

SB0825-FIN_MACo_SUP.pdf

Uploaded by: Sarah Sample

Position: FAV



MARYLAND
Association of
COUNTIES

Senate Bill 825

Health Facilities – Delegation of Inspection Authority – Related Institutions and Nursing Homes

MACo Position: **SUPPORT**

To: Finance Committee

Date: March 1, 2024

From: Sarah Sample

The Maryland Association of Counties (MACo) **SUPPORTS** SB 825. This bill extends authority to local governments requesting to oversee and maintain standards for nursing homes, hospitals, and residential inpatient and outpatient treatment centers.

Community members can access health care services through a range of providers across Maryland. It is important that required standards and procedures are adhered to with extreme vigilance in these facilities. Some jurisdictions have a considerable number of providers, and some have just a handful. Regardless, they all require accountability – but those safeguards are only effective when they are properly enforced.

The provisions of this bill are in the spirit of state and local partnership. With staffing shortages and tenuous vacancy rates, the state agencies are not always able to keep up with the volume of entities that need to be evaluated. The ability for local agencies to be granted the authority to step in and support those enforcement efforts will guarantee that the services residents are receiving in any jurisdiction are safe.

Counties believe, with the current workforce challenges, that allowing local agencies to help out when they feel they are capable, is a wise strategy for making sure all Marylanders are protected in these circumstances. Accordingly, MACo urges the Committee to give SB 825 a **FAVORABLE** report.

SB 825 Delegating Inspections Authority –Related I

Uploaded by: Tammy Bresnahan

Position: FAV



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facebook.com/aarpm

**SB 825 Health Care Facilities – Delegating Inspections Authority –Related Institutions and
Nursing Homes
Senate Finance Committee
FAVORABLE
March 1, 2024**

Good afternoon, Chair Beidle and members of the Senate Finance Committee. I am Tammy Bresnahan, Senior Director of Advocacy for AARP MD. AARP Maryland advocates on behalf of over two million Marylanders age 50 and over. We would like to thank you for the opportunity to speak in support of SB 825. We thank the Senator Kramer for sponsoring SB 825.

SB 825 requires the Secretary of Health, on request of a unit of local government, to delegate to the unit of local government the authority to inspect and to conduct site visits and full surveys of related institutions and nursing homes.

There are many reasons why a full, clear, and constant view into the workings of nursing homes is important, especially considering the significant role nursing homes play in long-term services and supports. Nursing homes provide a wide range of services to about 30,000 people annually in Maryland. Usually serving individuals with greater needs than those in assisted living or other residential settings. Nursing homes are required to provide everything a resident might need, including nursing care, 24-hour supervision, three meals a day, assistance with activities of daily living, and rehabilitation services (physical, occupational, speech). Most of the care is funded through taxpayer dollars.

Without a clear understanding and insight into a nursing home's provision and quality of services, there is no comprehensive ability to know whether nursing homes are effective, efficient, and providing quality care. Greater transparency and an extra set of eyes on these facilities and communication between state agencies and local government helps consumers, their families, regulators, and.

When individuals enter a nursing home, protecting the quality of care requires regulators to work together to put up guardrails to prevent bad actors from practicing in our state. In efforts to make sure residents in nursing homes receive the best care, States should fund sufficient quality monitors to inspect all providers at least annually. Complaints should be responded to promptly. Inspections should be unscheduled. Follow-up inspections should also be conducted as needed to ensure quality problems are corrected. Quality monitors should receive thorough and ongoing training about the unique needs of older people, including those with lifelong disabilities.

Training should include all aspects of LTSS in nursing facilities, residential care settings, and home care.

States should focus their monitoring efforts on improving clinical, functional, and quality-of-life outcomes. They should use performance-based outcome measures, including but not limited to consumer-experience and satisfaction measures. Monitoring efforts should intensify as problems are detected in quality outcomes and as the complexity and intensity of services increase.

AARP believes that intra-agency cooperation is necessary. Open-book policies of transparency inspections into what happens in nursing home can be helpful when providing and monitoring oversight, and the quality of resident health and welfare.

For these reasons, AARP MD respectfully requests a favorable report on SB 825. If you have additional questions, please contact me at tbresnahan@aarp.org or by calling 410-302-8451.

SB825_DDCoalition_FWA.pdf

Uploaded by: Laura Howell

Position: FWA



MARYLAND DEVELOPMENTAL DISABILITIES COALITION

Dedicated to the rights and quality of life for people with developmental disabilities in Maryland

March 1, 2024

SB 825 – Health Facilities – Delegation of Inspection Authority – Related Institutions and Nursing Homes Position: Favorable with Amendment



8601 Robert Fulton
Dr
Suite 140
Columbia, MD 21046

The Maryland Developmental Disabilities Coalition is comprised of five statewide organizations that are committed to improving the opportunities and outcomes for Marylanders with intellectual and developmental disabilities.



1500 Union Avenue
Suite 2000
Baltimore, MD
21211

What does SB 825 bill do?

- Requires the Secretary of Health, upon request by a local unit of government, to delegate the authority for inspection, site visits, and incident reporting, to the local government for related institutions and nursing homes.

