



EldersChoice of Connecticut, LLC

PO Box 370361

West Hartford, CT 06137

Office (860) 888.3373

CT DCP Registration: HCA.0000489

CT DOL Registration: 2012471

**TESTIMONY OF JOHN D. SHULANSKY TO THE AGING COMMITTEE
FEBRUARY 25, 2016**

Distinguished Chairmen and members of the Committee:

My name is John D. Shulansky. I am managing director and a partner of EldersChoice of Connecticut, LLC a Homemaker Companion Agency and classified as a Registry; and also registered with the Department of Labor as an Employer Fee Paid Employment Agency. I also serve as Vice President of the Connecticut Association for Home Care Registries.

I appear before you today to speak in regard to four bills before the Committee this morning,

HB-5285 - State Ombudsman Services to Recipients of Home and Community-based Care. With emphasis shifting toward home and community-based care, and the continued growth in the population to be served, access to services is going to be increasingly imperative. Those who receive these services are the most vulnerable and deserve to have the resource of the State Ombudsman. This is a worthwhile bill, but requires adequate funding and emphasis on distributed community-based services in order to be effective.

HB-5286 –Study of Long Term Care. There is a critical need for a comprehensive understanding and longer term view of the long term needs of Connecticut’s rapidly aging population. The “silver tsunami” will require caregivers and related training, support for home-based activities of daily living, delivery of clinical services, telemetry, funding, protections for the consumer and caregiver.

HB-5287 – Medicaid Eligibility for Home-Care Services. This bill should provide savings to the state by coming into harmony with Federal law.

SB -166 – Utilization of Patient-Designated Caregivers. - This is an important bill. In order to enable the best possible transition to home and avoid readmissions, a caregiver must have adequate training and resources to provide the individual with a safe, quality of life. Whether at a hospital, skilled nursing or rehabilitation facility, the ability to provide pre-discharge support to the caregiver is essential.

One weakness in this bill is that a live-in caregiver who is the paid direct care worker of the family, may \be the principal caregiver for the individual. Under the proposed language of this bill, this caregiver might not receive important post-discharge care training.

Aging Committee
Testimony by John D. Shulansky
February 25, 2016

From a clinical perspective every patient is different. Any caregiver regardless of training, can benefit from pre-discharge in-service to learn cues or methodologies unique to the individual. For these reasons, we would recommend the language in Section 1 (5)(d) be amended to enable direct care workers of the patient be eligible to be designated caregivers.

In closing, I would like to offer a few comments:

We are correctly encouraging citizens to age at home, where most individuals want to be, can remain safely, and at a much lower cost to society. Most people at home require non-medical care, which is help with dressing, meals, light housekeeping, laundry, personal hygiene, and other activities of daily living. These services require trained caregivers that are delivered with adequate protections to the consumer and caregiver alike. Transitions from in-patient residential care to integrated delivery of home care, and especially the non-medical components, present real challenges to public policy.

Regrettably, Connecticut has a significant opportunity to improve the regulation and oversight of non-medical care. The delivery of this care is all but unregulated, with over 1000 providers registered with DCP. In Connecticut, ANY person can be a caregiver – without training, experience, or a basic health exam. As a result, our older population is at risk daily, and this population is growing dramatically. With enforcement resources very limited, there are few protections for older adults at home.

The Aging Committee has the potential to assume a critical and much needed role as advocates for Connecticut's frail and infirm older adults. I would strongly encourage the Committee to be an increasingly active player in the establishment of adequate protections for the consumer and caregiver alike – protections that enable and encourage the delivery of quality and affordable services to a diverse population with reasonable accommodation. There is no doubt this will require a delicate balance among competing interests, but we must begin to address these issues now, in order to assure we are not overtaken by the wave of elderly, and afford to provide our citizens with the opportunity to age safely and with dignity at home.

Thank you for the opportunity to provide testimony on these important issues.