

Testimony of Rhonda Boisvert
President, Connecticut Association of Residential Care Homes

Opposing

Re: Section 15 of HB 5537 – AAC the Department of Public Health's Recommendations
Regarding Various Revisions to the Public Health Statutes
Public Health Committee, March 14, 2014

Senator Gerratana, Representative Johnson and members of the Public Health Committee, my name is Rhonda Boisvert. I own Pleasant View Manor and Shailerville Manor and am the President of the Connecticut Association of Residential Care Homes (CARCH). I am here today to offer testimony against Section 15 of House Bill 5537. This section of the bill would require residential care homes to take burdensome and unnecessary steps in writing a resident discharge plan and perform tasks that homes are not equipped to provide or have ever done.

There are about one-hundred residential care homes in the state serving over 3,000 residents. Approximately sixty percent of the residents have behavioral health issues or a mental diagnosis with the remaining percentage being elderly. Our homes are not medical facilities and our staff does not provide medical care.

Our homes are comfortable and home-like. They do not look sterile and they do not resemble nursing homes or medical facilities. We are community based. Our staff is small. We are family. The staff works hard by cooking, cleaning and arranging medical appointments for our residents. They provide emotional support as needed. An employee must be kind and understanding to our residents. They need to act quickly in an emergency.

The administration and employees are not equipped to make medical diagnoses, analyze the emotional state of a resident, or make a decision as to what would be an appropriate placement may be. House Bill 5537 would require residential care homes to take additional steps in writing a discharge plan that we are not equipped to handle. Our homes do not have social workers. This bill would be burdensome and not in the best interest of the resident or the home.

Presently no resident is ever discharged from a residential care home without a plan in place. The only reason to discharge a resident would be for not paying rent, breaking house rules, endangering themselves or others in the house and the home not being able to provide the care needed for the resident. The discharge plan that is now in place is burdensome and unrealistic. It often takes several months which keeps the home in turmoil and it becomes costly because we have to put extra staff in place. We also put added stress on the community services such as police, town ambulances and the emergency departments.

I urge you to remove Section 15 from House Bill 5537. This section would only create new costs and burden to our industry and require an already inappropriate amount of work in a discharge plan that doesn't work for residents, staff and administrators of residential care homes.

I appreciate the time to be heard by the Public Health Committee and welcome any questions you may have.