

Bill: SB 0813 Health Care Facilities – Access to Telephones

Position: Support with Amendments

Date: March 6, 2024

The Maryland Long-Term Care Ombudsman program advocates for residents in nursing homes and assisted living facilities in Maryland including residents that reside in continuing care retirement communities. Ombudsmen work to resolve complaints that can have adverse effects on the quality of care, safety, health, and quality of life of the citizens that reside in these facilities. In Maryland, ombudsmen provide these services to the over 50,000 citizens that live and receive services in nursing homes and assisted living facilities.

I think most of us take having a telephone for granted. This bill will enable residents to have a phone in their room. What does this mean for the resident? Currently, in many cases, there is not a phone in the resident's room, which means that resident must use a facility phone to make calls. The resident must make arrangements with the staff to use a phone. Often the "arrangement" is to use a phone at the nurses' station, common area, or in one of the staff members' offices. There are issues related to privacy and confidentiality when calls are made at the nurses' station and often it is very difficult for a resident to schedule a time to use the phone in a private space. This significantly limits the individual's access to a phone. For residents that cannot leave their room or do not get out of bed neither of these options or possible. Then they don't have the ability to use a phone at all. For Individuals that have hearing loss and other disabilities, neither of these options are solutions.

For many of us, a phone is like an appendage. You may be thinking to yourself – a telephone means a cell phone. For many residents of long-term care facilities, this is a technology that they are either unfamiliar with, unable to afford, or unable to physically operate. A phone provides an element of freedom and can help combat loneliness. A phone allows access to advocacy and support. Phones can even save lives when a call for medical assistance is needed, and a staff member is not available or is unresponsive.

Now that we've established a fraction of the benefits of having a phone, let me elucidate some of the reasons why phones should be private and available to the individual rather than being "reasonably accessible."

Social isolation has always been an issue in long-term care settings. Telephones provide a connection to the outside world and help maintain the resident's connection with family and friends. Mental health and other health care services can be accessed by making or receiving a phone call.

When there are issues at the facility, the resident can communicate with staff at the facility about those issues. For instance, when call bells are not working or not being answered by staff in a timely manner. Having a telephone in the room allows conversations to be held in privacy rather than be overheard by others in a public place like the nurses' station. Additionally, the noise and activity level at the nurses' station or in other common areas can make communication on the phone very difficult.

Having a landline can make connecting with Alexa or Echo possible. This can be very helpful for those with visual impairments. Additionally, some buildings have limited, spotty, or no cell phone service available.

Having a phone allows residents to speak with advocates, discharge planners, religious institutions, and other organizations. Some residents may need to take care of personal business, pay bills, or order food; a telephone will make that possible. For family and friends of residents, it provides peace of mind knowing that they call their spouse, mother, father, sister, brother, family member or friend residing in long-term care setting to talk with them on a regular basis.

I am also asking for an amendment so that residents would not be charged for the use of a land line whether the resident is there for a brief period of time, or it is their home. Many residents have a very fixed income. Paying for phone service when only receiving a personal needs allowance is often prohibitive.

How often do you use your phone? Do you want to share your phone with the person next to you? Raise your hand if you have a phone on you right now. In

thinking about this bill, I know that I have often taken telephone use for granted. Do you take it for granted? For this reason, I am supporting this bill with amendments. I believe every long-term care resident should have a phone in their room and not have to share the phone with their roommate.

I am requesting a favorable report for this bill with amendments.

I respectfully ask for my comments to be considered.

Sincerely,

Stevanne Ellis

Maryland State Long-Term Care Ombudsman