With the inclusion of related institutions, SB 825 brings group homes licensed by the Maryland Developmental Disabilities Administration (DDA) into this requirement, but not other services licensed by DDA. DDA-licensed community providers provide an array of supports and services, ranging from residential services to day habilitation, employment supports, and a variety of support services that help people to live full lives in their communities.



8835 Columbia 100
Pky
Suite P
Columbia, MD
21044

SB 825 would have the effect of splitting oversight of the vast array of services provided by developmental disability community providers between local jurisdictions for some services, and the State for other services.



Maryland Developmental
Disabilities Council
CREATING CHANGE · IMPROVING LIVES

The oversight of DDA licensed services is critically important, and it is vital that there be clarity and consistency in the oversight process. Providers follow a complicated process for maintenance of licensure, with guidelines for incident reporting and investigations, site visits, periodic and annual inspections. Splitting the responsibility for these functions between County and State agencies would create inconsistency and confusion for community providers.

217 E Redwood
Street
Suite 1300
Baltimore, MD 21202

It is also unclear what authority a local jurisdiction would have to respond to incident reports and other citations. The authority of the State in these matters is clear.

What is the remedy?



7000 Tudsbury Road
Windsor Mill, MD
21244

Settings licensed or approved by the Developmental Disabilities Administration should be excluded. This may be done by narrowing the definition of institutions and settings for which authority may be delegated, and removing the authority from applying to the broad term of “related institutions”.

Contact: Laura Howell, MD Association of Community Services,
lhowell@macsonline.org.

SB825_MoCoDHHS_Frey_FWA.pdf

Uploaded by: Leslie Frey

Position: FWA



Montgomery County

Office of Intergovernmental Relations

ROCKVILLE: 240-777-6550

ANNAPOLIS: 240-777-8270

SB 825

DATE: March 1, 2024

SPONSOR: Senator Kramer

ASSIGNED TO: Finance

CONTACT PERSON: Leslie Frey (leslie.frey@montgomerycountymd.gov)

POSITION: FAVORABLE WITH AMENDMENTS (Department of Health and Human Services)

Health Facilities – Delegation of Inspection Authority – Related Institutions and Nursing Homes

Senate Bill 825 requires the Secretary of Health, on request of a unit of local government, to delegate to the unit of local government the authority to inspect and to conduct site visits and full surveys of related institutions and nursing homes. The bill also requires related institutions and nursing homes to report an unexpected occurrence related to an individual's medical treatment that results in death or serious disability that is not related to the natural course of the individual's illness or underlying disease condition to a unit of local government if the Secretary has delegated inspection authority, and it requires that if a civil money penalty is levied against a nursing home, the funds are to be released to the unit of local government if the Secretary has delegated inspection authority.

States conduct nursing home surveys and inspections on behalf of the Centers for Medicare and Medicaid Services (CMS) to determine their compliance with Medicare and Medicaid health and safety standards. Each state has a CMS-designated state survey agency that performs this certification process. The Office of Health Care Quality (OHCQ) in the Maryland Department of Health (MDH) is Maryland's designated state survey agency and is responsible for nursing home licensing, inspections, and certification of compliance. OHCQ uses federal survey guidance to conduct standard onsite inspections of Medicare-or Medicaid-certified nursing homes at least once every 15 months. The agency also investigates any complaints it receives from the public and from within facilities about resident care or safety.¹

Until July 1, 2021, inspections of nursing homes in Montgomery County were conducted by Montgomery County surveyors, not OHCQ surveyors. A long-standing Memorandum of Understanding between MDH and Montgomery County allowed a team of County surveyors to conduct certifications, surveys, and complaint investigations on behalf of the State. The team consisted of 8 to 10 nurses and nurse administrators employed by the Montgomery County Department of Health and Human Services

¹ Kalyandurg, C, & Simmons, K. (2023). *Nursing Homes in Montgomery County: Regulatory Framework and Issues Impacting the Quality of Care*. Accessed on February 28, 2024:
https://www.montgomerycountymd.gov/OLO/Resources/Files/2023_reports/OLO-Report2023-7.pdf

(MCDHHS). The County surveyors would perform annual survey inspections in County nursing homes, report their findings to the state, and then receive the state's recommendations. If violations were found, state and federal regulators would step in to handle enforcement. If the State received complaints about nursing homes, that information would be relayed to the County surveyor team who would then perform the investigation.²

In February of 2021, the State notified MCDHHS that the MOU between MDH and Montgomery County would terminate, citing that "there will be no funding for [the services provided under] the MOU after June 30, 2021." The work previously done by the County surveyors was absorbed by OHCQ, Maryland's designated survey agency. The State also retained the funding that would have supported the County surveyor team, causing MCDHHS to lose those positions. Subsequent attempts to re-engage the State in an MOU to allow the County to resume conducting inspections on behalf of the State have not led to an agreement between the parties.³

Under Senate Bill 825, the Secretary of MDH would be required to delegate inspection authority of "related institutions" if such a request was made by a unit of local government. "Related institutions" has a broader meaning in the statute than only nursing homes: it could include facilities such as group homes for people with developmental disabilities.⁴ MCDHHS support Senate Bill 825 and respectfully requests an amendment to clarify that a unit of local government could request the inspection authority of some types but not all types of related institutions in the jurisdiction- for example, the local jurisdiction could request to inspect nursing homes and the Secretary could grant the inspection authority of nursing homes but not the other types of related institutions in that jurisdiction unless also requested. MCDHHS urges the committee to issue a favorable with amendment report for Senate Bill 825.

