## Layoffs leave New York City-area nursing homes unprepared as the pandemic intensifies

Erik Schreiber 26 November 2020

As the daily numbers of new coronavirus infections surpass their springtime highs, nursing homes in New York City and in the broader tri-state area are cutting staff. The Hebrew Home in the Riverdale neighborhood of the Bronx, one of the biggest facilities in the state, laid off 56 workers during the first week of November. A reason given for the layoffs is that 124 of the home's residents had died during the spring. A decline in elective surgeries has also reduced the number of patients who come to the facility to recover.

Clove Lakes Health Care and Rehabilitation Center in Staten Island was among the worst affected facilities in New York City during the pandemic's previous peak. In a single month, 40 of the home's residents died. Now, as the pandemic resurges in the New York City area, Clove Lakes has laid off more than 40 workers. The remaining employees worry that they could lose their jobs as well because of the continuing economic crisis.

The situation at the Hebrew Home and Clove Lakes reflects regional and national trends. By May 20, the vacancy rate in New York's nursing homes had increased from 8 percent to 21 percent. In neighboring New Jersey, which was another hot spot during the peak of the pandemic, about 33 percent of nursing home beds are unoccupied. Before the pandemic began, only 18 percent of beds were vacant. Many families are avoiding nursing homes now because they allowed so many residents to become infected and die during the spring. Owners have used the reduced occupancy rates to justify laying off workers.

Gloria Duquette, a nurse in Connecticut, continued working at both of her jobs during the height of the pandemic despite her anxiety about getting sick. She sometimes worked 80 or more hours per week. Once the number of vacant beds increased and fewer patients came to the facilities for rehabilitation, her employers sharply cut her hours. "I feel like we were used," she told the *Connecticut Mirror*. "Nobody cares about us."

Even considering the lower occupancy rates, these nursing homes are understaffed, according to workers. An industry survey conducted in mid-November reveals that staffing is a major concern for most nonprofit providers of services to the aging. Approximately 73 percent of respondents have difficulty

finding enough staff to cover scheduled shifts, according to the survey. In addition, 71 percent of providers are having difficulty recruiting new workers, and 65 percent have problems covering for workers who are on sick leave. Survey respondents included nursing homes, assisted living facilities, home health providers, and hospice and affordable housing communities.

As of Nov. 24, the number of new coronavirus cases in the United States was 169,190, and the number of deaths had reached 259,976. The Institute for Health Metrics and Evaluation predicts that more than 170,000 additional deaths could occur before Feb. 1. In this context, staff cuts at nursing homes will jeopardize care for their remaining residents and create a horrific toll of preventable deaths.

Across the country, nursing homes are in dire financial straits. In April, an industry-commissioned analysis delivered to Secretary of Health and Human Services Alex Azar estimated that the senior living industry is facing costs of between \$40 billion and \$57 billion during the next year. To maintain profits for their owners and shareholders, nursing homes will seek to reduce costs through merciless staff cuts. Workers will be thrust into the ranks of the unemployed, and facilities will be ill equipped to prevent or mitigate the forecast rise in infections and deaths.

A survey conducted in August by the American Health Care Association and the National Center for Assisted Living found that 97 percent of nursing homes have lost revenue because of the pandemic. At the same time, they have faced significant new costs, most of which have resulted from the need for personal protective equipment (PPE), staffing and testing. Approximately 55 percent of nursing homes are operating at a loss. A remarkable 72 percent reported that they would not be able to continue operations for another year under current conditions, and 40 percent said that they would not be able to stay open for six months.

During the spring, nursing homes were sites of mass death. By mid-June, there were more than 262,000 coronavirus cases at nursing homes, according to a report in the *Wall Street Journal*. More than 59,000 deaths had occurred at these facilities. In April, police infamously found 17 bodies piled up in a morgue at the Andover Subacute Rehabilitation Center in

New Jersey. The collective disaster at the country's nursing homes was the predictable result of managements' decision to prioritize profits over residents' health. Nursing homes did not adequately test residents or staff for the virus, obtain sufficient stockpiles of PPE, maintain adequate staffing levels or even maintain hygienic conditions at their facilities.

