



Advocating for Life, Faith, and Freedom in the Public Square

To: Members of the Senate Health Committee
From: Chris Long, President Ohio Christian Alliance
Re: Proponent Testimony Sub. H.B. 236-10

I would like to thank Chairman Huffman, Vice Chair Johnson, Ranking Member Antonio, and members of the Senate Health Committee for hearing our testimony today in support of Sub. H.B. 236-10, legislation that will assure the rights of patients to receive visitors/advocates. Sub. H.B. 236-10 states, "The department of health shall create a 'Never Alone' information sheet that describes all of the duties, prohibitions, requirements, and rights established under section 3792.05 of the Revised Code, including the following: (a) That a congregate care setting is prohibited from denying a patient or resident access to an advocate except as provided in division (D)(2) or (E) of section 3792.05 of the Revised Code; (b) That a congregate care setting is prohibited from prohibiting a patient's or resident's advocate from being physically present with the patient or resident in the care setting except as provided in division (D)(2) or (E) of section 3792.05 of the Revised Code; Sub. H.B. 236-10 addresses the concerns of both the patients and their visitors, as well as addressing the concerns of the medical facility."

Our office received many calls from individuals seeking assistance as they were kept from seeing their loved ones during the COVID-19 shutdown over a nearly two-year period. In April of 2020 an OCA board member had a medical emergency and was rushed to the hospital for emergency surgery. Neither his wife, family, nor clergy were permitted to see him. This was early in the COVID-19 pandemic. But we continued to receive reports for months from those who had been prevented from seeing their loved ones in Ohio's hospitals, nursing homes, and assisted living centers. Our office received a message about a Catholic priest who was called by the family to administer last rites to a parishioner who was near death. The priest was shocked when he was told by the hospital that he was not permitted to enter at that time and that he would have to wait until the patient had deteriorated further. The confusion that abounded in Ohio's hospitals and nursing homes on this issue was troubling and unwarranted.

As Christians, we are compelled to minister to the sick and afflicted. Matthew 25:35-39 reads, 36. I was naked and you clothed me, I was sick and you visited me, I was in prison and you came to me.' 37. Then the righteous will answer him, saying, 'Lord, when did we see you hungry and feed you, or thirsty and give you drink?'

38. And when did we see you a stranger and welcome you, or naked and clothe you?
39. And when did we see you sick or in prison and visit you?'
40. And the King will answer them, 'Truly, I say to you, as you did it to one of the least of these my brothers, you did it to me.'

The shutdown policy that locked nursing home residents and those receiving medical care in our hospitals away from their loved ones persisted for months. The Ohio Christian Alliance issued a public appeal to Governor DeWine, urging the Governor to open up visitation so that Ohioans could care for and properly advocate for their loved ones in hospitals, nursing homes, and assisted living centers. I have attached the letter as part of my testimony today. It was written in June of 2020. Two weeks later, Governor DeWine announced a limited visitation plan for Ohio's nursing homes, assisted living centers, and hospitals.

Another important aspect of this legislation is that it assures that family members will be able to fulfill their roles as medical advocates. Patients who are already enduring medical and emotional trauma are sometimes not able to advocate for themselves. They need the help and support of family members to ensure that the medical staff are aware of their medical needs and wishes. This issue came close to home for me personally, as our youngest daughter last year at this time was hospitalized with severe pain and a high fever. She was admitted for what was thought to be kidney stones at the time. For the first few days of her hospitalization, medical staff stumbled about, not knowing really what was wrong with our daughter. After more tests were conducted, a CT scan revealed shadowing in the lower spinal area and an MRI confirmed a large tumor. After much consultation by some of the medical members of our family with hospital staff, a course of action was carried out with careful advocacy. Our daughter had a 6-1/2 hour surgery to remove the tumor in her spine by a neurosurgeon. Her entire hospital stay, including rehab, was 21 days. She was 22 years of age and was never alone night or day in the hospital, as a family member was always with her. I can't imagine if this medical emergency had happened during the time of the COVID-19 shutdown - what would have been the end result? Members of my family had to advocate for one of the better neurosurgeons in the area to perform the very delicate and extensive surgery. Thankfully, the tumor was benign, and my daughter has recovered, is back to work, and getting on with her life. It underscores the importance of this legislation.

The Never Alone Act, Sub. H.B. 236-10, will assure Ohioans that they will have the care, encouragement, and advocacy of family, friends, and clergy during their time of medical treatment and nursing care, even during a time of national medical emergency. It is for that reason that we urge the Senate Health Committee to pass Sub. H.B. 236-10.

Thank you, Chairman Huffman, Vice Chair Johnson, Ranking Member Antonio, and members of the Senate Health Committee for hearing our testimony today in support of Sub. H.B. 236-10. I would be happy to answer any questions you may have at this time.