



STATE OF HAWAII
STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
919 ALA MOANA BOULEVARD, ROOM 113
HONOLULU, HAWAII 96814
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543
March 23, 2016

The Honorable Representative Della Au Belatti, Chair
House Committee on Health
and
The Honorable Representative Karl Rhoads, Chair
House Committee on Judiciary
Twenty-Eighth Legislature
State Capitol
State of Hawaii
Honolulu, Hawaii 96813

Dear Representative Au Belatti, Representative Rhoads, and Members of the
Committees:

SUBJECT: SB 2384 SD1 – Relating to Licensing Inspections

The State Council on Developmental Disabilities (DD) **SUPPORTS THE INTENT OF SB 2384 SD1, specifically to SECTIONS 2-4 regarding Chapter 321, Hawaii Revised Statutes.** The bill requires the Department of Health (DOH) to conduct unannounced visits and inspections, including inspections for relicensing or recertification for State-licensed or State-certified care facilities on an annual basis and at such intervals as determined by the department to ensure the health, safety, and welfare of each resident, and unannounced inspections for license renewals for medical marijuana dispensaries.

The proposed new section to be added to Chapter 321, Hawaii Revised Statutes, described on Pages 2 and 3, would be consistent with all other relicensing and recertification inspections of health care facilities under the regulatory responsibility of DOH. Whether visits and inspections are scheduled or not, State-licensed or State-certified homes and facilities must meet licensure and certification requirements. These requirements are in effect 24 hours per day, seven days a week. Unannounced visits and inspections do not guarantee the health, safety, and welfare of residents in a home or facility. However, they do provide integrity to the process of ensuring that the home or facility is providing a high standard of quality services.

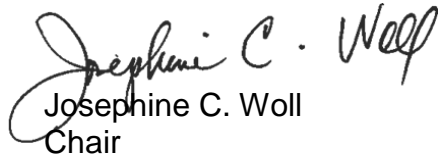
The Honorable Representative Della Au Belatti
The Honorable Representative Karl Rhoads
Page 2
March 23, 2016

Thank you for the opportunity to submit testimony supporting the intent of
SB 2384 SD1.

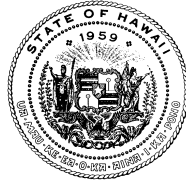
Sincerely,



Waynette K.Y. Cabral, MSW
Executive Administrator



Josephine C. Woll
Chair



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of SB2384 SD1
RELATING TO LICENSING INSPECTIONS**

REPRESENTATIVE DELLA AU BELATTI, CHAIR
HOUSE COMMITTEE ON HEALTH

REPRESENTATIVE KARL RHOADS, CHAIR
HOUSE COMMITTEE ON JUDICARY

Hearing Date: Wednesday, March 23, 2016 Room Number: 329

1 **Fiscal Implications:** None.

2 **Department Testimony:** Thank you for the opportunity to testify in SUPPORT of this bill as
3 amended.

4 This bill will require the relicensing or recertification inspections of care facilities to be
5 unannounced. The current statutes either require the relicensing inspections of Adult Residential
6 Care Homes (ARCHs), Expanded ARCHs (E-ARCH), and medical marijuana dispensaries to be
7 announced, or in the case of recertification of Community Care Foster Family Homes (CCFFH),
8 the statute is silent.

9 The Department prefers that relicensing or recertification surveys be unannounced in
10 order to maximize the readiness of the care homes or dispensaries for an inspection by the
11 Department. This will be consistent with all other relicensing inspections of health care facilities
12 under the regulatory responsibility of the Office of Health Care Assurance (OHCA), and is seen
13 as an improved safeguard for the public.

1 The technical amendments requested by the Department have been included in this SD1,
2 and as a result, the Department remains supportive.

3 Thank you for the opportunity to testify in SUPPORT of this bill.

4 **Offered Amendments:** None.

Date: March 22, 2016

To: Representative Della Au Belatti, Chair
Committee on Health

Representative Karl Rhoads, Chair
Committee of Judiciary

From: Suzie Schulberg
POLICY ADVISORY BOARD FOR ELDERLY AFFAIRS (PABEA)

Hearing: Wednesday, March 23, 2016, 10:00am
Conference Room 329, State Capitol

Subject: SB 2384, SD1 Relating to Licensing Inspections

Position: PABEA **supports** SB 2384, SD1 which requires the Department of Health to conduct unannounced visits and relicensing or recertification inspections for state-licensed care facilities.

