEPARTMENT THEY ONLY SENT ME THEIR QUOTE MITIGATION PLAN AFTER I KEPT ASKING

1:05:34

WHICH MADE THEM MAD AT ME AND IT LOOKED LIKE IT WAS FROM 2020 IT TALKED ABOUT FACE TIME IT TALKED ABOUT WINDOW VISITS

1:05:40

IT TALKED ABOUT OUTDOORS I TOLD HER IT NEEDED TO BE UPDATED AND SO DID THEIR PUBLIC HEALTH DEPARTMENT SHE WOULDN'T

1:05:47

AND I GOT REPRIMANDED AND I GOT A NEW SET OF RESTRICTIONS ONE OF WHICH THAT I WAS NEVER TO INTERFERE WITH THE FACILITY

1:05:52

OPERATIONS AGAIN ESPECIALLY ABOUT COVETED RESTRICTIONS I DID NOT GO TO THE CDSS FROM FEAR OF MORE RETALIATION THREE

1:06:00

YEARS INTO THE PANDEMIC THIS IS WHAT'S STILL HAPPENING IT'S MIND-BOGGLING FACILITY OWNER SENT ME AN EMAIL TELLING

1:06:07

ME TO MIND MY OWN BUSINESS OR ELSE I COULD MOVE MY MOM

1:06:13

FOREIGN I WISH TO I COULD SAY I WAS SURPRISED PRIVATE PAY FACILITIES CAN STILL DO WHATEVER THEY WANT THEY ARE

1:06:19

ALLOWED TO BE STRICTER BUT NOT LESS THAN STRICT THAN THE GUIDELINES OR RULES THAT

1:06:24

ARE PUT OUT THE LICENSING FACILITIES AND THE HEALTH DEPARTMENT THIS HOUSE ALSO HAS PRIVATE ROOMS THEY

1:06:32

ARE THAT ALL HAVE THEIR OWN ENTRANCES TO GO FROM THE OUTDOORS SO THERE'S NO NEED

1:06:37

FOR THIS RESTRICTED UH VISITATION RIGHTS FOR THE RESISTANCE BUT ANYWAY THAT WAS

1:06:45

RIDICULOUS SO THEY ARE VERY SET UP FOR PEOPLE TO COME INTO THE INTO THEIR ROOMS

1:06:51

SO THIS WAS DURING THE RAINY SEASON AND I WAS TOLD I COULD VISIT MY MOM UNDER

1:06:56

THE AWNING IN THE BACKYARD OR IN THE GARAGE WITH THE DOOR OPEN YOU THESE ARE THE THINGS THAT WE'RE UP AGAINST I HAVE

1:07:02

ENCOUNTERED THINGS LIKE THIS OVER AND OVER AGAIN SO THERE HAS TO BE SOMETHING DONE

1:07:09

ABOUT THESE THINGS UM YOU KNOW THE FAMILIES AND UH AND

1:07:14



LOVED ONES ARE UM ARE NOT BEING TREATED WITH RESPECT THE OMBUDSMAN  
DEPARTMENT WILL NOT DEAL

1:07:21

WITH FAMILIES BECAUSE THEY'RE SET UP TO DO RESIDENTS I'VE COME ACROSS  
THIS AGAIN AND AGAIN AND I JUST

1:07:29

YOU KNOW HAVE TO SAY WHAT MY EXPERIENCE HAS BEEN AND I'VE EXPERIENCED  
WORKING WITH OTHER PEOPLE

1:07:36

UM AND UM YOU KNOW THIS IS WHY I PROBABLY WASN'T PICKED TO BE ON THE  
COMMITTEE BECAUSE I SPEAK MY TRUTH

1:07:44

THANKS FOR LETTING ME SHARE THANK YOU KAREN

1:07:50

UM NEXT WE HAVE TERESA PALMER MD I'M GOING TO UNMUTE YOUR LINE AND YOU  
CAN

1:07:55

HAVE YOUR TWO MINUTES THANKS TERESA HI CAN YOU HEAR ME YES WE CAN  
YEAH

1:08:02

UH ONE OF THE THINGS THAT IS AMAZING IS THAT WE CAN TAKE AWAY THE  
RIGHTS OF PEOPLE BE

1:08:10

JUST BECAUSE THEY'RE IN LONG-TERM CARE AND DICTATE TO THEM

1:08:17

UM THINGS THAT YOU WOULDN'T DICTATE TO ANYONE WHO'S NOT IN LONG-TERM  
