

Testimony of
Hospice Southeastern Connecticut
Before the Legislature's Public Health Committee
10:00 AM, Friday March 16, 2012
Room 1D, Legislative Office Building Hartford, Connecticut

My name is Sharon Schaffer and I am a Clinical Social Worker for Hospice Southeastern Connecticut. I am submitting, as written only, testimony in support of House Bill 5499 (Raised) An Act Concerning Regulations Relating to Hospice Care.

As a Clinical Social Worker for Hospice Southeastern Connecticut, I work directly with patients who have life limiting illnesses, and who desire to remain within the comfort of their own homes and communities until they die. Sometimes, care no longer becomes possible within the home and it is necessary to find a safe place for patients to go, all the while obtaining the best quality inpatient hospice care available. Patients and families in every corner of Connecticut deserve access to an inpatient hospice model that suits their communities and speaks to their hearts. Currently, the full continuum of hospice care is not readily accessible to all of our state residents. This care includes care in the home, care in the hospital, care in a skilled nursing facility and care in a hospice residence or facility. Of the 5150 hospice providers in the US, one in five also operates an inpatient facility. CT has only 1 inpatient facility licensed under regulations from 35 years ago, and that facility is a very far distance from the communities Hospice Southeastern Connecticut serves.

The decision to send loved ones so far away is often a sad and difficult one, but without having a choice, many families are forced into sending their loved ones away. As their social worker, I am charged with providing the emotional support necessary to assist patients and families in dealing with the feelings associated with having to make such a decision. Often, especially in the case of our most elderly, the family is unable to visit their loved one regularly which, in turn, creates strong feelings of guilt that must

be dealt with. Knowing that death occurs just once for each of us, I work toward making the experience the best it can be for patients and families alike. The ability to have a Hospice Residence within our community would provide a place for quality end of life care when home care, hospital care or skilled nursing home care are not appropriate or possible. It would give our patients and families the well deserved opportunities to spend each and all moments possible, together, until death parts them.

Please support HB 5499 which requires the Department of Public Health to adopt the Inpatient Hospice Regulations 19a-122b-1 to 19a-122b-14, knowing these regulations are supported by 28 of the 29 hospice providers in the state and knowing that supporting HB5499 is in the best interest of those hospice patients and their families who need your support.

Thank you for taking the time to consider my testimony. Please feel free to contact me if you have any questions.

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