

Testimony of Kal Patel
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President of the Connecticut Association of Residential Care Homes

H.B. No. 5163 (RAISED) AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S
RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH
STATUTES.

Public Health Committee, March 5, 2018

Senator Gerratana, Senator Somers, Representative Steinberg and members of the Public Health Committee, my name is Kal Patel and I am the owner of Meadowbrook Manor and Essex Village Manor in Essex Connecticut and the President of the Connecticut Association of Residential Care Homes.

The Connecticut Association of Residential Care Homes supports **Section 21 of House Bill 5163** which would exempt residential care homes with thirty beds or less from the provisions of the food code. The exemption still requires the administrator of the residential care home or the administrator's designee has satisfactorily passed a test as part of a food protection manager certification program that is evaluated and approved by an accrediting agency recognized by the Conference for Food Protection as conforming to its standard for accreditation of food protection manager certification programs. This is already done in most, if not all, residential care homes.

Residential care homes provide a home like environment for some of the most vulnerable residents in the state. The homes are not medical facilities but provide residents with a room, meals, activities and leisure and medication administration or monitoring. The homes are also staffed with people who provide oversight to the residents of the home.

Residential care homes range in size with some as few as 8 beds in a converted home. This exemption is particularly important for these smaller homes who have limited kitchen space to meet the requirements under the Model Food Code. Pursuant to Public Act 17-93- An Act Concerning the Department of Public Health's Recommendation Regarding Adoption of a Model Food Code, a residential care home would be classified as a Class 4 food establishment. This would mean increased kitchen inspections and strict compliance to the United States Food and Drug Administration's Food Code. This may be unrealistic for many of these smaller homes who do not have a commercial kitchen making many of the requirements of the FDA Food Code impractical.

Without the exemption many of these small homes could be deemed by their local health department's to be in violation of the law. These residential care homes have existed for decades serving food safely in a home like environment. They should not be subject to the same standards of restaurants, large public health institutions and other larger facilities.

Residential care home rates have been frozen which has meant they have not been able to redeem costs for updates and maintenance without approval from the Department of Social Services. Even those homes with over thirty beds may find compliance challenging. There are only about 23 homes or less than a quarter of residential care homes in Connecticut that have

more than 30 beds. We would therefore ask the committee to apply a blanket exemption for all residential care homes including those with more than 30 beds.

We thank you for the opportunity to offer this testimony and thank the Department of Public Health for putting forward this legislation.

Respectfully submitted,

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