

## March 4, 2025

Written testimony of Matthew V. Barrett, President and CEO of the Connecticut Association of Health Care Facilities and the Connecticut Center For Assisted Living (CAHCF/CCAL) in opposition to S.B. 831 An Act Concerning Advanced Notice Of An Employee's Work Schedule To Certain Employees.

## OPPOSED/RECOMMENDATION: EXCLUDE SKILLED NURSING FACILITIES FROM THE PROPOSED LEGISLATION'S REQUIREMENTS

This raised committee bill would require a Connecticut skilled nursing facility to pay an employee one hour of pay at the employee's regular rate for each instance when the nursing home, less than fourteen days prior to the commencement of scheduled work hours, adds hours of work or changes the date, time or location of a work shift without loss of hours. The bill would also require a nursing home to pay an employee one-half of the employee's regular rate for any scheduled work hours the employee does not work due to the employer cancelling or reducing the employee's scheduled work hours: (A) After the employee reports to work such scheduled work hours, or (B) less than fourteen days prior to the commencement of such scheduled work hours.

Scheduling and payment requirements of this type would present considerable challenges for Connecticut's skilled nursing facilities. The skilled nursing facility model of care relies heavily on needed flexibility because of the often dramatic fluctuation in resident occupancy levels, sometimes referred to as resident "census." While all facilities have core staffing requirements, it is essential that nursing facilities have the flexibility to staff based on the resident census and the care needs of those residents. There are many variables in the staffing equation as it related to care requirements of the resident population on any given day. There are also inherent uncertainties in predicting the number of admissions and discharges that will actually be experienced. Staff hired or volunteering to work on a per diem basis in nursing homes to help address these fluctuations in staffing needs should be exempt from the provisions of this bill.

Moreover, the Connecticut Department of Public Health oversees state and federal rules requiring that skilled nursing facilities have sufficient nursing staff to provide nursing and related services so as to attain or maintain the highest practicable physical, mental, and psychosocial wellbeing of each resident, as determined by resident assessments and individual plans of care. The rules further require, that skilled nursing facilities must assure that sufficient qualified

nursing staff are available on a daily basis to meet patients' needs for nursing care in a manner and in an environment which promotes each resident's physical, mental and psychosocial wellbeing, thus enhancing their quality of life. The predictive scheduling requirements in S.B. 831 would undermine compliance with these federal and state staffing rules as flexibility to staff to meet residents is a basic tenet of the rules.

Through no fault of the nursing home, staffing needs can change on short notice due changes in the resident population and their care needs. Nursing homes shouldn't be penalized with these increased costs when the fluctuations in staffing are inherent in the skilled nursing facility model of care. For these reasons, CAHCF asks that Connecticut skilled nursing facilities be excluded from the bill's requirements.

Thank you for this opportunity to discuss the difficult issues this bill presents for Connecticut skilled nursing facilities. *For additional information, contact: Matthew V. Barrett, mbarrett@cahcf.org.*