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Testimony of Deborah Chernoff, Public Policy Director
New England Health Care Employees Union, District 1199, SEIU
Before the Human Services Committee, March 4, 2014

Supporting: HB 5322 and SB 253

Good afternoon, Senator Slossberg, Representative Abercrombie and members of the Human Services Committee. My name is Deborah Chernoff and I'm Public Policy Director for the New England Healthcare Employees Union, District 1199/SEIU. I am testifying today in favor of HB 5322 and SB 253.

Our union represents more than 6,000 nurses, nursing assistants and support staff in Connecticut nursing homes and we have frequently advocated for, indeed insisted upon, the need to improve minimum staffing levels in those facilities. Our members have testified often and eloquently in the past about the impact short staffing has on resident care—about the corners that get cut, because there is a limit to what one person can do in an eight-hour day to assist multiple residents—call bells not answered; baths not given; meals served late; incontinent care delayed—the list goes on. As nursing home residents have gotten frailer and older and hospitals have discharged patients sooner, residents' needs have increased, but minimum staffing levels have not, and so problem has intensified. Therefore, any public measure that moves us in the direction of doing that deserves our support.

Regarding the specifics of this bill, our support is tempered only because we strongly believe the best way to improve staffing and care is by setting minimum staff-to-resident ratios, based on the day/evening/night shifts typical of nursing homes, rather than an approach that increases the total number of staffing hours over two twelve-hour periods not reflective of current staffing patterns. Ratios are far easier to monitor than are hours of care per day, making them the more consumer-friendly approach. Ratios are also the solution supported by several decades of research studies in this area and by the major national consumer advocacy organization for nursing home residents, now known as The Consumer Voice. While that is the preferable approach, we reiterate that staffing levels desperately need updating, and any legislation that moves us towards that goal should be seriously considered.

I would also like to speak to SB 253, which would assist in the state's current efforts to rebalance the long-term care system in a thoughtful and deliberate manner. I have testified in the past that the contraction of nursing home beds over the last ten years or more has been anything but thoughtful, instead relying on a kind of financial Darwinism, whereby nursing homes fail and beds disappear due to bankruptcy, receivership and closure, without regard to the needs of residents, communities or workers. Achieving bed reductions that way is the worst sort of laissez-faire, "let the chips fall where they may" public policy that puts our economy and our elderly at risk.

These closures are traumatic for our members, who are faced with the loss of their livelihoods after long years of dedicated service and care, but even more so for the residents of the nursing homes who are evicted from their homes and displaced from their communities. Given the current financial insecurity in the long-term care industry and the historically inadequate reimbursement rates, this seems to us a worthwhile approach that will assist in Connecticut's efforts to re-balance or "right-size" while providing modest rate relief to those facilities that do cut bed numbers, while permitting beds to re-open in the future.

We need to keep in mind that the so-called "grey tsunami" is already breaking over us. No matter how serious our efforts to rebalance our system of long-term care may be, the demographics tell us that the percentage of the population that will need nursing home care at some point will keep growing – and we need to be able to respond. Therefore, on behalf of our nursing home members, District 1199 supports this legislation.