

ANDREW M. CUOMO Governor HOWARD A. ZUCKER, M.D., J.D. Commissioner

SALLY DRESLIN, M.S., R.N.Executive Deputy Commissioner

June 18, 2019

CERTIFIED MAIL/RETURN RECEIPT

Paul Bibuld, Esq. 221-12 Hartland Avenue Queens Village, New York 11427

William B. O'Hara, Esq., CFO Chapin Home for the Aging 165-01 Chapin Parkway Jamaica, New York 11432 Raul Tabora, Esq. Bond Schoeneck & King 600 Third Avenue, 22nd Floor New York, New York 10016

RE: In the Matter of

- Discharge Appeal

Dear Parties:

Enclosed please find the Decision After Hearing in the above referenced matter. This Decision is final and binding.

The party who did not prevail in this hearing may appeal to the courts pursuant to the provisions of Article 78 of the Civil Practice Law and Rules. If the party wishes to appeal this decision it may seek advice from the legal resources available (e.g. their attorney, the County Bar Association, Legal Aid, etc.). Such an appeal must be commenced within four (4) months from the date of this Decision.

Sincerely,

James F. Horan

Chief Administrative Law Judge

Bureau of Adjudication

Janus F. Horan / cng

JFH: cmg Enclosure

STATE OF NEW YORK DEPARTMENT OF HEALTH

In the Matter of an Appeal pursuant to 10 NYCRR §415.3 by

Appellant,

DECISION

from a determination by

Chapin Home for the Aging,

Respondent,

to transfer him from a residential health care facility.

Hearing Before:

Ann H. Gayle

Administrative Law Judge

Held at:

Chapin Home for the Aging 165-01 Chapin Parkway Jamaica, New York 11432

Hearing Date:

April 18, 2019

The record closed on May 30, 2019

Parties:

Chapin Home for the Aging

By: Raul Tabora, Esq.

Bond Schoeneck & King

By:

Resident's

Representative

Pursuant to Public Health Law ("PHL") §2801 and Title 10 of the Official Compilation of Codes, Rules and Regulations of the State of New York ("10 NYCRR") §415.2(k), a residential health care facility or nursing home such as Chapin Home for the Aging ("Respondent" or "Facility") is a residential facility providing nursing care to sick, invalid, infirm, disabled, or convalescent persons who need regular nursing services or other professional services but who do not need the services of a general hospital. Transfer and discharge rights of nursing home residents are set forth at 10 NYCRR §415.3.

Respondent determined to discharge Appellant from care and treatment in its nursing home pursuant to 10 NYCRR §415.3(h). §415.3(h)(1)(i)(a)(3), (vi) and (vii) read in pertinent part:

- (h) Transfer and discharge rights.
 - (1) With regard to the transfer or discharge of residents, the facility shall:
 - (i) permit each resident to remain in the facility, and not transfer or discharge the resident from the facility unless such transfer or discharge is made in recognition of the resident's rights to receive considerate and respectful care, to receive necessary care and services, and to participate in the development of the comprehensive care plan and in recognition of the rights of other residents in the facility.
 - (a) The resident may be transferred only when the interdisciplinary care team, in consultation with the resident or the resident's designated representative, determines that:
 - (3) the safety of individuals in the facility is endangered.
 - (vi) provide sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility in the form of a discharge plan which addresses the medical needs of the resident and how these will be met after discharge, and provide a discharge summary pursuant to section 415.11, subdivision (d) of this Title; and



(vii) permit the resident, their legal representative or health care agent the opportunity to participate in deciding where the resident will reside after discharge from the facility.

Appellant's on behalf of Appellant, appealed the discharge determination to the New York State Department of Health. Pursuant to §415.3(h)(2)(iii)(b) the Facility has the burden of proving that the transfer was necessary and the discharge plan is appropriate.

A transcript (pages 1-357) of this hearing was made by a court reporting service.

