



House of Representatives

General Assembly

File No. 506

January Session, 2021

Substitute House Bill No. 6634

House of Representatives, April 19, 2021

The Committee on Human Services reported through REP. ABERCROMBIE of the 83rd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING ESSENTIAL SUPPORT PERSONS AND A STATE-WIDE VISITATION POLICY FOR RESIDENTS OF LONG-TERM CARE FACILITIES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective from passage*) (a) As used in this section,
2 section 2 of this act and subsection (b) of section 17a-408 of the general
3 statutes, as amended by this act, (1) "primary essential support person"
4 means a person designated by a long-term care facility resident, or a
5 resident representative, who may visit with the resident in accordance
6 with rules set by the Commissioner of Public Health to provide essential
7 support as reflected in the resident's person-centered plan of care; (2)
8 "essential support" means support that includes, but is not limited to,
9 (A) assistance with activities of daily living, and (B) physical, emotional,
10 psychological and socialization support for the resident; (3) "secondary
11 essential support person" means a person designated by the resident, or
12 resident representative, to serve as a backup to a primary essential
13 support person; (4) "person-centered plan of care" means a care plan for

14 a resident developed by a resident or resident representative in
15 consultation with health professionals that focuses on the resident's
16 physical, emotional, psychological and socialization needs and includes
17 a primary essential support person or secondary essential support
18 person designated by a resident; and (5) "long-term care facility" means
19 a nursing home facility, as defined in section 19a-490 of the general
20 statutes, or a managed residential community, as defined in section 19a-
21 693 of the general statutes that provides services offered by an assisted
22 living services agency, as defined in section 19a-490 of the general
23 statutes.

24 (b) A long-term care facility resident, or a resident representative,
25 may designate a primary essential support person and a secondary
26 essential support person who may visit the resident despite general
27 visitation restrictions imposed on other visitors, provided the primary
28 essential support person or secondary essential support person
29 complies with any rules promulgated by the Commissioner of Public
30 Health pursuant to section 2 of this act to protect the health, safety and
31 well-being of long-term care facility residents.

32 Sec. 2. (NEW) (*Effective from passage*) (a) The Commissioner of Public
33 Health shall establish a state-wide policy for visitation with a long-term
34 care facility resident. The policy shall be applicable to all long-term care
35 facilities and shall incorporate a long-term care facility resident's need
36 for health, safety and well-being, including, but not limited to, the
37 essential support provided by a primary or secondary essential support
38 person.

39 (b) In the event of a public health emergency declared by the
40 Governor in accordance with section 19a-131a of the general statutes,
41 the Commissioner of Public Health shall, in accordance with applicable
42 federal requirements and guidance, set forth requirements for visitation
43 with a long-term care facility resident, provided such requirements
44 incorporate a resident's need for essential support provided by a
45 primary or secondary essential support person and other visitors. Such
46 requirements shall include, but need not be limited to, the

47 circumstances, if any, under which a long-term care facility may restrict
48 visitors, including, but not limited to, primary essential support persons
49 and secondary essential support persons designated by a long-term care
50 facility resident. The requirements shall address, at a minimum:

51 (1) Arrangements for visitation with a long-term care facility resident
52 through various means, including, but not limited to, (A) outdoor
53 visitation, (B) the use of technologies to facilitate virtual visitation, and
54 (C) indoor visitation that is allowed whether or not the resident is
55 nearing the end of his or her life, as determined by the resident's
56 attending health care professionals;

57 (2) The needs of a long-term care facility resident for physical,
58 emotional, psychological and socialization support based on the
59 resident's person-centered plan of care;

60 (3) Safety protocols for all visitors to a long-term care facility,
61 including, but not limited to, primary or secondary essential support
62 persons, in the event of a communicable disease outbreak or public
63 health emergency declared by the Governor in accordance with section
64 19a-131a of the general statutes;

65 (4) Permission for visitation with a long-term care facility resident by
66 a primary essential support person or secondary essential support
67 person despite general visitation restrictions, provided the primary
68 essential support person or secondary essential support person
69 complies with safety protocols established by the commissioner and the
70 commissioner determines that such visitation will benefit the health,
71 safety and well-being of the resident; and

72 (5) In the event a long-term care facility resident has not designated a
73 primary essential support person, a requirement that staff of a long-term
74 care facility work with the resident or a resident representative, a family
75 member of the resident or the State Ombudsman appointed pursuant to
76 section 17a-405 of the general statutes to identify a primary essential
77 support person and provide access by such person to the resident.

