

To: Human Services Committee
Fr: Elizabeth Stern, Stonington, CT
RE: **Bill No. 6634**, AN ACT CONCERNING ESSENTIAL SUPPORT PERSONS AND A STATE-WIDE VISITATION POLICY FOR RESIDENTS OF LONG-TERM CARE FACILITIES and **Bill No.1057** AN ACT CONCERNING NURSING HOMES

Dear Senator Moore, Representative Abercrombie and Members of the Human Services Committee,

Bill No. 6634

While I wholeheartedly **support** the establishment of an Essential Support Person (Essential Caregiver/Essential Care Partner) “*designated by a LTCF resident, or a resident representative*”, I **do not support** much of the language of Bill 6634. An ESP is not a visitor and throughout the current language of the bill it is difficult to distinguish a visitor from an ESP. The wording of this bill represents legislation that is done to/for residents in LTC, it is NOT written with input from residents or their representatives or the copious support from research that underscores the benefit of family care partners. Dr Candace Kemp’s research¹ #More Than a Visitor, Jan 3, 2021 is emblematic of the support for incorporating family as care partners. The authenticity and effectiveness of a genuine Essential Support Person is driven by the resident and supported by the Residents Bill of Rights. My suggestion is that the writing of a bill such as this **include stakeholders** and **consider research**. The ESP rules can not be written *after* Bill 6634 is presented for testimony.

As written Bill 6634 opens the door, but it does not walk into the room.

I ask that careful attention be paid to the *Mathematica Study* (August, 2020) and the forthright recommendations of the Nursing Home and Assisted Living Oversight Workgroup(NHALOWG) that discussed the characteristics of an Essential Caregiver in detail. We should not make a leap of faith in sanctioning the Commissioner of Public Health to write the rules, **after** the bill is passed, without consideration of stakeholders.

Please consider the following:

Line 5 “*who may visit*” should read ‘**who will support/care for the resident**’

An ESP is more than a visitor and as such the word “visit” should be used for general visitation and non-essential population. An ESP supports and provides essential care, this is different from a visit.

Lines 5-6 “*in accordance with rules set by the Commissioner of Public Health*” The rules should be written and incorporated into this bill. There is significant language in place, from 17 other states, that outlines “rules” and CT language has been presented to the Commissioner in previous months. Why are the rules not presented. This bill should have the ESP language **in**

¹ <https://academic.oup.com/gerontologist/article/61/2/145/6029053?login=true>

place and contained within the bill. It is impossible to support this bill if we do not know what the “rules” will be.

Line 26 “*support person who may visit the resident*” should read ‘**support person who may assist (or care) for the resident**’... Again, an ESP is not a visitor.

Lines 32-37 The statement “The Commissioner of Public Health shall establish a state-wide policy.....including support provided by and ESP” needs clarity. What can we expect? Are we giving the Commissioner carte blanche to set the policy?

Lines 38-47 ESP is not a visitor and wording should be : ‘**The ESP must be allowed unrestricted access to the residents to provide them the physical and emotional support and meet their needs. ESPs should be treated as employees of the facility for infection control purposes, including routine COVID-19 (or infection) testing and the wearing of PPE.**’ (National Consumer Voice-March 3, 2021)

Sec. 2 b. (1), (3), (4) do not apply if the ESP is allowed unrestricted access under the same conditions as staff.

Lines 68-70 “*protocols established by the commissioner and the commissioner determines that such visitation will benefit the health, safety and well-being of the resident;*”

This should read ‘**Complies with the same safety protocols that are followed by staff.**’
Considering that many staff are unvaccinated, and many ESPs ARE vaccinated, why would we have different safety protocols for ESP and staff?

Consider Lines 6-7 “...to provide essential support as reflected in the resident’s person-centered plan of care;” While I support that the ESP should be written into the Plan of Care I also look to legislation that is strong and clear and ensures that LTC residents are not encumbered with caveats of yet to be determined ‘rules’.

Bill No. 1057

There is more than ample testimony to **support Bill 1057**. Please accept my **full support to establish minimum staffing requirements for nursing homes to 4.1 hours/24 hours/resident.**

Furthermore, I strongly support Section 1 (d) that establishes a minimum percentage of Medicaid reimbursement to nursing homes for the provision of direct care to nursing home residents.