² *Id.*

³ *Id.*

⁴ Related institution means an organized institution, environment, or home that:

- (i) Maintains conditions or facilities and equipment to provide domiciliary, personal, or nursing care for 2 or more unrelated individuals who are dependent on the administrator, operator, or proprietor for nursing care or the subsistence of daily living in a safe, sanitary, and healthful environment; and
- (ii) Admits or retains the individuals for overnight care. (Health-General 19-301(o))

AMENDMENTS TO SENATE BILL 825
(First Reading File Bill)

AMENDMENT NO. 1

On page 4, in line 4, insert “**(D) ON REQUEST OF A UNIT OF LOCAL GOVERNMENT, THE SECRETARY SHALL DELEGATE TO THE UNIT OF LOCAL GOVERNMENT THE AUTHORITY TO INSPECT NURSING HOMES UNDER THIS SECTION.**”

Senator Kramer - SB825.pdf

Uploaded by: Pamela Lockett

Position: FWA



MONTGOMERY COUNTY COUNCIL
ROCKVILLE, MD

GABE ALBORNOZ
COUNCILMEMBER AT-LARGE
CHAIR OF HEALTH & HUMAN SERVICES

February 29, 2024

Senator Ben Kramer
401 Miller Senate Office Building
11 Bladen Street
Annapolis, MD 21401

Dear Senator Kramer:

I am writing in support of SB825, Health Facilities – Delegation of Inspection Authority – Related Institutions and Nursing Homes. There are approximately 230 nursing homes in the State of Maryland with approximately 30,000 nursing home beds available. As Chair of the Montgomery County Council Health and Human Services Committee, I understand the importance of timely inspections and site visits in our nursing homes and related institutions to ensure that all our facilities provide a clean, safe and healthy environment for our residents. Accountability is a key factor in that process.

Delegating authority to local units of government, upon their request to inspect and conduct site visits and full surveys of related institutions and nursing homes as well as requiring them to report certain information to that designated local government entity, is a major step toward full accountability for quality of care for nursing homes and related institutions. While I wholeheartedly support SB825, giving counties and local government entities the right to request and receive the authority from the Secretary of Health to carry out these duties, I also am in favor of the ‘Friendly Amendment’ offered by Montgomery County DHHS to clarify that a county could request to inspect nursing homes but not all other “related institutions” in the county.

Thank you, Senator Kramer for your work on this legislation. Please feel free to reach out to me directly if you need any additional information.

Sincerely,

A handwritten signature in black ink, appearing to read "Gabe Albornoz", written in a cursive style.

Councilmember Gabe Albornoz

SB 825_MDH_UNF

Uploaded by: Sarah Case-Herron

Position: UNF



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

March 1, 2024

The Honorable Pamela Beidle
Chair, Finance Committee
3 East, Miller Senate Office Building
Annapolis, MD 21401

RE: SB 825 - Health Facilities – Delegation of Inspection Authority – Related Institutions and Nursing Homes – Letter of Opposition

Dear Chair Beidle and Committee Members:

The Maryland Department of Health (MDH) respectfully submits this letter of opposition for Senate Bill (SB) 825 - Delegation of Inspection Authority – Related Institutions and Nursing Homes.

The Office of Health Care Quality (OHCQ) is the agency within the Maryland Department of Health (the Department) charged with monitoring compliance in certain health care facilities and community-based programs, including related institutions and nursing homes. OHCQ is the designated State survey agency in Maryland and is authorized to conduct certification activities on behalf of the Centers for Medicare & Medicaid Services (CMS). Through State and federal authority, OHCQ conducts surveys to determine compliance with State licensure and/or federal certification regulations, which establish the minimum requirements to remain licensed and/or certified.

State licensure and federal certification oversight are applied to all nursing homes across the State as a whole. CMS prioritizes certification and recertification activities by defining tiers of surveys and a triage system for complaints. This prioritization of survey activities best protects the health and safety of patients across Maryland. If a nursing home annual survey is due in one area of the State, but a very serious complaint is received in another area, the surveyors investigate the very serious complaint first. A centralized regulatory system in Maryland administered through OHCQ provides equal protection and regulatory oversight for all of Maryland's nursing home residents. Fragmenting OHCQs oversight activities by counties and by state vs federal authority will lead to increased complexity, redundant efforts, and increased cost that would not ultimately benefit the residents of the state.

SB 825 will have significant operational and fiscal impact at both the State and local level. This bill requires that the Department's Secretary delegate inspection authority to a unit of local government, upon the unit's request. A "unit of local government" is not defined, but the

common definition includes a county, city, town, township, parish, or village. Thus, a county as well as a city within the county could both request the Secretary's authority.