78 Sec. 3. Subsection (b) of section 17a-408 of the general statutes is
79 repealed and the following is substituted in lieu thereof (*Effective from*
80 *passage*):

81 (b) The State Ombudsman shall serve on a full-time basis, and shall
82 personally or through representatives of the office:

83 (1) Identify, investigate and resolve complaints that:

84 (A) Are made by, or on behalf of, residents or, as to complaints
85 involving the application for admission to a long-term care facility, by
86 or on behalf of applicants; and

87 (B) Relate to action, inaction or decisions that may adversely affect
88 the health, safety, welfare or rights of the residents, including the
89 welfare and rights of the residents with respect to the appointment and
90 activities of guardians and representative payees, of (i) providers or
91 representatives of providers of long-term care services, (ii) public
92 agencies, or (iii) health and social service agencies;

93 (2) Provide services to protect the health, safety, welfare and rights of
94 the residents, including, but not limited to, services designed to address
95 the impact of socialization, visitation and the role of primary or
96 secondary essential support persons on the health, safety and well-being
97 of residents;

98 (3) Inform the residents about means of obtaining services provided
99 by providers or agencies described in subparagraph (B) of subdivision
100 (1) of this subsection or services described in subdivision (2) of this
101 subsection;

102 (4) Ensure that the residents and, as to issues involving applications
103 for admission to long-term care facilities, applicants have regular and
104 timely access to the services provided through the office and that the
105 residents and complainants receive timely responses from
106 representatives of the office to complaints;

107 (5) Represent the interests of the residents, and of applicants in

108 relation to issues concerning applications to long-term care facilities,
109 before governmental agencies and seek administrative, legal and other
110 remedies to protect the health, safety, welfare and rights of the residents;

111 (6) Provide administrative and technical assistance to representatives
112 of the office and training in areas including, but not limited to,
113 Alzheimer's disease and dementia symptoms and care;

114 (7) (A) Analyze, comment on and monitor the development and
115 implementation of federal, state and local laws, regulations, and other
116 governmental policies and actions that pertain to the health, safety,
117 welfare and rights of the residents with respect to the adequacy of long-
118 term care facilities and services in this state and to the rights of
119 applicants in relation to applications to long-term care facilities;

120 (B) Recommend any changes in such laws, regulations, policies and
121 actions as the office determines to be appropriate; and

122 (C) Facilitate public comment on such laws, regulations, policies and
123 actions;

124 (8) Advocate for:

125 (A) Any changes in federal, state and local laws, regulations and
126 other governmental policies and actions that pertain to the health,
127 safety, welfare and rights of residents with respect to the adequacy of
128 long-term care facilities and services in this state and to the health,
129 safety, welfare and rights of applicants which the State Ombudsman
130 determines to be appropriate;

131 (B) Appropriate action by groups or agencies with jurisdictional
132 authority to deal with problems affecting individual residents and the
133 general resident population and applicants in relation to issues
134 concerning applications to long-term care facilities; and

135 (C) The enactment of legislative recommendations by the General
136 Assembly and of regulatory recommendations by commissioners of
137 Connecticut state agencies;

- 138 (9) (A) Provide for training representatives of the office;
- 139 (B) Promote the development of citizen organizations to participate
- 140 in the program; and
- 141 (C) Provide technical support for the development of resident and
- 142 family councils to protect the well-being and rights of residents;
- 143 (10) Coordinate ombudsman services with the protection and
- 144 advocacy systems for individuals with developmental disabilities and
- 145 mental illnesses established under (A) Part A of the Development
- 146 Disabilities Assistance and Bill of Rights Act (42 USC 6001, et seq.), and
- 147 (B) The Protection and Advocacy for Mentally Ill Individuals Act of 1986
- 148 (42 USC 10801 et seq.);
- 149 (11) Coordinate, to the greatest extent possible, ombudsman services
- 150 with legal assistance provided under Section 306(a)(2)(C) of the federal
- 151 Older Americans Act of 1965, (42 USC 3026(a)(2)(C)) as amended from
- 152 time to time, through the adoption of memoranda of understanding and
- 153 other means;
- 154 (12) Create, and periodically update as needed, a training manual for
- 155 nursing home facilities identified in section 19a-522c that provides
- 156 guidance on structuring and implementing the training required by said
- 157 section;
- 158 (13) Develop policies and procedures regarding the communication
- 159 and documentation of informed consent in the case of resident
- 160 complaints, including, but not limited to, the use of auxiliary aids and
- 161 services or the use of a resident representative; and
- 162 (14) Carry out such other activities and duties as may be required
- 163 under federal law.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section

Sec. 2	<i>from passage</i>	New section
Sec. 3	<i>from passage</i>	17a-408(b)

Statement of Legislative Commissioners:

In Sections 1 to 3, inclusive, "essential support person", "an essential support person" or "any essential support person" was changed to "primary essential support person" or "a primary essential support person" and "essential support persons" was changed to "primary or secondary essential support persons" for clarity and internal consistency.

