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Connecticut Association for  
**HOME CARE  
& HOSPICE**

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TESTIMONY  
BEFORE THE SELECT COMMITTEE ON AGING REGARDING  
AN ACT CONCERNING PERSONAL CARE ASSISTANCE SERVICES UNDER THE  
CONNECTICUT HOME CARE PROGRAM FOR THE ELDERLY.  
S.B. 814

February 19, 2009

Senator Prague, Representative Serra, and members of the Select Committee on Aging, my name is Brian Ellsworth and I am President & CEO of the Connecticut Association for Home Care & Hospice (CAHCH), whose members serve over 100,000 elderly, disabled, and terminally ill Connecticut citizens. The Association is pleased to provide comments on S.B. 814, which proposes to add Personal Care Assistants (PCAs) to the list of services under the CT Home Care Program for Elders.

There is no doubt that PCAs have proven to be a viable option for younger, self-directed individuals with disabilities. However, the Association is **concerned** about the wholesale expansion of Medicaid-funded PCA services to the elderly as proposed in S.B. 814, unless there are adequate protections in place, including: training, supervision, pre-employment screening and requirements that ensure that elderly clients are self-directing and making an informed choice about having a PCA.

**Training & supervision.** PCAs for the elderly should be subject to educational training and supervisory requirements, and a registered nurse (RN) should provide such oversight. For instance, an RN supervises a home health aide every 14 days for patients receiving skilled care and every 60 days for patients receiving unskilled care. The lack of oversight of PCAs is a cause for concern of the safety and well being of the vulnerable elderly.

**Pre-employment screening.** PCAs should be required to undergo a “comprehensive background check” as required for employees of homemaker-companion agencies. The Association recently issued guidelines entitled “Best Practices in Hiring Unlicensed Personal Caregivers” (summary

attached), which call for comprehensive background checks that should include, at a minimum, a criminal background check for each state listed on the job application where the applicant has worked or lived for the last 3 years. Components of these Best Practice guidelines are applicable to all types of caregivers, including PCAs.

**Limit to self-directing clients.** We ask that the bill be amended to state that the personal care assistant option only be available to persons who meet the CT Home Care Program for the Elders' long-standing criteria for self-direction. PCAs should only be available to those elderly citizens who are willing and able to manage all of the elements of this option (e.g., hiring/firing caregivers) and are capable of making an informed choice about doing so.

**Regulatory clarification needed.** Finally, we seek regulatory clarification from the Department of Public Health regarding situations where home health agencies are caring for a patient at the same time that a PCA is present. Regulations must be developed to clarify roles in order to avoid confusion of responsibilities between a home health agency and PCAs.

The Association would be pleased to work with all stakeholders to ensure that necessary changes are made prior to wholesale expansion of PCAs to the elderly. Thank you for consideration of our comments. I would be pleased to answer any questions you may have.

## Summary: Best Practices in Hiring Non-Licensed Personal Caregivers

The CT Association for Home & Hospice Care (CAHCH) has developed “Best Practices in the Hiring of Non-Licensed Personal Caregivers” as part of an effort to develop standards to ensure that agencies are taking reasonable and prudent steps to hire the highest quality workforce to provide care to patients. These best practices provide industry standardization and protection for a vulnerable population and give patients/families a benchmark to evaluate qualifications and credentials. These best practices are intended for all individuals who need personal care, including those coming out of nursing homes under Money Follows the Person. As the need for home care services for patients increases, we need to ensure that the caregivers who are hired to care for our loved ones are qualified and competent.

- ❑ **Comprehensive Background Checks:** CAHCH supports comprehensive background checks for caregivers through the use of private and affordable background check systems for all providers. Comprehensive background checks for all providers includes all entities that hire or contract employees to provide personal care in patient homes, including but not limited to licensed and certified home health and hospice agencies, nursing registries, homemaker companion agencies (already required).
- ❑ **Criminal Background Check:** Comprehensive background checks should include, at a minimum, a criminal background check for each state listed on the job application where the applicant has worked or lived for at least the last 3 years.
- ❑ **Additional Checks:** In addition to a criminal background check, a comprehensive background check may include, but not be limited to personal and professional references, verification of appropriate education or training (if applicable), driving record (if applicable), and review of appropriate registries and pre-employment drug screening.
- ❑ **Education:** Appropriate education and training is currently required for Certified Nurse Aides and Home Health Aides. For other non-licensed personal care providers (i.e. PCAs), it is recommended that each agency set a standard for orientation and ongoing in-service education to ensure clinical competence and compliance with agency policy.
- ❑ **Back Up/On Call Services:** Clients should insure that there is a plan in place for the provision of care if the personal care worker is unavailable (this can be provided through the agency or through other pre-established arrangements).
- ❑ **Oversight:** Appropriate supervision of personal care workers is necessary. In addition, future recommendations include caregiver oversight and a complaint process for the population of disabled adults who are not otherwise protected (such as an ombudsman) along with oversight to insure appropriate verification of services, payment and use of funding.

CAHCH is also developing community education resources to provide patients and family members with a guideline to assist in determining which agency or personal care worker has implemented these best practices. Please contact CAHCH at 203-265-9931 or [info@cahch.org](mailto:info@cahch.org) for further information.