

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: SB-1451

AN ACT CONCERNING THE RECOMMENDATIONS OF THE WORKING
GROUP TO STUDY STAFF SAFETY ISSUES AFFECTING HOME HEALTH

Title: CARE AND HOME HEALTH AIDE AGENCIES.

Vote Date: 3/12/2025

Vote Action: Joint Favorable Substitute

PH Date: 3/10/2025

File No.:

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SPONSORS OF BILL:

The Public Health Committee.

REASONS FOR BILL:

The bill is an extension of last year's efforts to make enhance provisions on staff safety issues for home health care and home health aide workers. It will require hospice agencies to do monthly safety assessments and to comply with certain workplace safety-related training requirements. Medicaid reimbursement would be connected to their compliance with training requirements, and it would allow the Department of Social Services (DSS) to provide Medicaid rate enhancement to agencies that comply with the new requirements. Home health care and hospice agencies would be required to report to the Department of Public Health (DPH) any threats or abuse against staff members if the incidents relate to the clinician's employment. Providers who transfer or refer patients to home health care and hospice agencies will be required to provide any documentation or information the provider has on the topics that the agency must collect during client intake.

RESPONSE FROM ADMINISTRATION/AGENCY:

Natasha M Pierre, Esq., Office of the Victim Advocate (OVA):

Ms. Pierre referred to the death of Joyce Grayson the home health provider killed while assisting a patient at home. She stated that the Occupational Safety and Health Administration (OSHA) determined that Joyce Grayson's home health care agency and employer failed to protect Ms. Grayson. OSHA determined in their report that the home

health care agency didn't have measures in place to protect employees against a known hazard. The office supports the bill as home health care agencies would be required to provide critical information to clinicians before they provide any service, and it would ensure clinicians are aware of any protentional risks.

NATURE AND SOURCES OF SUPPORT:

Connecticut Hospital Association (CHA):

CHA understands the intent of the bill is to ensure home health and hospice agencies have additional information about patients that could be useful in ensuring worker safety. They are concerned that this additional information could influence an agency's decision on whether to accept a patient referral. CHA is concerned that this bill would exacerbate hospital throughput issues and would like to amend the bill to ensure that no agency can deny the provision of services to a client solely based on the documentation or information provided by any referring health care provider.

Tracy Wodatch, President and CEO, CT Association for Healthcare at Home:

Ms. Wodatch supports the bill as it reflects the recommendations of the Workforce Safety Working Group which she chaired but suggests certain amendments. She stated that the working group recommended including hospice agencies in section 2 and 3 of the bill but she notes that a hospice provider has issues with hospice being included in section 1. She believes that if the state requires safety assessments, then it must also provide a standardized system for processing patient information and differentiate risk. She would like to have the bill include a state-maintained system as it would reduce the burden on home health agencies, as well as increase efficiency and accuracy. She would also like monthly staff meetings to be clarified to include other communication methods solely rather than requiring in person meetings as she believes it will remove unnecessary administrative burdens on home health agencies.

Teri Henning, Vice President, Government Affairs, Aveanna Healthcare:

Ms. Henning stated that they support the bill with a clarifying amendment about monthly staff meetings. She commented that the bill would not require a referring provider to do any additional research for patient information and it is limited to information in their possession.

Kimberly Sandor, MSN RN FNP, Executive Director, Connecticut Nurses Association:

Ms. Sandor stated that they support the bill but believes that it can go even further. She would like to ensure that staff can provide immediate notification of an emergency and also would like employers who provide services in the home to provide training to ensure that staff know who and when to call when an emergency happens. She added that employers who provide services in the home should be required to use a mental health consultant (MHC)

and the legislature or state can define what MHC is. She stated that they are lacking data and an analysis of data to inform and evaluate effective, meaningful strategies to address workplace violence. She would like the state to fund studies focused on understanding and defining workplace safety and wellness as well as understanding the home health care landscape. She believes that healthcare and community systems across Connecticut are fragmented, and she would like to see structures or systems formed where it would be easier to transfer information.

Cassandra Esposito, Advanced Practice Registered Nurse (APRN):

Ms. Esposito supports the bill but believes that certain areas need to be strengthened. She purposes that nurses must be able to decline unsafe assignments and that there should be a process for nurses to decline assignments as well for agencies not to pressure nurses to accept assignments. She added that safety alarms should be standardized and that agencies should provide GPS-enabled safety alarms that connect directly to emergency services. She believes that the bill should make the referral information transparent as nurses should never enter a home without knowing if there is a history of risk.

The following submitted testimony similar to that expressed above in support of this bill:

- John Brady, Executive Vice President, AFT Connecticut.
- Mag Morelli, President, LeadingAge Connecticut.
- Jennifer LeDuc, RN MSN, Director of Quality and Operations, Day Kimball Homecare.
- Chris Pankratz, President and CEO, Masters in Home Care, LLC.

NATURE AND SOURCES OF OPPOSITION:

None Expressed

Reported by: Piotr Kolakowski

Date: 3/13/25