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February 25, 2016

Testimony Supporting Raised H.B. 5285: An Act Requiring the State Ombudsman to Investigate Complaints Concerning Recipients of Home and Community-Based Care.

Senator Flexer, Representative Serra and honorable members of the Aging Committee, my name is Louise Harmon. I am an M.S.W. student in social work at UConn. I also have a law degree. I have come today to testify in support of H.B. 5285 to expand the State Ombudsman's oversight to non-medical home and community based care.

Nearly 10 million adults age 65 and older receive home care, or are in residential settings other than nursing homes. Those numbers are going to rise. The U.S. Census Bureau predicts that the 65-plus population of 40 million today will skyrocket to more than 70 million in 2030. Helping older adults stay in their homes is a much more affordable way to care for them, and the fact is, 95 % of older adults *want* to stay in their homes. They want to age in place.

But there is a darker side to the care of older adults, be it in a long-term care facility, or within the home—abuse and neglect. With almost any “aging in place” solution, that abuse or neglect may go undetected because there is no one to witness it. Also, home care workers are a work force with limited employment opportunities. One in 4 home care workers live in households below the federal poverty line, and most make little more than minimum wage. Low pay, high turnover, lack of supervision, and the hidden quality of home care create conditions in which abuse and neglect could thrive. Sometimes home care workers rush the care, fail to work the hours they signed on for, are financially exploitive, or worse---they are physically or verbally abusive, risking the health and safety of those they care for.

The legislative and regulatory framework for elder abuse and neglect is evolving. Most states, including Connecticut, have a good legislative and regulatory infrastructure for the protection of older adults in nursing homes and other long-term care facilities. But the law has not kept up with the “aging in place” phenomenon. No federal regulations cover home care workers, except for the broad standards of care provided under Medicaid. Only about half the states require training for home care workers (Connecticut does---75 hours of mandatory training), but AARP reports only 15 states require agencies to conduct periodic in-home reviews to make sure workers are doing their jobs. A 2012 study in the *Journal of American Geriatrics* found that less than a third of home-care agencies screen employees for illegal drug use; as of July 2014, Connecticut was one of only ten states that did not require background checks on home care workers. So there is a gap in protection against elder abuse and neglect by home care workers, not only in our state, but in most states. The proposed H. B. 5285 is a step towards filling in that gap.

H.B. 5285 would expand the oversight of the Long-Term Care State Ombudsman to home and community-based services. Connecticut has an excellent Long-Term Care Ombudsman Program, but it lacks statutory authority to address complaints made by, or on behalf of, older adults who are aging at home with the help of home care workers. This Bill would expand the jurisdiction of the State Ombudsman so that older adults who live at home with services would have the same protections of the State Ombudsman as the older adults who live in long-term care facilities. As that jurisdiction expands, additional funding will inevitably be needed so that the Long-Term Care Ombudsman Program can responsibly serve its new constituency.

Augmentation of the State Ombudsman's jurisdiction will require a redrafting of the current regulations that govern the State Long-Term Care Ombudsman's Office. This task could be challenging since the current regulations create policies and procedures for residents of long-term care, and those who age at home are *not* residents of long-term care---that is the whole point of aging in place. States have approached this problem in different ways. Some states have developed separate home care advocacy and complaint programs---with a separate Ombudsman for Home Care and another Ombudsman for Long-Term Care. (e.g., Alaska, Colorado, Idaho, Maine, Minnesota, Ohio, Pennsylvania, Virginia, Wisconsin, and Wyoming.) This approach recognizes that different risks of abuse and neglect will arise from the different care-giving settings. Other states, such as Indiana and Maine, have taken the approach that Connecticut is about to adopt, amending their Long-Term Care Ombudsman Program to include a complaint system for those aggrieved by home care workers. Either way, it is a good idea to afford older adults who are aging in place the protection of the State Ombudsman. They may even need it more than residents of long-term care facilities, given the lack of supervision over their care. Home care takes place behind the closed doors of the older person's home, and their health and safety may be even more at risk. For these reasons, I support H.B. 5285. Thank you for your time and consideration.