

Testimony for HB 962 - SUPPORT for the bill

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In the second week of March 2020, Maryland long term care facilities were locked down across the state. We are approaching a full year of family and friends being unable to see their loved one in person, except in some cases of brief limited outdoor visits in early fall. During these months the concept of planned visits from “essential caregivers” – individuals designated to be able to help with care of their loved one in their room on a regular basis -- has drawn growing support from advocates for nursing home residents and from many caregivers.

My husband is one of the thousands of residents in long term care in Maryland who has suffered physical and mental health consequences from the extreme and lengthy isolation from those who love him. While we reside in Baltimore City and are supporting HB806, which would make essential caregiver something every long term care resident would have a right to, we understand and sympathize with Washington County’s desire to provide families in their largely rural county to have another possible route for ensuring essential caregiver becomes a reality.

The impact of isolation from family on physical and mental health in general, and particularly since the pandemic, has been widely researched and consistently and convincingly demonstrates the negative impact on residents, families, and staff who provide direct care. Rather than cite statistics from dozens of studies, I will quote segments from a document published in *Gerontologist* on December 9, 2020, entitled “#MoreThanAVisitor: Families as “Essential” Care Partners During COVID-19.” Conclusions the authors draw from the research include:

- Research shows that banning family visits has negative consequences for residents, but also families themselves, and direct care workers.
- Policies prohibiting family visits are guided by a biomedical model and a narrow understanding of health that prioritizes infection control. It disregards the social and relational aspects of care, neglecting the mental health and well-being of older adults and those who care for them.
- The absence of families leaves significant care delivery gaps. Social support and the provision of supplies can be contributed remotely, but doing so requires resources and staff facilitation, adding to workloads.
- Without family support, care staff attempt to fill the voids, which during COVID-19 may require them to be all things to all residents, placing greater burden on staff.

Some families, like my own, have been able to be with their loved one in person by receiving access under the Compassionate Care guidance from CMS. While grateful for that privilege, it was a struggle requiring time, persistence, awareness of how to make the case and navigate the bureaucracy—requirements not easy for many families to meet. It pains me and my husband to know that such a reasonable and literally life-saving plan is not a right of every resident in his nursing home and in all long term care facilities in the state.

PLEASE, make sure this bill becomes law in the state of Maryland! You will be hard pressed to find constituents, regardless of political affiliation, who have not been negatively affected by the painful separation from loved ones they have experienced for months. This bill is a modest solution; it keeps protection from

the spread of coronavirus in the forefront with reasonable and effective safety measures, while it will literally save lives that would be taken by loneliness and declining will to live.

Respectfully submitted,

Dorothy K. Burt