



TESTIMONY

Delivered by Holly Bessoni-Lutz, RN, MSN
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Interim HealthCare Hospice
Before the Judiciary Committee

March 18, 2015

**To OPPOSE Raised Bill No. 7015:
An Act Concerning Aid in Dying for Terminally Ill Patients**

Senator Coleman, Representative Tong and members of the Judiciary Committee. My name is Holly Bessoni-Lutz, Hospice Director for Interim Healthcare Hartford, Inc. I am also an RN with 34 years experience in acute care, home care and hospice care. I am a member of the Hospice and Palliative Care Committee at the Connecticut Association for Healthcare at Home. This committee is the voice for hospice and palliative care providers across the State.

I am concerned that we are putting our efforts into ending one's life before we explore how to improve providing end-of-life care. The State of Connecticut ranks 50th for hospice length of stay, this is the shortest in the Nation. Health Care Providers are not having the needed conversations to allow those with a terminal illness to understand all their options, which would include providing compassionate care at the end-of-life. More time and effort is needed for educating our health care providers so they have the skills necessary to have this very difficult conversation when there is no other alternative to treatment.

Understandably, this is an emotional subject, and Bill 7015's intent is to help those suffering. An existing and very effective alternative would be Hospice and Palliative Care, an approach that provides holistic care to the individual with the terminal illness, along with all those that are affected by their illness. Hospice strives to provide compassionate care at end of life to all involved.

Since pain comes in many forms (physical, spiritual, emotional and psychological), it is necessary to provide those with a terminal illness the opportunity to work through their 'pain'

with skilled hospice professionals. Hospice families have stated that they are thankful and feel blessed to have had this cherished time with their loved ones. This is not always defined as easy, often it includes tears, disagreements and struggles, but also laughter and acceptance. Until hospice and palliative care is utilized, to its fullest, I do not see how a treatment option should be to end a life. It has been demonstrated that those involved with Hospice care have less complicated grief than those not involved in Hospice care. Relationship struggles have a chance to be resolved thus leading to closure for the family and terminal ill individual.

I strongly oppose Bill 7015. Perhaps the effort of our State would be better served to focus on improving education and access to end-of-life care so that individuals know that this excellent important care can be provided as an option. The practice of hospice and palliative care is not to deliberately end life but to allow individuals a chance to live until their natural end and have a death with dignity that is pain free.

Thank you and if you have any further questions, please contact me directly at hblutz@interimhartford.com or 860-677-0005.