



**February 11, 2019**

**Written testimony of Matthew V. Barrett, President/CEO of the Connecticut Association of Health Care Facilities (CAHCF), in opposition to proposed HB 5276, An Act Concerning The Safety of Nursing Home Patients at Risk of Falling.**

Good afternoon Senator Abrams, Representative Steinberg and to the members of the Public Health Committee. My name is Matthew V. Barrett, President and CEO of the Connecticut Association of Health Care Facilities (CAHCF), our state's one hundred and fifty-three member trade association of skilled nursing facilities and rehabilitation centers. Thank you for this opportunity to offer testimony in opposition to HB 5276, AAC The Safety of Nursing Home Patients at Risk of Falling as proposed.

As drafted, the proposed bill would require nursing homes to offers patients who are at a high risk of falling the option of having either a bed alarm or a personal sitter.

Mandating the offering of bed alarms to those at high risk for falls is in direct opposition both to federal regulations and culture and quality initiatives designed to improve nursing home patient care and quality of life.

Federal regulations specifically prohibit the use of restraints, which include position alarms, such as bed and chair alarms, absent documentation of an assessment that the restraint is necessary to treat a medical symptom, care planning by an interdisciplinary team, and a physician order. While federal regulations permit a resident or representative to request the use of a restraint, restraints may not be used solely based upon such a request and in the absence of a determination of need as discussed above.

Additionally, there has been little disagreement in the skilled nursing home community, among public health regulators of nursing home care, and by those that advocate on behalf of nursing home residents, that nursing homes should be restraint free health care environments to the extent possible. Indeed, a nationwide cultural and health care quality transformation has occurred in nursing homes to eliminate the use of restraints over the last decades in favor of more individualized and holistic methods to prevent falls.

To that end, when CMS revised the nursing home regulations in 2016 it issued revised guidance regarding restraints specifically noting that "[t]here is no evidence that the use of physical restraints, including, but not limited to, bed rails and position change alarms, will prevent or reduce falls" and that "restraints have many negative side effects and risks that far outweigh any benefit from their use." Specifically, bed alarms were noted to limit residents' mobility and personal autonomy. Residents were noted to be fearful to move, thereby setting off the alarm and creating a noise that is a nuisance or an embarrassment to the resident. Other

examples of negative outcomes identified by CMS were agitation and confusion caused by the sound of the alarm, creating an institutional rather than homelike environment, sleep disturbances and decreased mobility.

Accordingly, we urge the Public Health Committee to very carefully consider approaches to nursing home care that would rely on bed alarms as a method of fall prevention.

CAHCF also opposes mandating the offering of personal sitters. Nursing homes are already required to staff facilities in order to meet the needs of each resident. It is unclear from the proposed legislation who would be responsible for paying for such care. However, we are unaware of any examples where residents have been denied the ability to hire personal sitters at their own expense. We would note that prior to enacting any legislation to require the offering of personal sitters, recognition and consideration should be given to the risks involved in hiring persons who may be untrained and who are not subject to supervision and background checks that are mandated for nursing home employees.

Thank you. I would be happy to answer any questions you may have.

For additional information: contact: [mbarrett@cahcf.org](mailto:mbarrett@cahcf.org); 860-290-9424.