The Policy Advisory Board for Elderly Affairs (PABEA) has a statutory obligation to advocate on behalf of senior citizen of Hawaii. While we advise the Executive Office on Aging, we do not speak on behalf of the Executive Office on Aging.

SB 2384, SD1 requires the Department of Health to conduct unannounced visits and relicensing inspections for state-licensed care facilities [and medical marijuana dispensaries.] The need for unannounced visits and relicensing inspections is paramount in order to maximize the effectiveness of the inspections for care homes. The unannounced visits would be consistent with other relicensing inspections of health care facilities under the regulatory responsibility of the Office of Health Care Assurance, are an important safeguard for the public and ensures the facilities are providing a high standard of quality on a day-to-day basis.

Thank you for giving PABEA the opportunity to submit testimony.

To: Representative Karl Rhoads, Judiciary Committee Chair
Representative Della Au Belatti, Health Committee Chair

Date: March 23, 2016

Re: SB 2384 SD1 – Relating to Care Facilities

Aloha Chair Rhoads, Vice-Chair San Buenaventura and Committee Members,
Chair Bellati, Vice-Chair Creagan and Committee Members

My name is Wannette Gaylord, I am the President of ARCA (Alliance of Residential Care Administrators) and a hands on Care Home Operator. I am in strong OPPOSITION to SB 2384 SD1, Section 1--explicitly to the sections regarding care homes and all of Sections 2 thru 4.

The current statute HRS 321-15.6 **“Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department.”** already has the provision for unannounced visits, in which they in fact do **“without notice”**.

Chapter 100.1-23 already requires the primary caregiver to secure a secondary caregiver when they leave the residence for any reason (out buying food, picking up medications or escorting a resident to a doctor’s appointment). This secondary caregiver is responsible for certain duties, but are not required to know the specifics about an annual inspection or survey.

Therefore, we encourage OHCA to continue doing their due diligence in conducting there unannounced visits to maintain the highest integrity of our Care homes.

But, I humbly request that your committee, having the understanding of what it takes to provide 24 hour care, 365 days a year to our kupuna determine that the current regulations already in place are suitable.

Mahalo for letting me testify in strong opposition to SB2384 SD1, Section 1--explicitly to the sections regarding care homes and all of Sections 2 thru 4.

Wannette Gaylord

Date: March 23, 2016
Time: 10:00 am
Place: conference Room 329
State Capitol

RE: SB 2384, SD1
(SSCR2513)

Good Morning Chair, Vice-Chair and Committee members:

My name is Lilia Fajotina, Vice-President of ARCA(Alliance of Residential Care Administrators)

I am strong Opposition to the SB2384. I am respectfully asking the committee to please retain the language of the HRS 321-15.6. " ANNUAL INSPECTION FOR RELICENSING SHALL BE CONDUCTED WITH NOTICE, UNLESS OTHERWISE DETERMINED BY THE DEPARMENT."

The current practice of the Department of Health through the Office of Health Care Assurance (OHCA) is to send notice to the care home operator regarding an upcoming annual relicensing inspection. The department has to give the certain day of the month but it does not announce the exact date. The reason of the Office of Health Care Assurance has promulgated this system to allow the care home operator to be present during the inspection. OHCA requires that the primary caregiver, the care home operator, and the residents must be present during the annual inspection.

The statute already has the provision for unannounced visits. Office of Health Care Assurance can conduct unannounced visit at any intervals at its discretion to confirm correction of deficiencies and/or to investigate complaints for suspicion of neglect and abuse.

In general, caregivers in all the community-based care facilities are providing excellent care to our aging and frail kupuna.

Thank you for allowing me to testify.

Lilia Fajotina
Vice-President, ARCA

ADULT FOSTER HOMECARE
ASSOCIATION OF HAWAII
P.O. Box 970092, Waipahu, Hawai'i 96797

March 23, 2016

RE: **SB2384 – Testimony in Opposition – HLT/JUD 3/23/16 – Rm. 329 10 a.m.**

Norma Tan
President
Adult Foster Homecare
Association of Hawaii

Dear Chairs Belatti and Rhodes, Vice Chairs Creagan and Buenaventura, and Members of the Committees:

Thelma Ortal
Immediate Past
President
Adult Foster Homecare
Association of Hawaii

We **oppose SB2384**, which allows the Department of Health (DOH) to conduct unannounced visits for the purpose of relicensing and recertification for the simple reason this law is redundant and would not achieve consumer protection or improved care.

