

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

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

June 11, 2018

CERTIFIED MAIL/RETURN RECEIPT

Angela C. Bellizzi, Esq. General Counsel Peninsula Nursing and Rehabilitation Center 50-15 Beach Channel Drive Far Rockaway, New York 11691

Peninsula Nursing and Rehabilitation Center 50-15 Beach Channel Drive Far Rockaway, New York 11691

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

JFH: cac Enclosure STATE OF NEW YORK : DEPARTMENT OF HEALTH

In the Matter of an Appeal, pursuant to 10 NYCRR \S 415.3, by

Appellant,

from a determination by

PENINSULA NURSING AND REHABILITATION CENTER

Respondent,

to discharge him from a residential health : care facility.

Hearing Before:

Matthew C. Hall

Administrative Law Judge

Held at:

Peninsula Nursing and Rehabilitation Center 50-15 Beach Channel Drive Far Rockaway, New York 11691

DECISION

Hearing Date:

May 11, 2018

Parties:

Peninsula Nursing and Rehabilitation Center

By: Angela C. Bellizzi, Esq.

Pro Se

JURISDICTION

Peninsula Nursing and Rehabilitation Center (the Facility), a residential care facility subject to Article 28 of the New York Public Health Law, determined to discharge (the Appellant) from the Facility. The Appellant appealed the discharge determination to the New York State Department of Health (the Department) pursuant to 10 New York Codes Rules, and Regulations (NYCRR) § 415.3(h).

HEARING RECORD

ALJ Exhibits: I - Notice of Hearing and attached Facility

Discharge Notice

Facility Exhibits: 1 - Facility Discharge Notice 18)

1A- Amended Discharge Notice 18)

2 - Progress Notes 18 thru (18)

3 - Investigation Summary 18)

4 - Progress Notes (/17 thru /18)

5 - Progress Notes (18) 6 - Video (18)

Facility Witnesses: Doctor Janaki Kanumilli - Attending Physician

Stephanie Pierre - R.N., Director of Nursing

Monique Cunningham - Social Worker

Jillian Bosinius - Director of Social Work

Appellant's Witness: Appellant Testified on his own behalf

ISSUES

Has the Facility established that the determination to discharge the Appellant is correct and that its discharge plan is appropriate?

FINDINGS OF FACT

Citations in parentheses refer to testimony ("T") of witnesses and exhibits ("Ex") found persuasive in arriving at a particular finding. Conflicting evidence, if any, was considered and rejected in favor of cited evidence.

- 1. The Appellant is a year-old man who was admitted to the Facility on 2013. (Ex 3)
 - 2. He was admitted with diagnoses of

(Ex 3)

3. By notice dated 2018, the Facility determined to discharge the Appellant on 2018 because "the health and/or safety of individuals in the facility who would otherwise be endangered," due to the Appellant's "use and possession of " (Ex 1) The Facility subsequently

amended the discharge notice to note that the resident's "health has improved sufficiently" so that he "no longer need(s) the services provided," by the Facility. (Ex 1A)

4. The Facility determined to discharge the Appellant to the Shelter, a shelter located at

(Ex 1A)

5. On 2017, the Appellant was found unresponsive on the floor of his bedroom. Emergency Medical

Services (EMS) was called and the Appellant was sent to the hospital. He was administered given

for x 3, Ex 4).

6. Again, on 2018, at the Appellant was found unresponsive on the floor of his bedroom by Facility nursing staff. He was administered and EMS was again called. Fearing the Appellant had the nursing staff administered used for emergency treatment of suspected at . and again at

The Appellant did not respond. EMS then arrived and administered to the Appellant intravenously. The Appellant immediately regained consciousness. He was transported to

Hospital and shortly thereafter the Hospital reported to

the Facility that the Appellant's

report was

for (Ex 3, T Pierre)

- 7. During his stay, the Appellant's health has improved significantly. He regularly refuses treatment and is noncompliant with his plan of care. His most recent BIMs score was
- 15. He is independent in his Activities of Daily Living (ADLs). He has multiple friends in the community and frequently goes out on pass with them. (T Kanumilli, Appellant)
- 8. It is the professional opinion of Appellant's caregivers at the Facility, including the Facility's Attending Physician, that discharge to the community, including a shelter, is appropriate for Appellant. (T Kanumilli, Cunningham, Bosinius)

APPLICABLE LAW

A residential health care facility (also referred to in the Department of Health Rules and Regulations as a nursing home) is a facility which provides regular nursing, medical, rehabilitative, and professional services to residents who do not require hospitalization. Public Health Law §§ 2801(2)(3); 10 NYCRR § 415.2(k).

A resident may only be discharged pursuant to specific provisions of the Department of Health Rules and Regulations (10 NYCRR 415.3[h][1]).

The Facility alleged that the Resident's discharge is permissible pursuant to 10 NYCRR §§ 415(h)(i)(a)(3) and (4), which state:

The safety (and health) of individuals in the Facility (are) endangered.

