#### **HEALTH CARE ADVISORY BOARD**

Meeting Summary September 9, 2019

### **MEMBERS PRESENT**

**STAFF** 

Marlene Blum, Chairman

Sherryn Craig

Rose Chu, Vice Chairman

William Finerfrock, Vice Chairman

Shikha Dixit

Ann Zuvekas

Ellyn Crawford

Philippe Beauchene

Tim Yarboro, MD

Rosanne Rodilosso

Dr. Michael Trahos, DO

Maia Cecire

### MEMBERS PARTICIPATING REMOTELY

None

### **MEMBERS ABSENT**

None

#### **GUESTS**

Bobby Zeiller, Managing Director – Development, SSL Development Company Kim Stummer, Development Manager, SSL Development Company Rosanne McAdams, Senior Vice President, Asset Management, SSL Development Company

David Freshwater, Chairman of Watermark

John Niebauer, Executive Director of The Fountains at Washington House

Lynne Strobel, Walsh, Colucci, Lubeley & Walsh, PC

Benjamin Schwartz, MD, Director, Division of Epidemiology and Population Health, Health Department

Gloria Addo-Ayensu, MD, MPH, Health Director, Health Department

Jessica Werder, Deputy Director of Public Health Operations, Health Department

Kelly Atkinson, Senior Land Use Planner, Department of Planning and Development

Pete Murphy, Chairman, Planning Commission

Mike Forehand, Inova Health System

Dominic Bonaiuto, Inova Health System Diana White, League of Women Voters

#### **Call to Order**

The meeting was called to order by Marlene Blum at 7:30 pm.

# July 8, 2019 Meeting Summary

The meeting minutes from July 8, 2019 were approved as submitted.

Public Hearing to review Fair Lakes North and South, L.C.'s application (PCA-82-P-069-23/CDPA 82-P-069-10/FDPA 82-P-069-01-19/PCA 82-P-069-18-01/PCA 82-P-069-17-01/PCA 82-P-069-22/FDPA 82-P-069-09-10) to develop a Continuing Care Facility (CCF))

Bobby Zeiller, Managing Director – Development, SSL Development Company; Kim Stummer, Development Manager; SSL Development Company; Rosanne McAdams, Senior Vice President, Asset Management, SSL Development Company; David Freshwater, Chairman of Watermark; John Niebauer, Executive Director of The Fountains at Washington House; and Lynne Strobel, Walsh, Colucci, Lubeley & Walsh, PC provided an overview of the proposal.

While Silverstone Fair Lakes will be developed by SSL Development Company, LLC ("Silverstone"), an affiliate of Silverstone Senior Living, LLC, the community will be operated by Watermark Retirement Communities ("Watermark"). Watermark has more than 30 years of experience and currently operates 58 senior housing communities, which include independent living, assisted living, memory care and skilled nursing services, across 21 states including one in Alexandria, Virginia, the Fountains at Washington House.

The proposed CCF campus will be comprised of 180 independent living, 155 assisted living, including 30 units of secured memory care, and single-family attached homes. According to Silverstone representatives, the proposed development will offer a continuum of care and services that allow residents to age in place. Silverstone Fair Lakes will provide personalized care to seniors requiring assistance with the basic activities of daily living (e.g., bathing, dressing, eating, toileting, as well as assistance with medications management and incontinence management) and to persons requiring specialized care associated with dementia and other memory impairment disabilities, including Alzheimer's.

While residents of the independent living facility will have priority access to the development's assisted living units, Silverstone Fair Lakes will be open to individuals outside the senior living community, a departure from traditional CCF models. Another difference from traditional CCF senior living communities is the separate ownership and operation of the independent living facility and the assisted living facility. The HCAB learned that an affiliation agreement between the two facilities will be required, ensuring that on-site amenities (e.g., movie theaters, activity rooms fitness centers, an indoor swimming pool) along with services and activities are shared and coordinated. Shared services will include transportation to outside events; shared activities will include lectures and artistic performances.

Silverstone Fair Lakes will have a Director of Nursing and a Director of Memory Care to oversee residents' care. The directors will be responsible for implementing health and wellness policies appropriate to the needs of the residents. The community will have a licensed practical nurse (LPN) on the premises 24-hours a day, seven days a week. Three shifts of Care Managers and Direct Care Staff (e.g., licensed nurses, medication technicians, certified nursing assistants) will provide assistance with the basic activities of daily living.

The number of Direct Care Staff will vary according to the size of the resident population and the acuity level of those residents. In supplemental materials provided to the HCAB, the applicant expected to provide 1.5 hours of medical care per assisted living resident per day and 3.25 hours per memory care resident per day with increasing resident acuities resulting in increased staffing. Within assisted living, the ratio of residents to direct care staff will be 13:1 during the day, 15:1 in the evening, and 23:1 overnight. Within memory care, the ratio of residents to direct care staff will be 6:1 during the day, 6:1 in the evening, and 10:1 overnight. The HCAB received assurances that the applicant will comply with the state's amended regulations regarding direct care overnight staffing ratios for memory care residents, which requires 3 direct care staff per 23-32 residents.

Indirect care staff include housekeeping, engineering/maintenance, dining services, and community and quality of life support staff such as event and activities coordinators.

The rental rate structure for the Silverstone Fair Lakes will be consistent with rents of comparable competitors and will use a hybrid of base rents and level-of-care fees. In response to which rate structure - entry fee model or the rental model — is more popular, the applicant cited that the market determines pricing. In the Pennsylvania

market, especially in Philadelphia and Harrisburg, rental rates are predominant, but in other areas of the country, the entry fee is becoming more popular.