HS *Joint Favorable Subst. -LCO*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

This bill allows long-term care facility residents, or their representatives, to designate an essential support person and a secondary essential support person who may visit the resident despite general visitation restrictions imposed on other visitors. The bill applies to residents in nursing homes and managed residential communities that provide assisted living services. This has no fiscal impact on the state or municipalities.

The bill also requires the Department of Public Health (DPH) commissioner to establish a statewide policy for visitation with long-term care residents. In the event of a declared public health emergency, the bill requires the DPH commissioner to establish visitation requirements. This provision has no fiscal impact.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis**HB 6634*****AN ACT CONCERNING ESSENTIAL SUPPORT PERSONS AND A STATE-WIDE VISITATION POLICY FOR RESIDENTS OF LONG-TERM CARE FACILITIES.*****SUMMARY**

This bill allows long-term care facility residents, or their representatives, to designate an essential support person and a secondary essential support person who may visit the resident despite general visitation restrictions imposed on other visitors. The bill applies to residents in nursing homes and managed residential communities that provide assisted living services.

The bill also requires the Department of Public Health (DPH) commissioner to establish a statewide policy for visitation with long-term care residents. In the event of a declared public health emergency, the bill requires the DPH commissioner to establish visitation requirements that incorporate a resident's need for essential support provided by an essential support person and other visitors.

Under existing law, the State Long-Term Care Ombudsman's duties include providing services to protect the health, safety, welfare, and rights of long-term care facility residents. Under the bill, this includes services designed to address the impact of socialization, visitation, and the role of essential support persons on the residents' health, safety, and well-being.

EFFECTIVE DATE: Upon passage

ESSENTIAL SUPPORT PERSON

The bill allows nursing home residents and residents of managed residential communities that provide assisted living services to

designate an essential support person. Under the bill, an essential support person is someone the resident or his or her representative designates who may visit with the resident in accordance with rules established by the DPH commissioner to provide essential support as reflected in the resident's person-centered care plan. Essential support includes (1) assistance with activities of daily living and (2) physical, emotional, psychological, and socialization support. The bill also allows residents or their representatives to designate a secondary essential support person to serve as backup to a primary essential support person.

An essential support person and a secondary essential support person may visit the resident despite general visitation restrictions imposed on other visitors as long as they comply with any rules DPH establishes under a statewide visitation policy (see below).

STATEWIDE VISITATION POLICY

The bill requires the DPH commissioner to establish a statewide policy for visitation with long-term care facility residents, applicable to all long-term care facilities and incorporating a resident's need for health, safety, and well-being, including essential support provided by an essential support person. Under the bill, long-term care facilities are nursing homes and managed residential communities that provide assisted living services.

Visitation Requirements in Public Health Emergencies

If the governor declares a public health emergency, the bill requires the DPH commissioner to establish requirements, in accordance with applicable federal requirements and guidance, for visitation with long-term care facility residents. The requirements must (1) incorporate a resident's need for essential support provided by an essential support person and other visitors and (2) include the circumstances, if any, under which a facility may restrict visitors, including a resident's primary and secondary essential support person.

Under the bill, the requirements must address the following topics:

1. arrangements for visitation with a resident through various means, including (a) outdoor visitation, (b) virtual visitation through technology, and (c) indoor visitation allowed whether or not the resident is nearing the end of life, as determined by attending health care professionals;
2. the resident’s needs for physical, emotional, psychological, and socialization support based on his or her person-centered care plan (which the resident or representative develops in consultation with health professionals);
3. safety protocols for all visitors to a long-term care facility, including essential support people, in the event of a communicable disease outbreak or a declared public health emergency;
4. permission for visitation with a resident by a primary or secondary essential support person despite general visitation restrictions, as long as (a) the essential support person complies with safety protocols established by the commissioner and (b) the commissioner determines that visitation will benefit the resident’s health, safety, and well-being; and
5. a requirement that facility staff work with residents, their representatives, family members, or the State Ombudsman to identify an essential support person and provide him or her with access to the resident if a resident has not designated one.

COMMITTEE ACTION

Human Services Committee

Joint Favorable

Yea 19 Nay 0 (03/31/2021)