Dear Roosevelt Island Residents,

As members of the Coler Community Advisory Board we work with the nursing facility administration to improve the well-being of the residents.

These days we hang on every word we hear or read in the media about pandemic statistics, flattening the curve, possible remedies and newly reported symptoms. There are two symptoms, however, that have not gotten adequate coverage. They are rumor and finger-pointing. And they are not just happening elsewhere; they are happening right here on Roosevelt Island.

We are all familiar with the Coler Rehabilitation and Nursing Care Center. Over the years, Coler relinquished its hospital designation and has remained a nursing facility. Coler houses a very vulnerable population suffering from chronic disease. A number of its nursing home residents have contracted COVID-19 and this outbreak has led to stories and accusations of mismanagement. Specifically:

- The COVID patients brought to the newly established acute-care Roosevelt Island Medical Center (RIMC) housed at Coler were allowed to mingle with the nursing home residents.
- The medical/nursing staff are spreading the virus by going from COVID patients to the nursing home population.
- Not enough is being done to isolate the nursing home residents with COVID.
- Lack of Personal Protective Equipment (PPE)

Nothing could be further from the truth.

RIMC was set up to help NYC Health + Hospitals acute care hospitals decompress the census to enable them to meet the demands of the influx of patients during this COVID crisis. RIMC is located in sections of the Coler building that were previously empty and unused. The facilities are completely separate and no RIMC patients come in contact with the nursing facility residents. RIMC has its own dedicated staff for its patients and does not share staff with Coler.

Coler has done everything possible to contain the virus. When a resident was diagnosed with or even suspected of having COVID, the resident and unit were placed immediately under quarantine. All activities off the individual units have been curtailed. All musical events, parties, celebrations and group get-togethers have been canceled. Restrictions on visitors are in place and all staff are required to wear masks. In addition, the facility is closely following the infection control and clinical guidelines mandated by the CDC, CMS and NYS Department of Health, which regulates almost every aspect of nursing home care and staffing.

Coler also maintains and has access to sufficient supplies of Personal Protective Equipment (PPE) and reports this information daily to NYS Department of Health.

A take-all-comers facility and a dedicated staff.

The members of the CAB are community residents, appointees, current residents and former residents who have a long-term relationship with the facility. We meet monthly with administration to discuss facility operations and resident issues. The officers are meeting more often with administration to discuss the current situation.
Gary Delamothe, Chairperson is a former resident who is active in the political and medical world. Gladys Dixon, the Vice Chair is a former Coler resident and a long time vocal activist for the residents in long term care and post-acute settings. Judith Berdy, Secretary has been on the Coler Community Advisory Board for years and is now the President of the Coler Auxiliary.

All the CAB members are deeply disturbed by the rumors and finger-pointing swirling around the Island.

Coler is an outstanding long-term care facility. Unlike private nursing homes, it takes all persons, regardless of their financial status and regardless of other challenging circumstances. Residents may often be without any family and dependent entirely upon the home for emotional support and affection. On the occasion when such a resident is discharged, that person is also dependent upon the facility for finding him/her housing and other support services. And needless to say, the facility is the resident’s family.

We have witnessed, first hand, the incredible dedication of the personnel. They go above and beyond to make residents comfortable, to establish a warm relationship with them, and to engage them in programming.

Perhaps the unwarranted criticism of Coler stems from our own deep-seated sensibilities concerning nursing homes. We think of the elderly, the vulnerable, even our own parents—and any rumored incident strikes a raw nerve.

Be assured that the care at Coler meets the highest standards. And it will continue to treat its residents with care and concern. When all this is over, one of the many lessons we may have learned from COVID is to verify our “information” before casting blame.

Sincerely yours,

Gary Delamothe
Chairperson

Gladys Dixon
Vice Chairperson

Judith Berdy
Secretary

Verna Fitzpatrick
Member

May 16, 2020