The Department has developed and is implementing a plan to resolve the overdue and pending nursing home surveys. OHCQ has been successful at filling vacancies over the past year. Currently, the Long Term Care Unit has only 5 nurse surveyor vacancies. The job posting for these nurse surveyor positions closed on February 27, 2024. The Governor's FY 2025 Allowance includes 11 new nurse surveyor positions for the Long Term Care unit. The allowance also includes \$3.9 million for contractual certified nurse surveyors to complete overdue and pending nursing home surveys. This combination of circumstances - filling the nurse surveyor vacancies, receiving additional nurse surveyor positions, and using contractors - will allow OHCQ to catch up on mandated activities across Maryland.

The Department appreciates local governments' concern regarding nursing home inspections and intends to work with counties who are interested in this authority to explore possible options.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director, Office of Governmental Affairs at sarah.case-herron@maryland.gov.

Sincerely,



Laura Herrera Scott, M.D., M.P.H.
Secretary

1182024_122015PM_Miller__227133 2.pdf

Uploaded by: Seth Miller Miller

Position: UNF



Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

January 18, 2024

Seth Miller
11404 Woodington Ter
Potomac, MD 20854-2066
sethm125@aol.com

Dear Mr. Miller:

Thank you for your correspondence to the Maryland Department of Health (MDH) regarding your concerns relating to the Maryland Board of Nursing, the Maryland Board of Social Work, and the Office of Health Care Quality.

MDH has reviewed your concerns and your requests, and we consider this matter closed. Please be advised that MDH will no longer respond to your inquiries regarding this matter.

Thank you again for your correspondence.

Sincerely,

A handwritten signature in blue ink, appearing to read "L. Herrera Scott", is written over a light blue horizontal line.

Laura Herrera Scott, M.D., M.P.H.
Secretary

Brian Benjamin Police Report One.pdf

Uploaded by: Seth Miller Miller

Position: UNF

Incident Number: P1900221608

Incident Date	Call Source	Incident Started	Call Received Time	Route Closed Time	Time Offered
2019-07-03 22:02:34	911	2019-07-03 21:59:22		2019-07-03 22:58:16	

1st Unit Dispatched	1st Unit Enroute	1st Unit Arrived	Agency Id	Status	Latitude	MAP
2019-07-03 22:04:03	2019-07-03 22:04:38	2019-07-03 22:12:11	P	Closed	39.07411074	MAP
					Longitude	-77.16046656

Location	Common Place	Location Description	Location Name	Alt Location	City
1235 POTOMAC VALLEY RD(SNF)	MAP		POTOMAC VALLEY NH (SNF)	AtLoc	ROCKVILLE

Apartment	Building	Floor	Subdivision	District	Beat	PRA
115			RO	1D	1A1	258

Create User Id	Create User	Editing User Id	Initial Alarm Level	Initial Inc Type Code	Initial Inc Type	Initial Inc Type Desc
15944	SAMANTHA SIMPSON	16128		ASLTO	ASSAULT	ASSAULT

Incident Status Desc	Alarm Level	Inc Type Code	Inc Type	Incident Type Desc	Priority
Inactive incident		ASLTO	ASSAULT	ASSAULT	3

Reporting District	Report Number	Agency	Report Number Assigned By	Report Number Inserted

Caller Name	Last	First	Middle	Phone

Caller Address	Caller Apartment	Caller Building	Caller City	Phone Call Type
MAP				

Primary Unit Agency	Primary Unit	Primary Ofc Agency	Primary Ofc ID	Primary Ofc Badge #	Primary Ofc
P	5C22	P	5539		STEVEN MALKO(RPD)

Disposition	Disposition Desc	All Comments
24131	24131- DISORDERLYCONDUCT	<p>2019-07-03 22:02:34 15944: Pers 2</p> <p>Clothing: gown</p> <p>2019-07-03 22:02:34 15944: CAD RESPONSE: ASLTO IF INJURIES, CONFERENCE FIRE RESCUE DISPATCH LEVEL: 106B05 PROBLEM: ONE OF RESIDENTS ADMITED TO HITTING ANOTHER RESD WHEN THEY FOUND THAT RESD BLEEDING IN THEIR ROOM</p> <p>PERSON 1 INFO -- DESCRIPTION: VICTIM -- RACE: -- SEX: -- AGE: -- CLOTHING: GOWN -- NAME: -- DOB:</p> <p>PERSON 2 INFO -- DESCRIPTION: SUSPECT -- RACE: -- SEX: -- AGE: -- CLOTHING: BLK SHI -- NAME: -- DOB:</p> <p>1. CALLER ON SCENE. 2. 2ND PTY CALLER ON SCENE. 3. PAST INCIDENT. 4. SUSP/VEH NOT IN AREA. 5. ASSAULT 6. VICT DESC: 7. NO MEDICAL NEEDED.</p>

2019-07-03 22:02:34 15944: Pers 3

Clothing: blk shi

2019-07-03 22:32:55 16128: 5C12 EVENT #]

Units

Unit 1 of 2

Call Sign	Vehicle ID	Officer 1 ID	Ofc 1 Badge	Ofc 1	Officer 2 ID	Ofc 2 Badge	Ofc 2
5C12	55174	5582		DAVID TROGOLO(RPD)			

Trip #	Disposition	Disposition Desc	Status	Primary Unit ?	User ID
1			C	N	16128

Received Time to:

Dispatch	00:05:24
Enroute	00:05:30
On Scene	00:12:49

Hangup Time to:

