

Thank you for permitting me this opportunity to share my heartfelt firsthand concerns regarding the care of our seniors living in facilities. Whereas I can only speak to my experiences and not provide disclosure of operations in other facilities, I would surmise there are far too many similar testimonies to be heard. Know that my path to this moment was precipitated by countless efforts for better care and communication with the facility itself where my mom resides which led me to contact the Medina County Health Department who, although kind and understanding, said you'll have to call someone at the state level, and although kind and understanding, they deferred me to contacting my Representative because guidelines and mandates were from the Federal Government. Hence my speaking with Nilani Jawahar in the Office of State Representative Darrell Kick and the subsequent invitation to be a part of today's hearing.

My list is lengthy. Know that the problem is not just with my mom's care facility. They have their issues for sure and perhaps they are governing themselves according to your mandates. However, those same mandates fall short of providing adequate care for residents. You as a government body have been negligent and inconsistent in what you would have to us do, how to behave and frankly, you've been very sloppy, vacillating back and forth in your efforts to protect the populous from contracting COVID-19 without considering that the care of our seniors likely would not fit your nice tight little program. COVID came on us quickly but not unexpectedly. Closing the doors to all family members, denying access to facilities, creating solitary confinement for their residents is not, I repeat NOT, how mental, emotional, and psychological health is maintained. Have we not learned from history (eg children in orphanages) that those in isolation fail in all three of these arenas and that solitary confinement is used as a punishment in our penal system? Solitary confinement you ask. Yes, residents are not only confined to the building in which they reside but Mom is also confined to her room (at least where my mom is). They cannot even visit each other as residents. My mom thought she was the only one in the building. She thought she missed something, that something had happened, looking down the hall of closed doors and no people. I'm not a mental health professional but all you have to do is ask one that is.

May I give my list of issues, largely issues of disparity between what you have permitted staff to do and what you have not permitted family to do and to be for their loved ones.

- By St. Patrick's Day the state was closing. Parades, restaurants, gatherings all curtailed. Families now denied access to their loved ones. Then came Easter and Mother's Day.

- If I as a family member of a resident am denied access to enter a facility, why is it that Easter and Mother's Day flowers were permitted to enter the building? I wasn't permitted to deliver my mom a simple donut. Were the deliverymen a zero risk to said residents but I am considered a major risk? Even if left in a vestibule for facility staff to access, did not those flowers come from "someplace" and were they not handled by "someone"? Is there a risk to that? Likely so.
- Fast forward a few weeks. We have outright celebrations IN facilities for Nurses Week. Nice idea but again, outside items were permitted FOR THE STAFF in the facilities. I am left outside.
- This is in complete opposition to family members who may want to bless their loved ones with a gift. We were required to ONLY order from Amazon Prime if we wanted to purchase and send something. Since when is Amazon Prime risk free? (This has since changed as of last week but we were not notified as such and still limited on what we can give.)
- Moreover, why is the a facility staff permitted to have pizza and donuts, lunches, etc. brought into the building but I, again, am kept away? They hold the mail for five days before giving it to residents. Did they also hold the pizza and donuts for five days? And staff have brought in treats for fellow staff members. And yes, these snacks and lunches are placed in a public space, not in resident's rooms but it's the same air, the same aides, and the same nurses going in and out of the residents' rooms.
 - As best as I can see, the PPE is a mask. Perhaps gloves. Staff enter the building in their normal scrubs, I understand their temperature is taken, and off they go.
 - Why am I not permitted that same access?
- The staff are no longer permitted to return to their cars to smoke so they smoke outside the building, away from public view.
- Personal resident care has been at some level relegated to medicating, at least to my mom, to assuage her anxiety and restlessness as the day progresses. It was suggested by mom's residential facility for her to have a psych evaluation in an offsite facility because of her anxiety and their inability control her with medication. Mind you, Mom is very docile and compliant. She is not combative. She's merely leaving her room looking for life, for engagement, for identity as a human. If she were being duly cared for, she would not need such an evaluation and "look it up on the internet" is no way to refer a family to additional medical, emotional, or psychological assistance.

- Many seniors deal with sundowners. Sunlight and human engagement is the best course (at least for my mom) to curb that.
 - Residents are left in their rooms all alone except meals or to check on them which is not engagement.
 - Doors are closed.
 - Window blinds are often closed prohibiting sunlight.
 - Visitations are through "closed" windows for fear of outside germs entering the building. As residents began to open windows to have better communication with family, the mandate came down to leave windows closed. However several days ago I did my "window visit" and Mom's window was open. Who opened it? Upon inquiry we were told they're opening windows for fresh air. So which is it? Fresh air or germ laden air?
 - Residents are lonely but now are alone. Some cry all day. Some sleep all day and are up all night.
 - Residents who leave their rooms because they think they are all alone are scolded for doing so as if in their aging and/or state of dementia (which such facilities should be able and prepared to handle) they can stay cooped up...for now 2+ months and not exhibit ill affects?
- Meals are delivered to rooms in little styrofoam cups. This hardly looks like a meal to residents. Mom has dropped 15 pounds since January. She weighs all of 101 which is less than when she was going through chemotherapy. At what point does someone say enough is enough? We saved them from COVID just to watch them languish and fade away from isolation and loneliness.
- There are residents in facilities who are permitted to leave for life-saving procedures (eg dialysis). Why are not the same PPE for those residents and transports available to families? Seems rather minimal to me.
- Who decides when "end of life access" is granted? Only God knows the day of our birth and the moment of our death. Context - my father passed away less than an hour before we were to take him home, home to his house because he was doing so well. These residents are dying before our very eyes. And even at this point if all such facilities were "opened up", sure, we've lost the better part of three months but we've lost portions of our loved ones; not their days but them, their minds, their memories, their anxious thoughts, hugs and touch. We cannot get back any of that.
- Whether privately or publicly owned, these facilities need to be required to have a family council who can advocate for all residents

and be the eyes and ears for those who have no voice and no family. We're being forced to rely on staff who may or may not be doing "their job" but who largely do not know our loved ones. And likely some who just don't care.

This has been lengthy and in some respects just the tip of iceberg. The greatest issues are the disparity between staff privileges and family privileges. They just don't align. We're all still learning about COVID. I understand that. But human dignity and quality of life regardless of age is priority and paramount, pre and post-COVID. And secondly, you're so concerned about COVID-19 that you have forgotten that the body is an entire thing. Keep the lungs healthy but forget the mind and soul. It's all connected. Why take extraordinary measures to fight disease and prolong life to be left in solitary at perhaps one of the toughest times in one's life? I implore you to admit your failings, your lack of foresight, apologize for your ignorance, ask forgiveness of those you have wronged, and seek to do the right thing. May I be so bold to say that it's childish and insulting to have our Governor pine about not being able to enjoy Cedar Point with his grandchildren. That is a mere inconvenience, maybe a disappointment, not a prolonged life and death posture or disposition for countless aging Americans. Do the right thing.

Respectfully submitted,

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