

Kal Patel Essex Village/Meadowbrook Manor,LLC
Connecticut Association of Residential Care Homes

HB 6887- AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS
REGARDING THE PROTECTION OF RESIDENTS IN HEALTH CARE INSTITUTIONS.

Public Health Committee, March 18, 2015

Senator Gerratana, Representative Ritter and members of the Public Health Committee, my name is Kal Patel I am the owner/administrator of Essex Village and Meadowbrook Manor in Essex ,CT and a board member of the Connecticut Association of Residential Care Homes. I am submitting my testimony **against House Bill 6887- An Act Concerning the Department of Public Health's Recommendations Regarding the protection of residents in health care institutions.**

Residential care homes are not medical facilities nor do we provide medical care. A vast majority of homes are not under the umbrella or owned by major medical provider. In fact they are owned by small "mom and pop" operators. Our mandate is to provide residential services to our fellow Connecticut citizens. Year after year we have proven to meet that requirement at a tremendous savings for the state while providing high quality of care.

House Bill 6887 would require residential care homes to take additional steps in writing a resident discharge plan and perform tasks that we are not equipped to do or have ever done. Residential care homes are made up of small staffs and have limited funding. We typically only have 2 staff members on any given shift. Their responsibilities are to provide meals, housekeeping, make doctor appointments, ensure and record the residents are taking meds and provide companionship when necessary.

Residential care homes do not offer medical diagnoses, analyze resident emotional states, or make determinations as to what would be an appropriate placement. This proposal would require us to do so for all residents who leave our facility. Vast majority of residents leave our facility voluntarily for higher level of care which is done under the watch of their doctor and evaluated by the facility there going to before acceptance. In the case of an involuntarily discharge there is a process in place through the Department of public health. This process includes a hearing where the resident in question is represented and the homes in question already have to follow a burdensome multi step process. It is important to note that a vast majority of our involuntarily discharge in the case of nonpayment or if a resident is a danger to our other residents.

We have 33 beds in Essex Village manor and 25 beds at Meadowbrook manor. Over the past eight years of our ownership we have faced only 2 situations where a resident had to be involuntarily discharged. In both cases the resident used their funds to purchase drugs and alcohol instead of paying for room and board. These residents refused to see the Doctor. They had no representation nor had family members

who wanted to get involved. On a logistical basis setting aside the fact we are not qualified to provide evaluations, how are we to implement this statute to these scenarios? As an industry the current regulations already make it difficult to move residents in these adverse situations. This statute would make it virtually impossible. There is not a mass discharge of residents out of our homes, and the residents who face discharge have the Department of public health, the ombudsman's office, the department of aged and the office of protection and advocacy already. This proposed language would be inappropriate, burdensome and costly. I urge you to reject House Bill 6887.

Respectfully submitted

Kal Patel

Meadowbrook / Essex Village Manor