



Good afternoon Senator Musto, Representative Tercyak and members of the Human Services Committee. My name is Cynthia Gilbert and I am a Registered Nurse. I am the Director of Clinical Management for Gentiva Health Services in the state of Connecticut. I specifically oversee a program that cares for those patients who have a mental illness. I am here today to offer insight into the proposal that would include unlicensed personnel to administer medications to this very specialized population.

The concept of permitting unlicensed personnel to administer medications to a complicated psychiatric population in the community presents significant risk to the well-being of patients, the community, and the financial health of our state. I believe this is a well-intentioned but problem-laden proposal to achieve cost savings to the state.

Medication administration, itself, is a misnomer to describe the practice of behavioral health nurses in their provision of services to these patients. It's not simply just giving some medications to mentally ill individuals, as some may think. If that were the case, certainly almost anyone could do that. What the skilled licensed nurse does at that medication administration visit involves an assessment of mental status, vital signs, progress toward goals related to increased independence, and care coordination, as well as administering medications. The patients on service have very complex profiles, including severe mental illness as well as multiple medical comorbidities. During this nursing visit, an assessment by a skilled nurse may be determined that a patient is under the influence of drugs, is actively hallucinating and with impaired judgment, is suicidal or homicidal, has dangerously low blood sugar, is in cardiac distress, has concerning lung sounds, or several other conditions that are in need of intervention and communication with the patient's physician. This skilled nurse alone possesses the ability to conduct such an assessment and to respond effectively to whatever conditions the patient presents with. Without having the skill to assess, the unlicensed personnel may give the patient their medications and unknowingly cause a potentially lethal consequence. Or, the unlicensed individual, would recommend the patient go to the local emergency room to address such concerns, which is a costly alternative.



More than several years ago, when Connecticut, like many other states, decided to close state mental hospitals like Fairfield Hills, the community network of services included nurses going into the homes to monitor the patients' functioning, administer medications, and coordinate care. This move proved to be very cost-effective for the state. It saved millions of dollars in hospital and residential care, and brought prevention and intervention at an earlier point in the patient's deteriorating state to avoid unnecessary emergency room visits and costly inpatient hospitalizations. I believe there remains a small, limited percentage of patients who could respond appropriately to the unskilled worker administering his or her medications. However, the proposal, as written, is a very broad brush stroke that, in the end, will prove to be more costly to the state in terms of inadequate care of the patient and a subsequent increase in utilization of costlier services such as emergency room visits.

Over the last year Gentiva and other home health agencies have worked closely with Connecticut Behavioral Health Partnership to identify the clinical needs of each patient. This collaboration has resulted in significant cost savings. I encourage the committee to continue to explore the types of strategies that would right-size utilization of skilled nursing services, while keeping the patient safe in the community. I firmly believe that the concept of allowing unlicensed personnel to administer medication to this complex psychiatric population in the community is not in the best interests of the patients, the community, or the financial bottom-line of state of Connecticut.

I thank you for taking the time to listen to my testimony today. If you have any questions, please contact me at 860-674-1302 or cynthia.gilbert@gentiva.com.