



SEIUHealthcare
United for Quality Care

March 17, 2021
Chelsea Daniels, LPN
Fresh River Healthcare
SEIU District 1199 New England
Before the Public Health Committee

*In Support of SB 1030 AN ACT CONCERNING LONG-TERM CARE FACILITIES
With Changes.*

Good afternoon Senator Abrams, Representative Steinberg, and members of the Public Health Committee. My name is Chelsea Daniels, and I am a licensed practical nurse (LPN) working on the behavioral health and psyche unit at Fresh River Healthcare in East Windsor. I work thirty-two hours weekly on the 3-11 shift. I am here today to testify in support of Senate Bill 1030 with some small changes to the staffing ratio language.

First of all, thank you for changing the staffing ratio to 4.1 direct care hours. We have been pleading for a change like this for years. With a ratio like this, homes will be forced to hire more workers so that we can be in compliance with this new law. The only change I would suggest is changing the LPN hours to .75 and the RN hours to .54.

I'll tell you why it matters. I am a LPN and in terms of direct care, CNA's and LPN's give more direct care than RN's. As of right now I am responsible for 34 patients, most of them have a high acuity psyche and medical history. To be short and straight to the point: Workers like me need more staff to do our jobs. This isn't optional. It is a must if the state wants us to continue to care for these residents. We are no longer providing care for the little elderly neighbor next door who fell and ended up in a nursing home. Some residents are combative, and they require time and attention for redirection.

For example, here's how I prioritize my shift. I work an eight-hour shift. Seven of those hours are dedicated to residents and their needs. One hour is designated for: oncoming shift narcotic counting, report from the off going nurse, a possible lunch break, off going shift narcotic count, and the nursing report.

I care for 34 residents so in seven hours that breaks down to about twelve minutes of care PER RESIDENT. And that does not equate to a continuous twelve minutes. That is twelve minutes in total throughout the day. That means twelve minutes dedicated to preparing medications, administering treatments, administering medication, and documentation on multiple platforms. All while hoping to have time for the basic conversation that most residents are eager to have. If we include other unexpected events that happen frequently: falls, new admissions, doctors and nurse practitioner orders, phone calls, various incidents and more, then we barely have time to take the breaks that are legally available to us, if we have time to take them at all.

It has been extremely difficult working with so many residents. Connecticut has just become comfortable allowing us to work under these conditions. The patient to staffing ratio has not changed in years! We are exhausted! I have a family at home, and I can't to continue to burn myself out at work. I love what I do, and I need to make a living, but I am seriously considering a career change. I'm frustrated with the brokenness of the medical system and I am tired.

I will leave you with this ask: In order to pass a bill like this, we need to have funding for staffing. My residents deserve to have quality health care. Nursing home workers are always left out of the budget or included in an extremely disproportionate way. Please pass Senate Bill 1030 and help us advocate for funding for nursing homes. We need it. Please treat us like the heroes that we are! Thank you for the opportunity to testify today.