Appellant's represented Appellant¹ and testified for Appellant. The following Facility representatives testified for Respondent: Certified Nurse Assistant ("CNA") Arlene Thorpe,

Director of Nursing Vernita Ford, R.N., and Medical Director Nodar Janas, M.D. Respondent's Chief Financial Officer William B. O'Hara, Esq., Board Member Janet Unger, and Administrator Jennifer McManaman were present at the hearing.

The following documents were accepted into evidence by the Administrative Law Judge ("ALJ") as ALJ, Facility, and Resident Exhibits:

ALJ:

I: Notice of Hearing with Notice of Transfer/Discharge attached

Facility:

- 1: Discharge summary
- 2: Statement of Arlene Thorpe
- 3: Two photographs
- 4: Court document
- 5: Thumb drive/video surveillance
- 6: consult

Resident:

- A: Hospital transfer form
- B: Hospital visit form (morning visit)
- C: Hospital visit form (afternoon visit)
- D: Face sheet
- E: Physician order report
- F: Continuity of care document
- H: Transfer/Discharge Notice and copy of envelope

¹ Appellant's \square /representative waived Appellant's right to be present at the hearing (T 7).

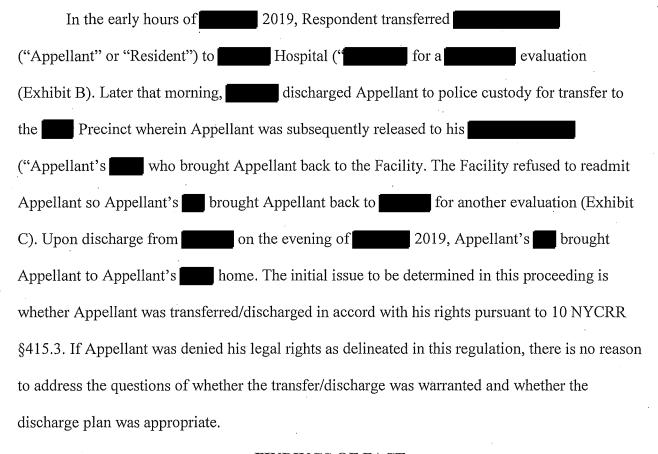


Q: Diagram of Resident's room

R: Investigation summary and witness statements

Facility Exhibit 7 and Resident Exhibits G and I through P were marked for identification but not accepted into evidence by the ALJ; these documents remained with Respondent and Appellant, respectively.

STATEMENT OF ISSUES



FINDINGS OF FACT

Citations in parentheses refer to exhibits ("Ex") and testimony of witnesses in the transcript ("T") found persuasive in arriving at a particular finding.

- 1. Respondent, Chapin Home for the Aging, is a residential health care facility located in New York. (Ex I)
- 2. Appellant, age was admitted to the Facility from

Medical Center, 2019, for short term rehabilitation services. Prior to his hospitalization, Appellant lived in in his own home independently with supportive services. (Ex 1; Ex D; T 279-280) 2019, CNA Thorpe found Appellant at the 3. At approximately 12:45 a.m. on bedside of Appellant's roommate ("Mr. "). Mr. was his bedsheets were Appellant was holding a from a wheelchair "). When Ms. Thorpe yelled words to the effect of what are you doing, Appellant who was holding the of him began charging toward her. Ms. Thorpe backed out of the room screaming for help. Other CNAs, nurses, and a security guard responded and attempted to calm Appellant and retrieve the from him. 911 was called, and emergency medical technicians ("EMT") and police officers responded. Mr. was brought to Appellant gave the to the police officers who, together with EMT, brought Appellant to evaluation. Appellant, upon being cleared medically and for discharge was released to police custody. (Ex 2; Ex 3; Ex 5; Ex B; Ex R; T 75-76, 78-80, 91, 117-118, 121-123, 127-128, 133-134, 146-147, 168, 182-183, 221-224, 226-227, 299-301) 4. Police officers brought Appellant directly from to the precinct where he was charged with misdemeanors and a violation, given a desk appearance date of 2019, and released to Appellant's who brought Appellant to the Facility. The Facility arranged for its medical director, Dr. Janas, to speak with Appellant's by telephone, Dr. Janas informed Appellant's that Respondent would not accept Appellant back into the Facility due to act toward Mr. . Dr. Janas gave Appellant's three options: bring Appellant back to the police precinct to ask them what can be done in this situation; bring Appellant back to Appellant's home where he could resume living independently with services;