CARE

1:08:22

AND UM I THINK THAT NEEDS TO BE LOOKED AT WITH EVERY POLICY UM THE  
OTHER

1:08:28

THING IS THE RIGHT TO BE MORE RESTRICTIVE UH NEEDS TO BE TAKEN AWAY  
THERE NEEDS TO BE BEST PRACTICES

1:08:36

AND RULES AND IT IS IT CAN'T BE OKAY TO BE MORE RESTRICTIVE

1:08:42

UM THE THIRD THING IS UM THE ORIGINAL AB2546

1:08:48

UM BILL THAT I WORKED WITH THE CALIFORNIA ESSENTIAL CAREGIVERS AND WAS  
CNHR AND WITH LIZ FULLER BEFORE IT GOT

1:08:56

DOWNGRADED INTO A WORKING GROUP WAS EXTREMELY WELL WRITTEN AND UM  
THERE WAS HOURS AND HOURS OF WORK

1:09:04

FROM MULTIPLE STAKEHOLDERS THAT WENT INTO THAT AND I WOULD LIKE TO  
KNOW I

1:09:09

WOULD LIKE TO KNOW THAT THAT ORIGINAL UH TONY CHICKENTOWN CAN OR LIZ  
FULLER CAN

1:09:15

SUPPLY IT TO YOU THAT THAT WHAT WAS WRITTEN IN THAT BILL IT HAS BEEN  
REVIEWED BY EVERYONE BECAUSE

1:09:22

UM THERE'S A LOT YOU COULD JUST TAKE FROM THAT YOU DON'T HAVE TO  
REINVENT THE WHEEL

1:09:27

THANK YOU THANK YOU TERESA

1:09:34

UP NEXT WE HAVE UH TAMARA RODRIGUEZ DDS I'LL UNMUTE YOUR LINE  
TOMORROW

1:09:46

AND YOU CAN GO AHEAD AND MAKE YOUR PUBLIC COMMENT YEAH THANK YOU I  
DIDN'T HAVE MY HAND RAISED SO I'M NOT SURE WHAT

1:09:52

HAPPENED BUT THANK YOU I OH I DON'T KNOW YEAH THANK YOU NO PROBLEM

1:10:04

I DON'T SEE ANY OTHER UH HANDS RAISED FOR PUBLIC COMMENT AT THIS TIME

1:10:10

I THINK WE ARE TRYING TO GET BACK OVER TO BRANDY THANK YOU

1:10:16

UM THANK YOU FOR ALL OF YOUR COMMENTS WE'RE GOING TO TALK ABOUT THE  
NEXT STEPS

1:10:22

SO AFTER THIS MEETING WE ASK WORK GROUP MEMBERS TO SUBMIT A ONE  
PARAGRAPH BIO

1:10:29

FOR THE WORK GROUP AND FOR THE WORK GROUP'S WEBSITE THAT

1:10:35

INCLUDES YOUR CURRENT ROLE AND RELEVANT PREVIOUS EXPERIENCE

1:10:40

AND YOUR EXPERIENCE WITH LONG-TERM CARE FACILITIES ACCESS AND  
VISITATION DURING

1:10:46

COVET 19. WE ARE ALSO ASKING YOU TO SUBMIT ANY

1:10:51

RELEVANT RESEARCH POLICY GUIDANCE AND OR POSITION PAPERS FROM YOUR

1:10:58

ORGANIZATIONS OR OTHER GROUPS THAT THIS WORK GROUP SHOULD CONSIDER IN THE

1:11:04

DEVELOPMENT OF OUR RECOMMENDATION WHICH SPEAKS TO THE LAST COMMENT THAT WAS MADE

1:11:10

UM YOU COULD EMAIL THESE ITEMS TO CDA AT THE EMAIL ADDRESS THAT WE'VE BEEN

1:11:15

REFERENCING UM AND THE ONE THAT'S ON SCREEN NOW BY FEBRUARY 20TH THAT WOULD BE APPRECIATED

1:11:24

AND UM THEN THERE'S A COUPLE OF THINGS THAT WE CAN DO TO PREPARE FOR THE FIRST

1:11:32

UM WORK GROUP MEETING WE'RE HERE TODAY FOR THE KICKOFF OF THE FIRST ACTUAL

1:11:38

WORK GROUP MEETING IS GOING TO BE ON MARCH 14TH AND IT'S GOING TO START AT 12

1:11:45

