



TESTIMONY BEFORE THE SELECT COMMITTEE ON AGING
REGARDING H.B. 5110,
AN ACT CONCERNING CRIMINAL BACKGROUND CHECKS FOR EMPLOYEES OF
HOMEMAKER-COMPANION AGENCIES AND HOME HEALTH AGENCIES

February 16, 2010

Senator Prague, Representative Serra, members of the Aging Committee, 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. We are pleased to **support** H.B. 5110, regarding comprehensive background checks for employees of homemaker-companion and home health agencies.

The Association is a long-time supporter of requirements for background checks as one part of a strategy to help ensure that our most vulnerable citizens are receiving high quality care and protected to the maximum extent feasible. H.B. 5110 contains two critical features that we believe are essential: 1) flexibility for providers to hire their own vendors to complete these checks in a timely and affordable manner, and 2) a clear and appropriate definition of the term “comprehensive background check” so that providers have guidance on what is expected.

The definition of a comprehensive background check in the bill is consistent with the Association’s Best Practices for Hiring Unlicensed Caregivers developed last year, a summary of which is attached to this testimony (more details are available at www.cahch.org). Our guidelines are intended for use by all types of home care providers in CT, as well as by the general public in selecting an agency. The three year look back period for comprehensive background checks is also consistent with guidelines for hospices enacted by the federal government in December 2008.

We have two suggestions for changes in the proposed bill: 1) its scope should be broadened to include registries, publicly funded Personal Care Assistants and unlicensed private pay only agencies, and 2) language in Section 4(b) referring to “prospective employee” should be amended to clarify that the requirements only apply to employees “hired” after October 1, 2010, so that the standards are the same for both home health and homemaker-companion agencies. Otherwise, home health agencies will have to run these checks on every applicant regardless of whether they actually intend to offer a job – a costly mandate with no added value.

Thank you for consideration of our comments on this important issue.



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 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 has also developed 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 for further information.



TESTIMONY BEFORE THE SELECT COMMITTEE ON AGING

REGARDING H.B. 5112,

AN ACT REDUCING THE INDIVIDUAL CONTRIBUTION UNDER THE STATE-FUNDED
HOME-CARE PROGRAM FOR THE ELDERLY

February 16, 2010

Senator Prague, Representative Serra, members of the Aging Committee, 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. We are pleased to **support** H.B. 5112, which proposes to lower the recently enacted requirement for individual contribution under the state funded portion of the CT Home Care Program for Elders from 15 to 5 percent.

The Association is concerned that the current 15 percent contribution is too high and not sufficiently sensitive to the client's income and asset levels. To the extent that this copayment forces people to forego otherwise necessary services in order maintain independence, it may cause them to prematurely enter institutions at several times the cost to taxpayers.

In addition, the Association believes that the General Assembly and DSS should explore ways to facilitate Medicaid eligibility for persons in the state funded program whose asset levels are such that they are at high risk of spending down to Medicaid. If those persons were able to secure Medicaid eligibility, the State would generate far more funds through federal reimbursements than through a 15 percent copayment. Possible vehicles to do this would include expanding Special Needs Trusts and/or federal Medicaid waiver.

Thank you for consideration of these ideas.