

Testimony to the Senate Finance Committee
“A National Tragedy: COVID-19 in the Nation’s Nursing Homes”
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Thank you to Chairman Wyden, Ranking Member Crapo, and members of the Senate Finance Committee for inviting me to speak today. My name is Adelina Ramos and I’m a CNA at a nursing home in Greenville, Rhode Island. I am a proud immigrant to this country, having moved here from Cape Verde Islands off the western coast of Africa when I was child.

At my facility, I work with Alzheimer's patients. To be trusted by families in my community to care for their loved ones is a great privilege and honor. But over the past year, my days have been filled with fear and sadness.

I don’t think anyone in my small Rhode Island community thought COVID-19 would arrive at our doorstep. But it did and nursing homes were not prepared. When COVID first hit, we lost over 20 plus residents in just over a month. A CNA at my facility died, too, and she was one of the first nursing home workers to die of COVID in Rhode Island.

As more and more people in my facility tested positive, we confronted management to let them know we didn’t have the right PPE — and what we had wasn’t enough to last — or training to keep our residents safe and prevent the virus from spreading in our facility.

We were extremely short-staffed, too. At one point I was caring for 26 critically ill residents with only the help of one other CNA, a nurse and a housekeeper. My residents couldn't eat or drink without help. They couldn’t move or get out of bed by themselves. They all required oxygen changes every 15 minutes. And because they had Alzheimer’s, sometimes they would get very scared or angry.

It was horrifying. But management didn’t seem to be too concerned when my co-workers and I told them what was going on. We pleaded for more staff on each shift, but they said they couldn’t find anyone. And so our residents and staff kept getting sick. They kept dying.

On Mother's Day, I realized I couldn't smell my ginger tea. I thought it was because of my mask. I knew that was one of the symptoms of COVID, but I wasn't experiencing anything else. When the National Guard arrived to test people a few weeks later, I got the news I had been dreading for so long: I was COVID positive. I was asymptomatic, and so I was unknowingly putting those around me at risk — at work and at home.

My in-laws live with us, and I serve as their caregiver. They are both in their late sixties and have pre-existing conditions that put them at high-risk of contracting a serious case of COVID-19. I was worried about infecting my husband, because then he wouldn't be able to see his parents.

As a mother, I never thought I'd have to tell my 15-year-old son to stay away from me. Don't touch me. Don't hug me. Don't get too close. I knew I would never be able to forgive myself if I passed this deadly virus on to my child. So I did what I had to do to keep him safe, even though it broke my heart into a million little pieces.

Today, I'm COVID-free and vaccinated, and I can finally hold my son close and care for my in-laws again. Things are looking up, but the physical and emotional trauma this pandemic caused can't be cured with a shot in the arm.

When I started working at a nursing home, I understood I'd have residents pass away. But when that happens, our job is to make sure they're comfortable, cared for and surrounded by loved ones in their final moments. But because of the pandemic, family members couldn't come into our facility to be with their dying parents, grandparents, siblings, or friends. Normally, when someone passes away, the funeral home comes to our facility to handle the body. But it wasn't safe for funeral homes to enter our facility because they didn't have enough PPE. So we became the morticians and had to put bodies into body bags.

Despite my years of training and the love I have for my residents, there was nothing I could do to help them. Our residents felt so alone. Because we were dressed head to toe in protective gear, they couldn't tell who we were. They deserved so much better than what we were able to provide with so few staff and resources. As they took their final, difficult breath, I hope they knew that we tried our best. I hope they knew that we loved them like family. I hope they knew that we didn't mean to fail them.

Between April and June of last year, nursing homes in Rhode Island received over \$50 million dollars in state and federal funding in response to the COVID-19 crisis. That was on top of a federal stimulus payment of \$2,500 per nursing home bed plus \$50,000 per

facility — almost \$26 million.¹ Still, Rhode Island has one of the worst records in the nation for COVID-19-related nursing home deaths — 6 in 10 COVID-19 deaths were in long term care settings.² Where did all that money go? How was this allowed to happen?

But the pandemic didn't cause the issues we've faced — it only made them worse. Rhode island currently ranks 41st in the country for the average number of hours nursing home residents receive. The starting wage for Rhode Island nursing home workers like e is just \$12.34.³ I am fortunate that I am a member of a union. My co-workers and I were able to work together through our union to negotiate higher wages and pandemic pay. I felt like I at least had an ability to advocate for myself and my residents and shine a light on all the wrongs in our care system, which COVID-19 exposed in the most tragic and deadly way. It didn't have to be like this.

If you ask any CNA what their top issue is on the job, it's low wages, unsafe staffing and poor job quality. They are linked together. I feel a calling to do this work and care for others. But it is hard to do this job when you can't pay your bills, put dinner on the table or afford to take your child to the doctor. Some of us have to work two or three jobs, just to meet our basic needs. And all this is made harder by the fact that because of short staffing, we don't have the time to spend with residents when they need us.

One of my hardest days during COVID-19 was when one of my patients was slipping away and wanted me to sit at her bedside but I couldn't stay because there were twenty other residents who also needed me. This is the cycle we need to break.

Most nursing home workers are women and many of us are women of color and immigrants — just like me. Centuries of systemic racism and sexism have kept alive the false idea that care workers are unskilled, uneducated and just there to clean up. We've been denied a living wage and crucial benefits like affordable health insurance and paid time off, and too many of us don't have a union to advocate for ourselves and our residents.

I am doing my part with my union and my co-workers. I was scared to get the vaccine — many of us are, we have felt so disposable for so long that there is a lack of trust — we didn't want to be test subjects. But I did my research, I knew how important it was and how it would keep me, my family, and my residents safe. And now I educate others about my experience with the vaccine. It is why the union matters and the worker voices

¹ [Crossroads of Care](#): Repairing Rhode Island's Nursing Homes in the Wake of COVID-19

² <https://www.kff.org/coronavirus-covid-19/issue-brief/state-covid-19-data-and-policy-actions/>

³ <https://dlt.ri.gov/documents/pdf/lmi/oesnrcef.pdf>

matter — people in all communities need sources of information that feel like they have their best interest at heart.

Our country's COVID death toll is nearing 600,000. That's more than the populations of Baltimore, Atlanta, Miami and nearly three times the population of Rhode Island's capital city, Providence.

Though vaccination rates are going up, giving us all hope that soon, the infection rates will slow and the deaths will stop, the population of Americans in need of long term care is skyrocketing. This pandemic has shown us what happens when we're not prepared to meet the demands for care.

Every shift must be appropriately staffed so residents — our nation's parents, grandparents and loved ones with disabilities — can live with dignity and get the care they deserve and depend on. We still need PPE. We need paid time off and affordable healthcare. We need livable wages that allow us to provide for our families. And every nursing home worker must have a seat at the table to be able to negotiate a better life.

We refuse to be trapped in cycles of poverty and struggle to care for our own families. We refuse to continue on with the deadly status quo in this industry any longer. Change needs to happen NOW, and not just on the state level. It's why we must raise the minimum wage to at least \$15 and make sure workers have the ability to join a union to advocate for our own futures. Congress has the power to take action and raise the standards in all nursing homes in the U.S. so that everyone — no matter where they are from, where they live or what they do for a living — can access high quality long term care provided by a skilled, strong workforce that is respected, protected and paid.