The number of cases began to decline during the summer, and some nursing homes were declared COVID-19-free. But outbreaks continued into the fall. In the four weeks ending on Oct. 11, New York recorded 713 confirmed and suspected coronavirus cases in the state's nursing homes—nearly double the 379 cases during the previous four weeks. Three of the five nursing homes in Allegany County, New York, have had COVID-19 outbreaks this fall. To date, they have had 178 cases and 16 deaths. As of Nov. 25, New York's nursing homes had 14,468 confirmed cases and 4,796 deaths, according to the Centers for Medicare and Medicaid Services (CMS).

In New Jersey, at least 102 nursing homes had new outbreaks this summer or fall. This number includes 11 facilities where 18 patients and two workers have died. As of Nov. 17, 241 long-term care facilities continued to have active coronavirus outbreaks, according to the New Jersey Department of Health. As of Nov. 25, New Jersey's nursing homes had 13,391 confirmed cases and 4,230 deaths, according to CMS.

Although rapid point-of-care coronavirus testing is available to nursing homes, a lack of guidance on when and how to use it, along with concerns about its accuracy, have all but prevented its adoption. The average wait for test results is three or more days.

Throughout the pandemic, state officials have shielded nursing homes from prosecution. In March, New York Governor Andrew Cuomo had aides add a provision to the state's budget that granted nursing homes immunity to lawsuits over their failure to protect residents. New Jersey Governor Phil Murphy followed suit in April by granting nursing homes immunity from civil lawsuits and raising the bar for what could be considered negligence. Connecticut Governor Ned Lamont and other governors across the country soon took similar steps. These three governors are Democrats, which illustrates the bipartisan character of the assault on the elderly. Both parties have shown equal zeal when the interests of business owners need protection. The interests of the elderly and their family members, meanwhile, are actively attacked.

Public outrage has grown with each new report of deplorable conditions and deaths, and state leaders occasionally have been compelled to make a show of addressing their constituents' grievances. In October, for example, Murphy removed Major General Jemal Beale as the leader of New Jersey's Department of Military and Veterans Affairs, which oversees the state's three veterans' homes. At least 143 residents of the homes in Paramus and Menlo Park have died during the pandemic, and state officials estimate that the true toll could be as high as 190.

Murphy also signed a bill limiting the number of residents for

whom a nursing assistant can be responsible during the day, evening and night shifts, but the bill does not require nursing homes to maintain appropriate staffing levels.

Rather than fighting for better staffing and nurse-to-patient ratios, the unions have deliberately sabotaged nurses' struggles and acted as hatchet men for the hospital administrators. The Service Employees International Union Healthcare Illinois-Indiana (SEIU HCII) provided an egregious example of this treachery during the spring. Nursing home workers across Illinois voted to strike on April 25. Their demands for PPE, hazard pay, increased staffing and other necessities had not been met, and their contract was about to expire. But in the meantime, the SEIU HCII conducted secret negotiations with the Illinois Association of Health Care Facilities and, at the eleventh hour, called off the strike. The union gave the health care facilities everything they wanted and imposed a concessionary contract on nearly 10,000 nursing home workers at 64 facilities.

More recently, the SEIU shut down an October strike by workers at a Detroit-area nursing home and is currently isolating hundreds of Chicago-area nursing home workers who are on strike.

Because they subordinate all other considerations, including public health, to profit, nursing homes across the country are entering the new wave of the pandemic unprepared. Capitalism is incapable of caring for the elderly and sick. The only way to secure adequate staffing for nursing homes, better pay and conditions for nursing home workers and high-quality health care for the elderly is through ending for-profit medicine. This means a break with the two corporate-controlled political parties, the Democrats and Republicans, and the fight for socialism.

The World Socialist Web Site and the Socialist Equality Party call on health care workers to organize rank-and-file committees independent of the unions to monitor conditions at their workplaces, including safe staffing levels. The World Socialist Web Site's Health Care Workers Newsletter will assist nurses in this struggle. Contact us at healthcare@wsws.org to get involved.



To contact the WSWS and the Socialist Equality Party visit:

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