Dispatch	
Enroute	
On Scene	

Create Time to:

Dispatch	00:02:12
Enroute	00:02:18
On Scene	00:09:37
Cleared	00:39:37

Dispatch Time to:

Enroute	00:00:06
On Scene	00:07:25
Cleared	00:37:25

EnrouteTime to:

On Scene	00:07:19
Cleared	00:37:19

On Scene To Cleared	00:30:00
Enroute Hospital To Arrive Hospital	
Arrive Hospital To Cleared	

Unit 2 of 2

Call Sign	Vehicle ID	Officer 1 ID	Ofc 1 Badge	Ofc 1	Officer 2 ID	Ofc 2 Badge	Ofc 2
5C22	55182	5539		STEVEN MALKO(RPD)			

Trip #	Disposition	Disposition Desc	Status	Primary Unit ?	User ID
1	24131	24131-DISORDERLYCONDUCT	C	Y	16128

Received Time to:

Dispatch	00:04:41
Enroute	00:05:16
On Scene	00:13:40

Hangup Time to:

Dispatch	
Enroute	
On Scene	

Create Time to:

Dispatch	00:01:29
Enroute	00:02:04
On Scene	00:10:28
Cleared	00:55:42

Dispatch Time to:

Enroute	00:00:35
On Scene	00:08:59
Cleared	00:54:13

EnrouteTime to:

On Scene	00:08:24
Cleared	00:53:38

On Scene To Cleared	00:45:14
Enroute Hospital To Arrive Hospital	
Arrive Hospital To Cleared	

People

Roles	Last Name	First Name	Middle Name	Build	Hair Color	Eye Color	Gender
VICTIM							M

Phone	Address	City	Apartment
		MAP	

Dr License	License St	Contact	Primary Caller ?	Active
			No	Yes

Roles	Last Name	First Name	Middle Name	Build	Hair Color	Eye Color	Gender
SUSPECT							M

Phone	Address		City	Apartment
		MAP		

Dr License	License St	Contact	Primary Caller ?	Active
			No	Yes

Roles	Last Name	First Name	Middle Name	Build	Hair Color	Eye Color	Gender
INITIAL CALLER							

Phone	Address		City	Apartment
		MAP		

Dr License	License St	Contact	Primary Caller ?	Active
		Yes	Yes	Yes

Vehicles

History

Timestamp	User ID	Console/ Device ID	Transaction Type	Transaction Description
2019-07-03 21:59:21	15944	CAD011	CALL ASSOC	Call Associated:
2019-07-03 22:02:34	15944	CAD011	PREM/HAZ	Prem/Haz Check: 1235 POTOMAC VALLEY RD
2019-07-03 22:02:34	15944	CAD011	INC CREATE	Incident Created: Location: 1235 POTOMAC VALLEY RD(SNF) Latitude: 39.07411074 Longitude -77.16046656 City: ROCKVILLE Cross Streets: NEW MARK ESP / MARCUS CT Incident Type: ASLTO Priority: 3
2019-07-03 22:02:34	15944	CAD011	PER INFO	Person 1 Added: FirstName: MiddleName: LastName:

2019-07-03 22:02:34	15944	CAD011	PER INFO	Person 2 Added: FirstName: MiddleName: LastName:
2019-07-03 22:02:34	15944	CAD011	CMNTS	
2019-07-03 22:02:34	15944	CAD011	PER INFO	Person 3 Added: FirstName: MiddleName: LastName:
2019-07-03 22:02:34	15944	CAD011	CMNTS	
2019-07-03 22:02:34	15944	CAD011	CMNTS	<p>Comments: CAD RESPONSE: ASLTO IF INJURIES, CONFERENCE FIRE RESCUE DISPATCH LEVEL: 106B05 PROBLEM: ONE OF RESIDENTS ADMITED TO HITTING ANOTHER RESD WHEN THEY FOUND THAT RESD BLEEDING IN THEIR ROOM</p> <p>PERSON 1 INFO -- DESCRIPTION: VICTIM -- RACE: -- SEX: -- AGE: -- CLOTHING: GOWN -- NAME: -- DOB:</p> <p>PERSON 2 INFO -- DESCRIPTION: SUSPECT -- RACE: -- SEX: -- AGE: -- CLOTHING: BLK SHI -- NAME: -- DOB:</p> <p>1. CALLER ON SCENE. 2. 2ND PTY CALLER ON SCENE. 3. PAST INCIDENT. 4. SUSP/VEH NOT IN AREA. 5. ASSAULT 6. VICT DESC: 7. NO MEDICAL NEEDED.</p>
2019-07-03 22:02:34	15944	CAD011	INC CREATE	Jurisdiction: Area: 1D, Beat: 258, Sector: 1A1
2019-07-03 22:02:36	15944	CAD011	NOTIF	Notification Associated: -----

INCIDENT DETAILS

LOCATION:

Location: 1235 POTOMAC VALLEY RD(SNF)

Loc Name: POTOMAC VALLEY NH (SNF)

Loc Descr:

City: ROCKVILLE

Building:

Subdivision: RO

Floor:

Apt/Unit: 115

Zip Code: 20850

Cross Strs: NEW MARK ESP / MARCUS CT

Area: 1D

Sector: 1A1

Beat: 258

Map Book:

