



ELDERLY ADVOCATES  
*Dedicated to Quality Care in Ohio*

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P.O. Box 42282 Cleveland, Ohio 44142

[www.elderlyadvocates.org](http://www.elderlyadvocates.org)

[contact@elderlyadvocates.org](mailto:contact@elderlyadvocates.org)

Written Testimony on HB 770

Submitted by **Paula Mueller**

Aging and Long-Term Care Committee, **12/2/2020**

Chair Ginter, Vice Chair Swearingen, Ranking Member Howse, and the members of the House Aging and Long-Term Care Committee,

My name is Paula Mueller, I am the founder of Elderly Advocates, a non-profit, nonpartisan organization that has a mission to improve the quality of life for all residing in long-term care. Thank you for giving us the opportunity to submit Proponent Written Testimony on House Bill 770.

It is the families hope that you will pass a bill that helps alleviate some of the severe suffering, struggling, and high possibility of a bad outcomes their loved ones and they have endured as Ohio continues to be a state that has a high number of deaths in long-term care during this pandemic. The media has reported Ohio is one of 18 states in which long-term care accounts for forty percent of all deaths. Ohio has reported over 6,000 deaths in long-term care facilities. These 6,000 deaths are someone's mother, father, sister, brother, or other loved family member. The families were led to believe if they accepted being shut out or locked out of facilities, their loved one would be protected until a safe plan was engaged for them to resume visiting. However, their loved ones were left unprotected as it is now obvious COVID-19 cannot be stopped from coming into a facility, no meaningful outside oversight has resulted in many stories of neglect, and no hope of a plan to be engaged that will once again allow them to assist, support, advocate and protect those loved family members that



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they promised them they always would. By failing to protect them from COVID-19, we have now left them with also being neglected, and declining from isolation and loneliness, we have failed in a legal and moral obligation to provide meaningful living to the elders who have given so much to us and deserve way better than this horrific living they are enduring during a pandemic. We have attached a before and after picture that represents many in what protection looks like when it fails.

**We are asking for the following changes to be made in HB 770:**

1. **Replace** the word Essential Caregiver with Resident Representative throughout the bill.
  - **Rationale:**  
Our organization and families do not feel there is a need to designate a new title of “Essential Caregiver” through any state legislation as they have already been defined as a “Resident Representative” and given legal authority through our Federal Laws contained in 42CR 483.5. Being an “Essential Caregiver” is one of the common activities a “Resident Representative” performs as they are able in their role.
2. **Remove** any wording giving facilities consultation or authority to approve visitors.
  - **Rationale:**  
The resident or their legal representative has always held the right to determine who visits the resident. The facilities should never have to be consulted on this choice as it has never been required in the past as we feel this is a violation of residents’ rights guaranteed to them by Federal Law.
3. **Remove** requirements to visit to include duties such as meal set up, grooming or companion visits.



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- **Rationale:**

The Resident Representatives have never been required to show their worth to visit to a resident with determination made by a facility as to what services a visitor can supply. This is in violation of Resident Rights and has never been a condition or requirement of visiting.

This appears to be forcing “Resident Representatives” to be unpaid volunteers for services the facility is paid to do. Being forced into a volunteer position should not be a requirement in the right to visit.

4. **Add** that a resident should always have access to their Resident Representative (aka primary family support person) in an emergency.

- **Rationale** is that a “Resident Representative” is essential to the resident and different from any other type of general visitor but equal importance as a Physician, Ombudsman and other agencies that protect residents are regarded. This designation has been recently added to Federal Laws to the as cited by the Justice in Aging, Issue Brief 2 of which a copy is attached.

5. **Add** In an emergency the resident shall always have access to their Resident Representative whether regardless of COVID-19 status in facility or community, except for a 14-day period to prepare a safe plan.

**Rationale** is that it is proven COVID-19 cannot be kept out of facilities whether staff brings in, poor infection control or the facility voluntarily or may be forced to bring COVID-19 patients directly into the facility. When there is an outbreak, that is when it is crucial for the resident to have in person access to their Resident Representative.



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6. **Add** that a “Resident Representatives” need visiting that allows sufficient time for person centered assistance which cannot be engaged in visiting hours given to general visitors.

**Rationale** being a Resident Representatives does many things the facility does not do, they assist the resident to help make care and treatment decisions, they handle financial and personal affairs of the resident, they shop for food and personal items the facility does not provide, they ensure the needs of the resident are met, and they oversee the overall wellbeing of the resident on a daily basis, not just certain hours of the week.

7. **Add** to stop the quarantine of residents who have not been exposed or show symptoms of COVID-19 as this deters the resident from having access to their legal representative.

- **Rationale:** Many staff are not being quarantined unless they show symptoms and sometimes not quarantine when they have been exposed until showing symptoms. The same should be engaged for residents.

8. **Add** a solution for enforcement by either monetary penalties or meaningful penalties for those found violating this bill that the immunity bill will not provide protection for violating this bill.

- **Rationale:** We have good law already. However, they are many times problematic as they are difficult to get enforced.

The most vulnerable population in long-term care have been left unprotected. They have been left to fend for themselves when they are unable. This has taken a very bad toll on residents, their families and even healthcare workers who find relief in the families help. It is time to let one person in who can help turn this disaster course we are on around. The resident having access to just their Resident Representatives will provide much needed immediate relief to them.



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Thank you for the opportunity to give this written testimony. Please contact us with any additional questions you may have or additional input we may be able to give from families and those working in these facilities.

Respectfully,

Paula Mueller, Founder  
Elderly Advocates