Empowering People to Lead Systemic Change



1500 Union Ave., Suite 2000, Baltimore, MD 21211 Phone: 410-727-6352 | Fax: 410-727-6389 DisabilityRightsMD.org

Maryland Senate Finance Committee – Bill Hearing Senate Bill 069: Maryland Department of Health - Access to Telephones - Study Tuesday, January 21, 2025, 3:00 PM Position: Support with Amendments

Disability Rights Maryland (DRM) is the state-designated Protection and Advocacy agency, authorized under federal law to protect and advocate for the rights of individuals with disabilities. DRM works with individuals with disabilities who are admitted to psychiatric facilities and that reside at assisted living facilities and nursing facilities, on issues related to abuse, neglect, and rights violations. We appreciate the inclusion of psychiatric hospitals in this study, as access to phones is a significant barrier to our ability to communicate with our clients and other patients who contact us that are admitted to psychiatric facilities.

Many times, patients and residents of the three settings to be studied under Senate Bill 069 must rely on telephones at nurses' stations or other high traffic, congregate areas, which do not provide privacy and may not always be readily accessible for residents who require assistance with transferring out of bed, ambulating through the facility, dialing a phone, etc. This lack of privacy and accessibility makes it difficult to contact our clients in these settings and typically requires us to travel to the facility to meet with our clients, at times just to get basic information needed to begin an investigation, when a telephone call would suffice. Additionally, the lack of privacy can be a barrier for a client or potential client to access assistance or share facts and information, for example when they are reporting on abuse, neglect or rights violations perpetrated by staff at these facilities.

The lack of private, accessible telephones within these facilities is also a barrier to appropriate health care. (e.g. smart phone apps for monitoring diabetes and accessing medical records) and to the ability of patients to communicate with family and friends. The isolation caused by the barriers to communication with family, friends, and advocates can be detrimental to the physical and mental well-being of patients.

The proposed study under Senate Bill 069 may also assist nursing facilities and psychiatric facilities with coming into compliance with their respective patients' rights requirements (COMAR 10.07.09.08; Health-Gen. § 10-702 (b)) that require these facilities to provide patients with reasonable access to private use of a telephone and the ability to communicate with individuals and services within and outside the facility, by providing potential funding opportunities and programs. Assisted living facility residents have a similar right to privacy in using a common use telephone, which the nature of such a congregate setting is unlikely to provide. All three types of facilities, whether privately or publicly funded and operated, can benefit from partnering with the Maryland Department of Health, given its statewide authority and resources, in implementing any potential action plans or recommendations that are the result of this study.

Proposed Amendments

- 1. **Section 1(b)(3)** identify and assess any potential alternatives to providing landline telephones, including:
 - i. Cellular phones;
 - ii. Tablets; and
 - iii. Assistive technology with communication features.
 - iv. Identify potential federal, State, or local programs that provide free or reduced cost cellular phones, tablets, or assistive technology with communication features.
 - v. Provide a comparative cost analysis with funding sources identified under section 1(b)(5).

Assisting patients at facilities in obtaining personal communication devices will help ensure they have reliable access to a means to communicate with people outside of the facility and

that they are able to communicate privately. There are numerous programs that provide free or reduced cost cellular phones, tablets, and assistive technology based on factors such as a person's age, disability, or income (e.g. <u>USA.gov USAC Lifeline Support, SafeLink Wireless, EASY.wireless, etc.</u>) These programs can help reduce the potential cost to the state that landlines alone would create, and facilities already have staff, such as social workers and activities directors, that can assist patients with applying for these programs. Finally, assisting patients with obtaining personal communication devices will mitigate the risks of social isolation and aid in the patient's successful discharge to the community or transfer to a different facility since they will be able to maintain their ability to communicate with family, friends, advocates, and medical providers.

For these reasons, DRM strongly supports Senate Bill 069 and urges a favorable report.

Respectfully,

Randi A. Ames, Esq. Managing Attorney Disability Rights Maryland 1500 Union Ave., Suite 2000 Baltimore, MD 21211

Direct: 443-692-2506

RandiA@DisabilityRightsmd.org