INCIDENT:

Inc #: 00221608

Inc #: P1900221608

Priority: 3

Inc Type: ASSAULT

Descr: ASSAULT

Mod Circum:

Created: 10:02:34 PM 7/3/2019

Caller:

Phone:

UNITS DISPATCHED:

PERSONNEL DISPATCHED:

COMMENTS:

CAD RESPONSE: ASLTO IF INJURIES, CONFERENCE FIRE RESCUE

DISPATCH LEVEL: 106B05

PROBLEM: ONE OF RESIDENTS ADMITED TO HITTING ANOTHER RESD
WHEN THEY FOUND THAT RESD BLEEDING IN THEIR ROOM

PERSON 1 INFO

				-- DESCRIPTION: VICTIM -- RACE: -- SEX: -- AGE: -- CLOTHING: GOWN -- NAME: -- DOB: PERSON 2 INFO -- DESCRIPTION: SUSPECT -- RACE: -- SEX: -- AGE: -- CLOTHING: BLK SHI -- NAME: -- DOB: 1. CALLER ON SCENE. 2. 2ND PTY CALLER ON SCENE. 3. PAST INCIDENT. 4. SUSP/VEH NOT IN AREA. 5. ASSAULT 6. VICT DESC: 7. NO MEDICAL NEEDED. ----- PREMISE HAZARD: TYPE TITLE Inner/Outer PROX ADDRESS PREPLAN 1235 POTOMAC VALLEY 500/1000 1235 POTOMAC VALLEY RD, ROCKVILLE
2019-07-03 22:02:45	16128	CAD042	REC	Fixed: [PAT] 3C22#[PAT] 5C22, 5C12, 3C12, 3C33
2019-07-03 22:02:46	16128	CAD042	REC	Preferred: [PAT] 4A12 (2:06)#[PAT] 5C22 (2:27), 8E22 (2:36), 5C12 (2:44), 3C22 (5:11)
2019-07-03 22:04:03	16128	CAD042	DPTCH	Dispatch: P/5C22
2019-07-03 22:04:03	16128	CAD042	PRIM UNIT	Primary Unit: Primary:: P/5C22 (NULL)
2019-07-03 22:04:03	16128	CAD042	UNIT STAT	Unit Status: NoNeedDisplay: False, UnitStatusChange: DSP (CLR)

Timestamp	User ID	Console/ Device ID	Transaction Type	Transaction Description
2019-07-03 22:04:03	16128	CAD042	UNIT MGMT	Unit Location: Apartment: : 115, City: : ROCKVILLE, Loc Name:: POTOMAC VALLEY NH (SNF), Location:: 1235 POTOMAC VALLEY RD(SNF), Subdivision: : RO, Zip Code: : 20850
2019-07-03 22:04:03	16128	CAD042	DPTCH	Dispatch: AlarmLevel: 0, AssignedUnitsWithOfficers: P/5C22 (Officers: P/MALKO(RPD) STEVEN), DispatchedTime: 2019-07-03 22:04:03
2019-07-03 22:04:03	16128	CAD042	INC STAT	Incident Status: IncStatName: Active (Pending)
2019-07-03 22:04:38	5539	PR0026	UNIT STAT	Unit Status: Submitted:: 2019-07-03 22:04:37, UnitStatusChange: ENR (DSP)
2019-07-03 22:04:46	16128	CAD042	DPTCH	Dispatch: P/5C12
2019-07-03 22:04:46	16128	CAD042	UNIT STAT	Unit Status: NoNeedDisplay: False, UnitStatusChange: DSP (CLR)
2019-07-03 22:04:46	16128	CAD042	UNIT MGMT	Unit Location: Apartment: : 115, City: : ROCKVILLE, Loc Name:: POTOMAC VALLEY NH (SNF), Location:: 1235 POTOMAC VALLEY RD(SNF), Subdivision: : RO, Zip Code: : 20850
2019-07-03 22:04:46	16128	CAD042	DPTCH	Dispatch: AlarmLevel: 0, AssignedUnitsWithOfficers: P/5C12 (Officers: P/TROGOLO(RPD) DAVID), DispatchedTime: 2019-07-03 22:04:46
2019-07-03 22:04:46	16128	CAD042	REC	Not Requested: Recommendations not requested
2019-07-03 22:04:52	5582	PR0027	UNIT STAT	Unit Status: Submitted:: 2019-07-03 22:04:51, UnitStatusChange: ENR (DSP)
2019-07-03 22:12:11	5582	PR0027	UNIT STAT	Unit Status: Submitted:: 2019-07-03 22:12:11, UnitStatusChange: ONS (ENR)
2019-07-03 22:13:02	5539	PR0026	UNIT STAT	Unit Status: Submitted:: 2019-07-03 22:13:02, UnitStatusChange: ONS (ENR)
2019-07-03 22:32:55	16128	CAD042	CMNTS	Comments: 5C12 EVENT #
2019-07-03 22:33:04	16128	CAD042	TIMEOUT	Unit Timeout Reset: Timeout Value:: 30
2019-07-03 22:33:04	16128	CAD042	TIMEOUT	Unit Timeout Reset: Timeout Value:: 30
2019-07-03 22:42:11	5582	PR0027	FREE UNIT	Unit Freed: P/5C12
2019-07-03 22:42:11	5582	PR0027	UNIT STAT	Unit Status: UnitStatusChange: CLR (ONS)
2019-07-03 22:42:11	5582	PR0027	UNIT MGMT	Unit Location: Apartment: : NULL (115), City: : NULL (ROCKVILLE), Loc Name:: NULL (POTOMAC VALLEY NH (SNF)), Location:: NULL (1235 POTOMAC VALLEY RD(SNF)), Subdivision: : NULL (RO), Zip Code: : NULL (20850)
2019-07-03 22:58:16	5539	PR0026	INC UPDT	Disposition: Dispo:: 24131