The Facility also alleged that the Resident's discharge is permissible pursuant to 10 NYCRR § 415(h)(1)(i)(a)(2), which states:

The transfer or discharge is appropriate because the resident's health has improved sufficiently so the resident no longer needs the services provided by the Facility.

Title 10 NYCRR Under the hearing procedures at §415.3(h)(2)(ii), the Facility bears the burden to prove a discharge necessary and appropriate. Under the New York State Administrative Procedures Act (SAPA) § 306(1), a decision in an administrative proceeding must be in accordance with substantial evidence. Substantial evidence means such relevant proof as a reasonable mind may accept as adequate to support conclusion or fact; less than preponderance of evidence, but more than mere surmise, conjecture or speculation and constituting a rational

basis for decision, Stoker v. Tarantino, 101 A.D.2d 651, 475 N.Y.S.2d 562 (3rd Dept. 1984), appeal dismissed 63 N.Y.2d 649.

DISCUSSION

Reasons for Discharge

Regarding whether the safety and health of individuals in the Facility are endangered:

The Appellant was admitted to the Facility on 2013, with multiple diagnoses including

As described above in Findings of Fact 5 and 6, on two separate occasions, the Appellant

Each time, the amount of taken by the Appellant was so great that nursing and emergency staff had to administer and in order to him. Each time, he was sent to the hospital and his reports were for

Dr. Janaki Kanumilli (Kanumilli), the Facility's Attending Physician testified that the safety of the individuals at the Facility was endangered by the Appellant's drug usage. When asked why this was a danger, Kanumilli stated, "Because where is he

getting his drugs from? Somebody is providing drugs for him." She continued, "It is harmful because they can give it to other residents too." (T Kanumilli)

clearly, a resident who habitually uses to the extent that it causes him to should be considered a danger, not only to himself, but to other residents and medical staff at the Facility. Overall, the Appellant's abuse within the Facility creates an unsafe environment for all who are at the Facility.

The Appellant testified on his own behalf and denied abusing

The Appellant was asked to explain how his

reports, in both instances, indicated an excess of in his

system. The Appellant replied that this situation is "normal and that he didn't take anything." He also stated that "he always

" (T. Cunningham)

Accordingly, the Facility has proven that the safety of other residents at the Facility is endangered and its determination to discharge the Appellant is correct.

Regarding whether the resident's health improved sufficiently and the resident no longer require(s) the services of a skilled nursing facility:

During his stay, the Appellant's health has improved significantly. He regularly refuses treatment and is noncompliant with his plan of care. He is independent in his ADLs. He has multiple friends in the community and frequently goes out on pass with them. (T Kanumilli, Appellant)

When asked if the Appellant's needs could be met in the community, Dr. Kanumilli stated, "Yea, if he had help." When asked if the help he needed could be met on an outpatient basis in the community, she responded, "Yes." (T. Kanumilli). Indeed, the Facility's caregivers felt that the Appellant was ready to be "safely discharged to the community" prior to the two incidents described above. Due to these incidents, however, his discharge was delayed. When asked directly, the Appellant testified that he has "no need for a skilled nursing facility." (T Appellant)

Accordingly, the Facility has proven that the resident's health improved sufficiently and the resident no longer require(s) the services of a skilled nursing facility.

Discharge Location

Dr. Kanumilli testified that she felt that the preferred location of discharge for the Appellant would be at an inpatient care facility that could focus on his

" before he is discharged to the community. (T Kanumilli). Facility has put considerable efforts into finding another discharge location for the Appellant, but his behavior has impeded the Facility's efforts. Prior to the Appellant's the Facility assisted the Appellant with an second application to the if approved, the Appellant could be offered a Through private apartment where he would live independently; application is still pending. The Appellant is encouraged to continue with this application process. However, due to his would no longer be additional services through available. (T Cunningham)

Accordingly, the Facility has proven that its plan to discharge the Appellant to a shelter is appropriate.

CONCLUSION

The Facility has proven that the Appellant is a danger to the safety and health of individuals in the Facility, and that the Appellant is no longer in need of skilled nursing care. He is therefore an appropriate candidate for discharge. The Appellant contended that he should not be discharged at all and would like to remain at the Facility. However, his improved health coupled

with his show that he is no longer an appropriate fit at the Facility, and that discharge to a shelter is appropriate.

DECISION

Peninsula Nursing and Rehabilitation Center has established that its determination to discharge the Appellant was correct, and that transfer to a shelter is appropriate.

- 1. Peninsula Nursing and Rehabilitation Center is authorized to discharge the Appellant in accordance with its discharge plan on or after 2018.
- 2. This decision may be appealed to a court of competent jurisdiction pursuant to Article 78 of the New York Civil Practice Law and Rules.

DATED: Albany, New York June 11, 2018

MATTHEW C. HALL

Administrative Law Judge