



STATE OF CONNECTICUT

DEPARTMENT OF SOCIAL SERVICES

LONG TERM CARE OMBUDSMAN PROGRAM

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AGING COMMITTEE

Public Hearing

February 24, 2011

Good morning Senator Prague, Representative Serra and honorable members of the Aging Committee. My name is Nancy Shaffer. I am the State Long Term Care Ombudsman. I appreciate this opportunity to provide written testimony on some of the many important issues before you today. As you know the Long Term Care Ombudsman Program is mandated by the Older American's Act and by Connecticut General Statute 17b-400 to protect the health, safety, welfare and rights of residents of long term care facilities. I represent the approximate 35,000 residents living in Connecticut's skilled nursing facilities, residential care homes and assisted living facilities.

S.B. No. 2 (COMM) AN ACT CONCERNING AIR CONDITIONING IN NURSING HOMES. (AGE)

On behalf of Connecticut's skilled nursing residents, I appreciate the Aging Committee raising this bill and boldly addressing the issues of health, safety and specifically in this bill the temperature and comfort levels in nursing homes. During our state's most recent heat wave in July, 2010, the Ombudsman Program received complaints from both residents and families regarding excessively high indoor temperatures in their nursing homes. One specific call stands out in my mind. The caller asked to remain anonymous and stated that he/she was a resident of a skilled nursing facility and that "the heat is killing us, please help us." The individual pleaded for someone to come and help all of the residents. The caller stated there were no fans, the air conditioner was not working and the ice machines were not working. When I entered the facility shortly after receiving the call I found conditions exactly as the caller described. To my amazement, management staff had already left for the day, leaving the home, its residents and staff to cope with a deplorable situation. Subsequent discussion with management staff revealed they learned the week before that the air conditioning system was in need of repair and had made arrangements for replacement parts and repairs. However, the parts I was told, were coming from Canada and would not be available for weeks. I immediately contacted the Department of Public Health for their assessment of the situation. I am glad to say that due to that anonymous caller and the Ombudsman Program's immediate intervention, the facility secured rental air conditioners the next day and the comfort and safety of the residents was secured.

Connecticut law does not currently require air conditioning of nursing homes. The Public Health Code (Residential Care Home section) states that "a safe, sanitary, and comfortable environment is a basic requirement for residents in the facility." In 2003, the General Assembly passed legislation requiring the Department of Public Health to "adopt

recommendations for minimum and maximum temperatures for areas within nursing homes and rest homes.” To date, and to the best of my knowledge, those recommendations have not been made. Interestingly, the Public Health Code addresses a variety of topics. For example: dumb waiters, janitor closets, washable walls and reasonable temperatures in boiler rooms are included, but the only reference to temperatures for residents is a minimum of 75 degrees. Another notable fact is that the Public Health Code 19-13-D4b, (c) (1) Short-Term Hospitals, special, hospice, sets a standard for temperatures in those facilities that “all occupied areas shall be maintained at an inside temperature of 75 degrees by heating and 80 degrees by cooling.” Why hasn’t Connecticut set standards for other health care facilities?

The Department of Public Health issues a memo to facilities “Recommendations for Management of Nursing Home Residents During Hot Weather” during spells of excessive heat in the State. It is an inclusive list of what to do to ensure resident safety because they are at risk due to excessive heat in the facility. This seems to be a reactive rather than proactive approach to maintaining safety and comfort. A more proactive approach would be to require skilled nursing facilities to have an annual heat emergency plan which includes timely testing of equipment to allow for repairs and maintenance prior to the summer season.

In fairness, it should be noted that not everyone and particularly not all elders appreciate or want air conditioning. While not opposed to this legislation, the Ombudsman Program recommends that at a minimum safeguards should be employed:

- 1) minimum and maximum temperatures be implemented, 2) require facilities to develop a heat emergency plan (outlining an air conditioning maintenance program as well as a protocol for maintaining comfortable air temps during periods of excessive heat and a policy and procedure for identifying and implementing individualized resident care plans during heat waves), 3) the Department of Public Health’s annual licensure survey process would assess that an appropriate heat emergency plan has been developed, 3) require facilities to provide at minimum a fan for every room and have available an individual air conditioning unit upon request, 4) require that a certain percentage of resident rooms must be air conditioned in order to accommodate any resident who has a medical reason for needing air conditioning or who has expressed the desire for air conditioning, and 5) all common areas and hallways throughout each facility should be required to be air conditioned.

In conclusion, I appreciate the intent of this proposed legislation to require nursing homes to air condition each resident room and look forward to the day when the comfort and safety of residents during heat waves is ensured.

S.B. No. 973 (RAISED) AN ACT CONCERNING THE DETERMINATION OF UNDUE HARDSHIP FOR PURPOSES OF MEDICAID ELIGIBILITY.

The Long Term Care Ombudsman Program advocates on behalf of residents and their families at all steps along the continuum of their experience with long term care, including the process of Medicaid eligibility determination. This proposed legislation provides the consumer with protections regarding the Department of Social Services determination of undue hardship for purposes of Medicaid eligibility. The language provides for a notice to the consumer if the Department of Social Services intends to impose a penalty period as the result of a transfer or assignment of assets. The notice outlined in the legislation also provides for a period of time in which the applicant or recipient may make a rebuttal or a claim of undue hardship. The legislation gives discretion to the Commissioner of Social Services that he/she may waive the imposition of a penalty period if such imposition would create an undue hardship. The proposed legislation is good for the consumer and the Long Term Care Ombudsman Program supports its passage.

S.B. No. 620 (COMM) AN ACT CONCERNING A PLAN TO ENCOURAGE "AGING IN PLACE".

As both a professional in the field of aging and personally, as one of those infamous Baby Boomers, I am grateful to learn this Committee is promoting healthy, creative and viable opportunities for Connecticut citizens to age in place. We know intuitively, but also from research such as the Long Term Care Needs Assessment, that the vast majority of individuals wish to remain in their own homes as they age and they want to live as independently as possible. Connecticut is currently in the national forefront for its commitment to the Money Follows the Person Program, a program which enables residents of nursing homes who receive Medicaid for that care, to return to community living. If we promote an environment in Connecticut that emphasizes and supports aging in place, many individuals will be able to forego admission to a nursing home altogether.

Developing infrastructure and transportation improvements will be good for the Connecticut economy while at the same time promoting the concept of aging in place. There is a program in neighboring Massachusetts called Beacon Hill Village. To learn more about the concept you can go to beaconhillvillage.org. The philosophy of Beacon Hill Village is to "build a community for people to live vibrantly as they grow older in their own homes". What a great concept! Neighbors helping neighbors is a wonderful, old fashioned idea and not terribly high-tech! For a fee, currently \$640 per year for an individual and \$890 per year for a household (per the website information), members are provided grocery shopping, some transportation, and referrals on an as needed basis and walking and exercise groups as well as social groups as desired. Everyone who pays their annual membership does not require services so the success of the concept is built on wellness.

I commend the Aging Committee for taking this positive approach to promoting a Connecticut environment that embraces aging in place.