The Fair Lakes North and South, L.C. will meet the Comprehensive Plan's affordability requirements by contributing \$3.00 per square foot of the independent and assisted living Floor Area Ratio (FAR) to the Fairfax County Housing Trust Fund for the provision of affordable accommodations prioritized for older adults and/or persons with disabilities at the discretion of the Department of Housing and Community Development.

The HCAB received a written statement from the Fairfax County Long Term Care Coordinating Council noting a substantial difference in the number of affordable independent living units that would have been required under the Affordable Dwelling Unit (ADU) provisions versus what the Fair Lakes North and South, L.C. will proffer to under the amended Comprehensive Plan CCF policy. While this issue is beyond the HCAB's purview, several HCAB members expressed concern about the Department of Planning and Development's CCF use determination for the Silverstone Fair Lakes.

The independent and assisted living communities will be owned and operated separately. Likewise, the Silverstone Fair Lakes is not a closed community, providing a continuum of senior housing services to those individuals who can pay the advertised rent and service fees. While Fair Lakes North and South, L.C. has proffered to unified operations, the Silverstone Fair Lakes is more comparable to a traditional assisted living facility, not a CCF. HCAB members agreed to reconvene a study group to address this shortcoming in the Comprehensive Plan.

Bill Finerfrock moved that the HCAB recommend the Planning Commission and the Board of Supervisors approve Fair Lakes North and South, L.C.'s proposal. Dr. Trahos, DO seconded the motion. The motion passed unanimously.

# **Respiratory Disease Outbreak Summary**

Benjamin Schwartz, MD, Director, Division of Epidemiology and Population Health, presented on the respiratory disease outbreak that occurred in June and July at the Greenspring retirement community. The Health Department first became aware of the outbreak on July 8 when Fairfax Fire and Rescue reached out to report an increased number of transports over the holiday week. Once the Health Department began its investigation, it was learned that 38 cases had already occurred.

Greenspring is a large community covering 58 acres in a campus with multiple buildings. They provide a full continuum of care with different areas for independent living, assisted living and skilled nursing. The facility also has a health clinic for residents and staff.

The initial findings from the investigation revealed that the respiratory illness cases were clustered in an Assisted Living and Skilled Nursing facility. Cases diagnosed as pneumonia generally required hospitalization. Affected residents were very elderly with underlying medical conditions. All testing at Inova Central Lab was negative for etiology, and no severe illness in Independent Living or among staff occurred.

Among older adults, infection is transmitted by respiratory droplets and contact with contaminated surfaces. Staff can also transmit infection while providing care to residents. Prevention strategies include limiting contact with ill persons (e.g., keeping infected persons in their rooms), good handwashing, increased environmental cleaning, and using masks and gloves when caring for residents.

Dr. Schwartz reviewed each step in the investigation, which included maps and floor plans of confirmed cases.

At the conclusion of the outbreak, there were 63 cases and 7 deaths. Among the fatalities, it is not clear how pneumonia may have contributed to infection as most residents had other health conditions. The median age of those who died was 98 years. There were 13 cases of respiratory illness among staff, but no serious infections. There was no evidence of outbreak-associated illness among Independent Living residents. Precautions included reduced visiting with Assisted Living/SNF residents, increased handwashing, increased cleaning in common areas, and enhanced surveillance.

In assessing the Health Department's performance, the following strengths were identified:

- Timely initiation of investigation and recommendations to prevent disease spread
  within 1 day of outbreak report
- Effective implementation of infection prevention measures by the facility
- Strong relationship between Greenspring and FCHD Nurse Liaison
- Good communication between Greenspring, EMS and hospitals to ensure appropriate precautions for people transferred between facilities
- Effective collaboration with Inova, the Virginia Department of Health and CDC for consultation and lab testing

Areas for improvement will include how to interact with media during an evolving situation. This case generated widespread local and some national media. Media contact was initiated from a point of contact associated with the facility/residents to a local television station. The story was then picked up by national media. Coverage described the events as a "mystery illness. Lab results were not available at the time the story was being reported and requests for counting cases and deaths posed additional challenges.

Moreover, the case underscored the importance of educating providers about early reporting as the timeframe for this incident demonstrated initial reports were later than optimal.

# **2020 Legislative Program Update**

Marlene Blum presented research on professional staffing ratios and regulatory provisions for senior housing communities across several states. Virginia regulates overnight staffing for memory care levels of service. Other states, like Pennsylvania, also have staffing guidelines for memory care. However, general staffing ratios for assisted living levels care are not codified.

Of particular note are states that require pharmaceutical review of assisted living residents' medications and medication administration records. Both Maryland and New Jersey have pharmaceutical review provisions and this generated some interest among HCAB members.

After discussion, it was decided that it is premature to submit a legislative initiative for minimum staffing ratios for the 2020 legislative program. However, HCAB members will gather information about pharmaceutical review requirements for possible consideration for the 2021 Legislative Program.

Health Department staff also followed up with the bill patron for HB 900 (2016 session), which was identified by Dr. Trahos, DO for consideration. The patron does not plan to prefile or introduce the bill in the 2020 session. He cited opposition from medical colleges and nurse practitioners as well as neutral support from the medical association.

### **Other Business**

Inova Update

A new Chief Financial Officer has been hired, the timing of which did not allow for the HCAB's mid-summer budget meeting. However, Dominic will provide some potential

dates to Sherryn Craig so that the HCAB can tour Inova's Center for Personalized Health.

Additionally, Mike Forehand has returned to Inova as Vice President of Community and Government Affairs.

There being no further business, the meeting adjourned at 9:35 pm.