Timestamp	User ID	Console/ Device ID	Transaction Type	Transaction Description
2019-07-03 22:58:16	5539	PR0026	INC UPDT	Disposition: DispoFields: 24131, UnitIDFields: P/5C22
2019-07-03 22:58:16	5539	PR0026	FREE UNIT	Unit Freed: P/5C22
2019-07-03 22:58:16	5539	PR0026	UNIT STAT	Unit Status: UnitStatusChange: CLR (ONS)
2019-07-03 22:58:16	5539	PR0026	UNIT MGMT	Unit Location: Apartment: : NULL (115), City: : NULL (ROCKVILLE), Loc Name:: NULL (POTOMAC VALLEY NH (SNF)), Location:: NULL (1235 POTOMAC VALLEY RD(SNF)), Subdivision: : NULL (RO), Zip Code: : NULL (20850)
2019-07-03 22:58:16	5539	PR0026	INC STAT	Incident Status: IncStatName: Closed (Active)

Response Letter_11.15.2023 2.pdf

Uploaded by: Seth Miller Miller

Position: UNF



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

November 15, 2023

Seth Miller
11404 Woodington Ter
Potomac, MD 20854-2066
sethm125@aol.com

Dear Mr. Miller:

Thank you for your correspondence to the Maryland Department of Health (MDH) and MDH Secretary Laura Herrera Scott, M.D., M.P.H., regarding your complaints against Potomac Valley Nursing Home (Potomac Valley) and Manor Care Potomac. Your correspondence was shared with the Office of Health Care Quality (OHCQ) as the appropriate agency to respond.

OHCQ is the agency within MDH charged with monitoring the quality of care in certain health care facilities and community-based programs. OHCQ conducts licensure, certification, and survey activities to determine compliance with federal and State law.

OHCQ received your complaint (MD00144700) against Potomac Valley on September 5, 2019, alleging that the facility did not provide an appropriate discharge for you and that you heard what you believed was a staff person slapping your roommate. OHCQ's investigation was unable to substantiate your complaint about discharge. The OHCQ surveyor found that the facility took your report seriously and reported the alleged abuse to the Ombudsman, the resident's physician, the Director of Nurses, the family and the Montgomery County Police Department. The police conducted an investigation and spoke with the victim who denied the incident occurred. The medical staff examined the patient and did not find evidence of any injury. The surveyor reviewed the reports and other documents and found the facility acted appropriately following all regulations in regard to the allegations. The police did not pursue a criminal case against any staff after their investigation.

OHCQ received your complaint (MD00157343) against Manor Care Potomac on August 20, 2020, regarding the care you received at this facility in March of 2019. OHCQ's investigation cited two deficiencies relating to your care that included a failure to follow the physicians' order. The facility was required to file a plan of correction, which was reviewed and accepted by the surveyor. A follow-up survey was conducted on October 9, 2020, that determined the plan of correction had been implemented. You were notified of the findings of the complaint investigation at the time of the survey.

Lastly, you filed a complaint (MD00158015) against Manor Care Potomac on September 14, 2020, relating to billing issues. OHCQ's investigation was unable to substantiate this complaint.

As explained in the letter sent to you from OHCQ Executive Director, Dr. Patricia Nay, on December 14 2020 (attached), a review was made of the complaints you filed. OHCQ's response to your complaints were conducted timely and in accordance with the procedures of the Centers for Medicare and Medicaid

Services. OHCQ staff have communicated to you about these investigations on numerous occasions, both by phone and email. OHCQ's investigation of the complaints related to Potomac Valley and Manor Care Potomac are complete and no further action will be taken. However, OHCQ welcomes the opportunity to investigate any new complaints you may have about these or other health care facilities in the future.

If you would like to file a new complaint, you can file the complaint online by visiting <https://app.smartsheet.com/b/form/483176a200fc44858f42772adb9283d1> or by calling 1-877-402-8219.

Best regards,

Alexandra Baldi

Alexandra Baldi
Director of Operations
Office of Health Care Quality

Testimony of Seth B. Miller on SB 0825.pdf

Uploaded by: Seth Miller Miller

Position: UNF

Madam Chair and Committee:

Thank you for your service.

I'm Seth Miller. I oppose this bill.

I was in an accident. Due to treatment and complications, I was in a few places. My experiences are not unique. That I can testify is. I made complaints with the Office of Healthcare Quality. One complaint was investigated by Montgomery County contractors. The result deadly. Another complaint was investigated by OHCQ professionals, the result better.

