

Testimony of Tina Yeitz
Administrator, Eliza Huntington Memorial Home of Norwich, Inc.
Vice President, Connecticut Association of Residential Care Homes

Concerning

*Section 12 of H.B. No. 5020 AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET
RECOMMENDATIONS REGARDING PUBLIC HEALTH.*

Public Health Committee Public Hearing, March 6, 2020

Senator Abrams, Representative Steinberg, Senator Somers, Representative Petit, and Esteemed Members of the Public Health Committee, thank you for the opportunity to offer testimony regarding Section 12 of House Bill 5020- An Act Implementing the Governor's Budget Recommendations Regarding Public Health.

My name is Tina Yeitz and I am the Administrator at The Eliza Huntington Memorial Home of Norwich and the Vice President of the Connecticut Association of Residential Care Homes. Our home is a 22- bed facility for elderly women.

I am testifying today to raise my concerns about Section 12 of HB5020 regarding discharges for residential care homes.

The current discharge process for residents of homes like ours is cumbersome at best. We were faced with a scenario of a resident who was a smoker, who, even though had been provided a designated area to smoke on property chose to smoke in her room rather than go outside in the evening. When the staff noticed the smell of cigarette smoke coming from her room, they immediately became concerned and confronted her about the action. The resident, of course denied that she was in fact smoking in her room. My Resident Care Director contacted the Ombudsman to discuss what the best plan of action would be to address the issue and we were told that we should sit down and "talk it out" with her. This resulted in the resident telling us that we would not be entering her room until we knocked and told that we could enter – this is after all her right. So, after seeing the smoke filtering into the room next door through the vent a staff member would knock and wait for the ok to enter only to find her bathroom filled with cigarette smoke but of course no cigarette as it had been flushed. The ashes on the floor and the smoke- filled bathroom are not enough proof to discharge, we would need to actually see her with the cigarette in her hand.

This resident's right to her privacy now outweighed the rights of the other 21 ladies that lived in the home. We are tasked with providing a safe, secure, home-like environment for all of the residents that live in our facilities. When we have little to no recourse for the actions of one person how are we going to keep the other residents safe? If this resident had dropped her cigarette in her bed while smoking in her room and our facility burned, we, not the resident, would be responsible for the safety of everyone.

The idea of adding a second layer of the Involuntary Discharge process to include an appeal to an additional entity after what can take up to as long as 3 -4 months currently is preposterous. When there is a resident who is blatantly ignoring the rules or behaving in a dangerous manner how are we supposed explain to the other residents

that their rights are not as valid as those of the person exhibiting these behaviors?
Because that is exactly what we are saying to them.

I urge you all to consider the fact that supporting this change to the discharge policy as it is proposed in this bill is not only going to create a much longer and costly experience for all RCH's but it is also going to create a scenario where balancing the rights of one against the rights of many may become nearly impossible.

Thank-you for your time and consideration.

Tina Yeitz

Administrator, Eliza Huntington Memorial Home of Norwich, Inc.

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