



TESTIMONY
BEFORE THE APPROPRIATIONS COMMITTEE
REGARDING GOVERNOR'S PROPOSED BUDGET FOR THE BIENNIUM ENDING
JUNE 30, 2011

S.B. 843 AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET
RECOMMENDATIONS CONCERNING SOCIAL SERVICES

February 18, 2009

Senator Harp, Representative Geragosian and members of the Appropriations Committee, my name is Kimberly Skehan and I am Vice President for Clinical & Regulatory Services for the Connecticut Association for Home Care & Hospice, whose members serve over 100,000 elderly, disabled, and terminally ill Connecticut citizens. I am a Registered Nurse with over twenty years of home care and hospice experience.

The Association **opposes** the Governor's budget proposal to mandate the use of unlicensed personnel to administer medications in residential care homes (Section 62 of SB 843). This proposal will put vulnerable residents of residential care homes at risk and is penny-wise and pound foolish.

Currently, residential care homes have two options for residents that are unable to self administer their medications: either train their own (unlicensed) staff or have nurses administer the medications. This flexibility allows those homes that are willing and able to assume this responsibility to do so, while others can rely on home health agencies.

The Governor's proposal would eliminate the option of having a home health agency nurse administer medications, significantly reducing the presence of nurses in residential care homes and placing additional costs and liability on those homes. For many residents, ongoing and sometimes daily monitoring by a home health nurse is necessary and in the best interest of the client, especially those with serious mental illness and the medically complex elderly.

Most residential care homes do not have nursing staff available to supervise these unlicensed persons, or to make a clinical determination as to whether or not a medication should be administered or if any further follow up should occur, including reassessment or contacting the patient's physician. This can result in significant care or safety issues with these residents, especially those with multiple chronic conditions.

The Governor's proposal is also problematic because it is not likely to yield significant savings. In the long run, residential care homes will either have to increase their staff, or there will be more visits to the emergency room and unnecessary hospitalizations.

The Association urges the General Assembly, as it has done so for the last several years, to reject this short-sighted and ill-advised proposal and instead to work with residential care homes and home care agencies on ways to further collaborate to improve the quality of care to this vulnerable population.

Thank you for consideration of our testimony. I will be pleased to answer any questions you may have.