At one place, a nurse chose not to wash a surgical wound, which became infected and reinfected multiple times.

The second place was Potomac Valley Nursing and Wellness. It was a dump. They renovated. My first night, I was in a room with three other men. One got up and battered a paraplegic. Without full use of three of my limbs, I could not help. It could've been me. The two were separated. The nurse on duty would not call the police. I told her she would call the police or I would call the state. Police report attached. The next night my roommate was slapped by a staff member. I called the police with my iPhone.

The Director of nurses and the patient's physician found no evidence of physical abuse. See attached. They get their pay from that place. Had investigators interviewed Brian they would have seen his face was bruised the way I saw it was bruised when I discharged a month later. They claim to have interviewed all relevant witnesses. I was not interviewed. PV botched my discharge. The nurse surveyor said I told the intake worker things I never said about discharge.

If they listened to me, the staff would've got it together. The Washington Post reports OHCQ assessed a fine due to preventable Covid deaths. Staff chose not to isolate known positives and accept known negatives. 10 accepted negative contracted Covid. Three died. A reporter asked contractors how they verify that facilities have the required Personal Protective Equipment. A contractor said, "We just take their word for it."

I made a complaint against the first facility where my wound was not washed asking for a professional investigator not a local joker. A violation was assessed.

When I complained to the Secretary of Health, she delegated to the office of healthcare quality to investigate themselves. I complained. The deputy secretary was boxed in. I do not remember a thing from the night of the accident. Brian being attacked plays in my head like a broken record. The idea that

they have to get the approval from the secretary of health is laughable. Look at this nasty letter. Thank you.

HFAM Letter of Information SB 825.pdf

Uploaded by: Joseph DeMattos

Position: INFO



March 1, 2024

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 East Miller Senate Office Building
Annapolis, MD 21401

Re: Letter of Information – Senate Bill 825 - Health Facilities – Delegation of Inspection Authority – Related Institutions and Nursing Homes

Dear Chair Beidle and Members of the Senate Finance Committee:

On behalf of the members of the Health Facilities Association of Maryland (HFAM), we appreciate all that you do for Marylanders across the state. We are writing to support the intention of and provide additional context regarding Senate Bill 825– Health Facilities – Delegation of Inspection Authority – Related Institutions and Nursing Homes.

As you may know, HFAM represents skilled nursing centers and assisted living communities in Maryland, as well as associate businesses that offer products and services to healthcare providers. Our members provide services and employ individuals in nearly every jurisdiction of the state. HFAM is affiliated with the American Health Care Association/National Center for Assisted Living (AHCA/NCAL), which is the largest association in the United States representing long-term and post-acute care providers.

There are state and federal annual surveys, complaint surveys, and other types of surveys required by state and federal law. During the pandemic, infectious disease inspections were conducted in Maryland nursing homes regularly and often, subject to federal direction. Also, per federal direction, annual inspections did not occur during the height of the pandemic.

In Maryland and many states across the nation, annual inspections of nursing homes are backlogged. The backlog is frustrating to all. Once inspections do occur, they often take weeks and result in an increased number of deficiencies due to the lapse in time since the last inspection. The increased deficiencies result in repressed Five-Star Ratings of nursing homes by the Centers for Medicare and Medicaid Services (CMS). And, most important of all, these weeks-long surveys are a detriment to staff focused on providing quality care to residents and patients.

While again, these inspection delays are a national problem, according to year-end 2023 data from CMS, only 97 nursing homes in Maryland have received their annual survey since the beginning of 2021 and only 63 facilities have been surveyed since the beginning of 2022.

Regarding Senate Bill 825, we would like to express concern about the risk of duplicative surveys since the legislation refers to state licensing inspections. This legislation requires the Secretary of Health, on request of a unit of local government, to delegate to the unit of local government the authority to inspect and conduct site visits and full surveys of related institutions and nursing homes; and requires related institutions and nursing homes to report certain information to a unit of local government if the Secretary has delegated inspection authority.

It is currently unclear whether the Office of Health Care Quality (OHCQ) would still need to do federal surveys. There are also concerns with SB 825 concerning local, state, and federal inspections being duplicative, and we oppose local fines that could be imposed by local, state, or federal governments for the same or related deficiencies.

Nursing home inspections are critical to ensuring that residents and patients are receiving safe, quality care in accordance with state and federal regulations.

In the past, the Maryland Department of Health (MDH) contracted with Montgomery County to conduct nursing home inspections. The Memorandum of Understanding (MOU) between MDH and Montgomery County was clear relative to the issues of duplicative inspections and fines. That MOU has expired and has not been renewed. We humbly propose that the best way forward is for MDH to seek and execute such an MOU again with Montgomery County.

Regular and appropriate nursing home inspections are critical to ensuring the safety and well-being of residents, patients, and staff. We want to ensure that inspections are done regularly and promptly per state and federal requirements. At the same time, we want to avoid duplicative inspections that are overly burdensome on both regulators and providers of care to Marylanders in need.

We hope that this information has been helpful. Again, thank you for all that you do. We look forward to our continued work together to protect quality care for Marylanders in need.

Respectfully submitted,

Joseph DeMattos, MA
President and CEO
(410) 290-5132