or bring Appellant back to for consultation with social workers regarding resources available for this situation. (Ex 4; T 231-232, 315-316, 327-331) 5. Appellant's brought Appellant back to on the afternoon of evaluated Appellant and released him to Appellant's in the evening of that same day. Appellant's brought Appellant to Appellant's home. (Ex C; T 186-187, 331, 334) By Notice of Transfer/Discharge ("Discharge Notice") dated 2019, Respondent 6. determined to discharge Appellant on the grounds that the safety of individuals in the facility is endangered; the discharge location is "Home with effective 2019^2 . (Ex H) 7. 2019, Appellant's brought Appellant to Hospital where he was admitted for in-patient medical treatment. In 2019, Appellant was discharged from l. Appellant was scheduled to be discharged from 2019, due to his completion of shorton term rehabilitation and because there were no long-term care beds available at time. Appellant's was planning to visit other nursing homes to which Appellant could potentially be transferred from (T 334-336, 349-350)

DISCUSSION

10 NYCRR §415.3(h)(1)(iii)(a) provides that before it transfers or discharges a resident, the facility shall notify the resident and designated representative of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand. Furthermore, §415.3(h)(1) requires the Facility to: permit the Resident to participate in the development of the comprehensive care plan (§415.3(h)(1)(i)); provide sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility by having a discharge plan which addresses the medical needs of the resident and how these will be met after discharge

 $^{^2}$ The envelope containing the Discharge Notice was posted and post-marked 2019. (Ex H)



(§415.3(h)(1)(vi)); and permit the resident, their legal representative or health care agent the opportunity to participate in deciding where the resident will reside after discharge from the facility (§415.3(h)(1)(vii)). The March 20, 2019 notation by Dr. Janas in the "Discharge Summary Medical" note that "Discharge planning was ongoing" (Ex 1) does not satisfy the requirements of the aforesaid regulation, particularly since there was no testimony from a Facility social worker to support this claim, and Appellant's testified that not only was there no discharge plan or planning, but that prior to the events of 2019, he and Respondent had actually discussed the possibility of Appellant remaining at the Facility for long term care. Nor does the 2019 telephone conversation wherein Dr. Janas gave Appellant's "three options" for Appellant following Respondent's refusal to readmit Appellant when he was discharged and released from and police custody. See Finding of Fact #4.

CONCLUSION

I find that Appellant was denied his legal rights pursuant to §415.3(h); as such, the questions of whether the transfer/discharge was warranted and whether the discharge plan was appropriate will not be addressed. Respondent must readmit Appellant to the first available semi-private bed before it admits any other resident (§415.3(h)(2)(i)(d). Appellant, however, is not required to accept such readmission particularly if Appellant's believes that Appellant is currently residing in a setting in which he is adapting and benefitting from the services provided, or for any other reason.

DECISION

The appeal by Appellant is GRANTED.

Respondent must readmit Appellant to its Facility before it admits any other resident provided that Appellant wishes to return to the Facility. Appellant/Appellant's must notify Respondent of its intent on or before 2019.

This Decision may be appealed to a court of competent jurisdiction pursuant to Article 78 of the New York Civil Practice Law and Rules (CPLR).

Dated: New York, New York June 17, 2019

Ann H. Gayle
Administrative Law Judge

TO:

Poul Tabora Esa

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