30 AND IT'S SCHEDULED TO RUN FROM 12 30 TO 3. CDA WILL POST THE AGENDA FOR THIS WORK

1:11:53

GROUP MEETING ON ITS PUBLIC WEBSITE AT LEAST 10 DAYS

1:11:59

PRIOR TO MARCH 14TH CDA WILL SEND MEETING MATERIALS TO WORK

1:12:06

GROUP MEMBERS FIVE DAYS IN ADVANCE OF THE MEETING AND WILL POST ALL MATERIALS FOR THE

1:12:13

PUBLIC FOLLOWING THE MEETING WORK GROUP MEMBERS ARE ENCOURAGED TO

1:12:19

REVIEW MATERIALS PRIOR TO THE MEETING AND CONSULT WITH OTHER INDIVIDUALS

1:12:25

WITHIN THEIR ORGANIZATIONS AS NEEDED MATERIALS WILL BE LISTED ON THE

1:12:31

LONG-TERM CARE FACILITY ACCESS POLICY WORK GROUP WEB PAGE WHICH THE TEAM IS UH

1:12:39

WELL IT'S UP THERE NOW AND I THINK IF SOMEONE COULD JUST DROP THAT IN THE CHAT UM THAT WOULD BE GREAT

1:12:47

AND WITH THAT I WILL HAND IT BACK TO MARK

1:12:55

GREAT THANK YOU SO MUCH BRANDI UM SO WE'RE JUST WRAPPING UP NOW I FIRST

1:13:01

WANT TO THANK ALL OF YOU FOR ATTENDING THE KICKOFF TODAY AGAIN IT'S BEEN SUCH A GREAT TURNOUT AND AS LIZ HAD

1:13:08

MENTIONED I DON'T THINK I'VE SEEN SUCH AN ACTIVE CHAT IN A ZOOM MEETING IN A VERY LONG TIME SO DEFINITELY A LOT OF

1:13:15

INTEREST A LOT OF THOUGHTS AND IDEAS ON THIS TOPIC SO THANK YOU ALL FOR BEING SO ACTIVELY ENGAGED IN CONTRIBUTING

1:13:22

UM YOU'LL HAVE PLENTY OF OTHER OPPORTUNITIES TO CONTRIBUTE EITHER THROUGH THE EMAIL OPTIONS THAT BRANDY

1:13:28

PROVIDED TO SUBMIT ADDITIONAL COMMENTS ANY RESEARCH THAT YOU WANT TO SHARE ON THE TOPIC AND ANYTHING THAT YOU THINK

1:13:36

WOULD BE BENEFICIAL TO HELP MOVE THIS WORK GROUP FORWARD UM AND THANK YOU SO MUCH FOR HELPING US

1:13:42

BETTER REFINE AND DEFINE THE SCOPE OF THE WORK GROUP AGAIN THIS IS SUCH AN

1:13:48

IMPORTANT TOPIC AND WE WANT TO MAKE SURE THAT WE'RE NOT MISSING OUT ANY CRITICAL CONSIDERATIONS ANY CRITICAL SCOPE AREAS

1:13:56

UM SO YOUR FEEDBACK YOUR PARTICIPATION HAS BEEN JUST SO HELPFUL AND BENEFICIAL

1:14:01

UM YOU KNOW AS BRANDI HAD SAID YOU KNOW WE WILL BE PROVIDING UM YOU KNOW A SUMMARY AND

1:14:08

UM YOU KNOW THE POWERPOINT UM AND THEN YOU KNOW REVISITING SOME OF THESE TOPICS IN THE NEXT WORK GROUP

1:14:14

MEETING THE NEXT MEETING IS REALLY GOING TO FOCUS ON RESEARCH UM AS WELL AS EXPERIENCE UH FROM PEOPLE

1:14:21

WITH LIVED EXPERIENCE THROUGH THE PANDEMIC UM AND THE IMPACT THAT YOU KNOW EXISTING

1:14:27

HEALTH POLICIES MAY HAVE HAD ON THEM AS YOU KNOW THEY UM THEY WENT THROUGH THE

1:14:33

PANDEMIC BUT YES THANK YOU JUST SO MUCH FOR PARTICIPATING TODAY AND WE REALLY

1:14:38

LOOK FORWARD TO ENGAGING WITH YOU IN THE NEXT WORK GROUP MEETING TAKE CARE EVERYBODY

1:14:46

THANK YOU THANK YOU