



**March 28, 2022**

**Written testimony of Matt Barrett, President/CEO of the Connecticut Association of Health Care Facilities and the Connecticut Center For Assisted Living (CAHCF/CCAL) concerning H.B. No. 5500 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.**

Senator Anwar, Representative Steinberg, and distinguished members of the Public Health Committee, my name is Matt Barrett. I am the President and CEO of the Connecticut Association of Health Care Facilities and the Connecticut Center for Assisted Living (CAHCF/CCAL), a state trade association and advocacy organization of one-hundred and sixty skilled nursing facilities and assisted living communities. Thank you for this opportunity to submit written testimony concerning H.B. No. 5500 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH

**Requested Revision to Section 10/ Strike Contingency Staffing Plans**

Sec. 10 of the bill adds new provisions to strike contingency plans now required when a nursing home receives a notice of intention to strike by a labor organization representing the employees of such institution. These current provisions track National Labor Relations Act rules requiring the filing of a strike contingency plan with the Department of Public Health (DPH) not later than five days before the date indicated for the strike. Specifically, this provision would require that the strike contingency plans also include the institution's staffing plan for at least the first three days of such strike. It would also request that the strike contingency plans must include the names and titles of the individuals who will be providing services at the institution.

There is no objection to including the staffing plan within the required strike contingency plan as this is currently what is requested by DPH, however, it will not be possible to list the names and titles of individuals five days prior to the plan submission because this information is almost never available from the staffing agencies until the individuals are en route to the job location, which is likely to be the evening of the strike or even the same day. **Therefore, we recommend this clause be deleted.**

Section 11 of the bill adds infection prevention and control to the continuing education requirements nursing homes must complete every two years, and it adds courses approved by the Association for Professionals in Infection Control and Epidemiology to the list of quality continuing education courses.

### **Requested Revision to Section 36 / Social Worker Minimum Staffing**

Section 36 authorizes DPH to implement policies and procedures necessary to administer the establishment of (1) new minimum staffing level requirements for nursing homes of three hours of direct care per resident per day, and (2) modification of staffing level requirements for social work and recreational staff of nursing homes such that the requirements (A) for social work are one full-time social worker per sixty residents, and (B) for recreational staff are lower than the current requirements, as deemed appropriate by the Commissioner of Public Health. Under current law, DPH must adopt regulations to implement these requirements. Further, in implementing policies procedures while in the process of adopting such policies and procedures as regulations, DPH would be required to provide notice of intent to adopt regulations published on the eRegulations system not later than twenty days after the date of implementation. The policies and procedures would not be valid until the time final regulations are adopted.

Similar to our recommendation concerning another proposal before the committee (proposed S.B. No. 371), we propose a technical, but important, revision to the social worker staffing requirements adopted the previous session in *PA 21-185, An Act Concerning Nursing Homes and Dementia Special Care Units*. We offer the following recommended statutory

language to clarify that social work staffing levels may be applied proportionately to the individual nursing home's resident census. This small change is consistent with current public health code policy and would allow more precise staffing levels to meet resident needs.

**RECOMMENDED SUBSTITUTE for Section 36 of H.B. No. 5500:**

***Subsection (a) of Section 10 of Public Act 21-185 is repealed and the following is substituted in lieu thereof:***

*(a) On or before January 1, 2022, the Department of Public Health shall (1) establish minimum staffing level requirements for nursing homes of three hours of direct care per resident per day, and (2) modify staffing level requirements for social work and recreational staff of nursing homes such that the requirements (A) for social work, ***hours that are based on one full-time social worker per sixty residents and that will vary proportionally based on resident census,*** and (B) for recreational staff are lower than the current requirements, as deemed appropriate by the Commissioner of Public Health.*

Thank you for your consideration.

***For additional information, contact: Matt Barrett, [mbarrett@cahcf.org](mailto:mbarrett@cahcf.org) or 860-290-9424.***