



HR0298

LRB102 18474 LAW 26601 r

1

HOUSE RESOLUTION

2 WHEREAS, Illinois nursing homes have been severely
3 impacted by COVID-19, with outbreaks causing high rates of
4 infection, morbidity, and mortality; and

5 WHEREAS, Illinois' long-term care facilities have been
6 ground zero in the fight against the COVID-19 pandemic,
7 representing a shockingly high share of COVID-19 deaths; over
8 10,300 long-term care facility residents have died of
9 COVID-19, while 78,400 nursing home residents have been
10 confirmed COVID-19 positive and the numbers continue to rise;
11 and

12 WHEREAS, The toll of separation and lack of physical
13 contact on nursing residents has led to feelings of
14 loneliness, abandonment, despair, and fear, and these feelings
15 are only pushing the pandemic's death toll higher; and

16 WHEREAS, Isolation and loneliness are associated with a 50
17 percent increased risk of developing dementia, a 32 percent
18 increased risk of stroke, a 29 percent increased risk of
19 coronary heart disease, and a nearly fourfold increased risk
20 of death among heart failure patients; and

21 WHEREAS, The updated visitation guidance by the Centers

1 for Medicare & Medicaid Services (CMS), dated on March 10,
2 2021 and April 27, 2021, emphasized that facilities must allow
3 end-of-life and compassionate care visits regardless of
4 community positivity rates, an outbreak, or vaccination
5 status, and any nursing home must facilitate in-person
6 visitation consistent with applicable CMS regulations; and

7 WHEREAS, CMS guidance states a facility should not
8 restrict visitation for all residents as long as there is
9 evidence that the transmission of COVID-19 is contained to a
10 single area (e.g. unit) of the facility; facilities should
11 continue to adhere to CMS regulations and guidance for
12 COVID-19 testing, including routine staff testing, testing of
13 individuals with symptoms, and outbreak testing; and

14 WHEREAS, Nursing home residents must be able to exercise
15 their right to in-person visitation; facilities must be held
16 accountable for facilitating in-person visitation for nursing
17 home residents and families when safe to do so in compliance
18 with guidance by CMS and the Centers for Disease Control
19 (CDC); and

20 WHEREAS, CMS guidance confirms nursing home residents are
21 entitled to receive compassionate care visits, including but
22 not limited to end of life visits, in accordance with CMS and
23 CDC guidance; and

1 WHEREAS, CMS guidance states "compassionate care visits,
2 and visits required under federal disability rights law,
3 should be allowed at all times, regardless of a resident's
4 vaccination status, the county's COVID-19 positivity rate, or
5 an outbreak"; and

6 WHEREAS, CMS defines compassionate care visits to include,
7 but not be limited to:

8 (a) end-of-life situations;

9 (b) a resident, who was living with their family
10 before recently being admitted to a nursing home and is
11 struggling with the change in environment and lack of
12 physical family support;

13 (c) a resident who is grieving after a friend or
14 family member recently passed away;

15 (d) a resident who needs cueing and encouragement with
16 eating or drinking, previously provided by family and/or
17 caregiver(s), and is experiencing weight loss or
18 dehydration; and

19 (e) a resident who used to talk and interact with

1 others and is experiencing emotional distress, seldom
2 speaking, or crying more frequently (when the resident had
3 rarely cried in the past); and

4 WHEREAS, In addition to family members, compassionate care
5 visits can be conducted by any individual that can meet the
6 resident's needs, such as clergy or lay persons offering
7 religious and spiritual support; and

8 WHEREAS, The Illinois Department of Public Health guidance
9 states essential caregivers meet an essential need for the
10 resident by assisting with activities of daily living or
11 positively influencing the behavior of the resident; the goal
12 of such a designation is to help ensure high-risk residents
13 continue to receive individualized, person-centered care; and

14 WHEREAS, The Illinois Department of Public Health states a
15 facility should establish policies and procedures for how to
16 designate and utilize essential caregivers that include
17 visitation parameters and a process for communication with
18 residents and families; and

19 WHEREAS, Illinois nursing home residents and their loved
20 ones and family members continue to be wrongly denied access
21 to in-person visitation, compassionate care, and end-of-life
22 visits, as well as essential caregiver visitation based on

1 facilities' purported but unsupported or unverifiable or
2 undocumented assertions that visitation is denied because of
3 something related to COVID-19; and

4 WHEREAS, Over a year into the COVID-19 pandemic, thousands
5 of Illinois nursing home residents, their loved ones, and
6 family members continue to be separated; the responsibility to
7 attest and report the denial of end-of-life, compassionate
8 care, and essential caregiver visitation remains the sole
9 responsibility of impacted, vulnerable nursing home residents
10 or their loved ones; and

11 WHEREAS, Family members and the loved ones of nursing home
12 residents fear reporting the facility because their resident
13 could be subjected to potential harm, neglect, or abuse; in
14 abundance of fear, they do not contact state or federal
15 nursing home regulators to report denied end-of-life,
16 compassionate care, or essential caregiver visitation;
17 therefore, be it

18 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE
19 HUNDRED SECOND GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that
20 we urge Illinois long-term care facilities to uphold and
21 adhere to federal and state laws, rules, regulations, and
22 guidance on a resident's standards of care, rights,
23 protections, and inalienable right to be treated with respect,

1 dignity, and quality care; and be it further

2 RESOLVED, That Illinois long-term care facilities shall be
3 held fully accountable, be investigated, and subjected to
4 remediation for failure to reinstate end-of-life,
5 compassionate care, and essential caregiver visitation without
6 adequate reasons related to clinical necessity or resident
7 safety; and be it further

8 RESOLVED, That the Illinois Department of Public Health
9 shall review whether a facility is in compliance with the
10 federal and state law, regulations, rules, and guidance, and
11 will work swiftly with the facility to quickly address any
12 constraints when a long-term care facility claims barriers to
13 reinstating end-of-life, compassionate care, and essential
14 caregiver visitation; and be it further

15 RESOLVED, That we urge the Illinois Department of Public
16 Health to continue listening to long-term care resident
17 advocates, aging advocates, the Illinois Long-Term Care
18 Ombudsman, and representatives from essential caregiver
19 organizations to address the inequity of access to
20 end-of-life, compassionate care, and essential caregiver
21 visitation in Illinois.