The DOH already conducts unannounced visits. DOH has no limits as to the number of times they conduct unannounced visits or the time of day or night they can show up at our home where we live and demand to enter our home, as they often do. They can come every single night 365 days of the year. We have nothing to hide. We always let them in. We have no choice, and we don't see a problem with this system. We don't need this bill to ensure consumer protection.

The reason why licensing/certification visits were announced is to ensure efficiency. During a licensing/certification visit, the home is required to produce an incredible amount of paperwork that must often be updated. Only the operator or primary caregiver has access to these documents (mortgage documents, rental agreements, budget, insurance, criminal records clearance, fingerprinting, educational documents, TB clearance, and other financial information). If DOH shows up unannounced in the middle of the night and the primary care caregiver is unavailable, DOH will not be able to access the documents forcing DOH to either return for another visit, issue a corrective action plan, or deny licensure and find new homes for the clients, which is always detrimental to client care – not because the care fell below the standard, but only because documents may have not been available due to DOH's unwillingness to provide notice. Remember, we often hire licensed substitutes (CNAs) from agencies – people to whom one won't entrust sensitive financial documents like mortgage and budget documents - it's like giving these documents to a babysitter or gardener.

This would create a completely unworkable and chaotic system that would require DOH to expend additional resources unnecessarily. Meanwhile, our compensation rates have not been raised for almost 10 years; and now DOH is starting to talk about licensure fees.

The problem stems from the State's lack of understanding of Community Care Foster Family Homes (CCFFHs). We are not facilities. We are not "care homes" or "care home operators" as we are referred to in some committee reports. We are basically families who have accepted our clients as part of our family. We don't have a custodian of records on duty at all times like other facilities. We only have a maximum of 3 clients, not 5, 8, 15 or hundreds. Remember, we are required to keep some of the documents above on everyone who lives in our household whether they provide care or not.

Visit us unannounced anytime to ensure patient care and consumer protection. But if you need us to get our mortgage, rental, budget, fingerprints, and over 50 other documents (no kidding – this is the amount of documentation we are required to keep), you must give us some notice. For these reasons, we **oppose SB2384**.

Very truly yours,
Norma Tan - President


About AFHA

The Adult Foster Home Association of Hawaii (AFHA) is the industry trade association of providers under the Community Care Foster Family Home program under the Department of Human Services, State of Hawaii. With a membership of almost 750 providers, AFHA's mission is to promote the interests of providers as well as resident clients. AFHA members provide 24-hour care to resident clients 7 days a week, 365 days a year.

Aloha Chair Belatti, Chair Rhoades and committee members:

I am a senior citizen and a resident of House District 19 and Senate District 9. I am a member of the CARE Coalition and active in AARP, Kokua Council and the Hawaii Alliance of Retired Americans as well as the Legislative Committee of PABEA.

I urge your strong support of SB2384, requiring the Department of Health to make unannounced inspections of care homes. There is no down side to this.

Unannounced inspections allow the Department to determine that the facility is safe and meets standards. This would in turn be of benefit to the care operator who can then "advertise" that he/she is compliant and has met tandards have been met and that the facility is approved.

Please ensure passage of SB2384.

Mahalo for the opportunity to testify.

Barbara J. Service

HLTtestimony

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 23, 2016 9:11 AM
To: HLTtestimony
Cc: victor.ramos@mpd.net
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/23/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Victor K. Ramos	Individual	Support	No

Comments:

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To: Health Committee Chair Representative Della Au Belatti
Judiciary Committee Chair, Representative Karl Rhoads

Date: 23 March 2016

Re: SB 2384 – Relating to Care Facilities

Aloha Chair Belatti, Vice-Chair Richard Creagan and Committee Members;
Chair Rhoads, Vice-Chair Joy San Buenaventura and Committee Members

My name is Ramon Sumibcay. I am a Care Home Operator in Makakilo. I am also Vice-President of ARCA (Alliance of Residential Care Administrators). I am in strong OPPOSITION to the bill in particular to the section regarding care homes.

I am respectfully asking both Committees to retain the language of the HRS 321-15.6: **“Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department.”**

Community-based care facilities are governed by different regulations regarding unannounced visits and annual inspection for relicensing. The Department of Health has the jurisdiction of the Adult Residential Care Homes under the guidance of HRS 321-15.6. On the other hand, the Department of Human Services has the jurisdiction of the foster family homes using the guidelines under Hawaii Administrative Rules Title 17, Chapter 1454.

The current practice of the Department of Health through the Office of Health Care Assurance (OHCA) is to send notice to the care home operator regarding an upcoming annual relicensing inspection. The notice says “a certain day of the month but it does not announce the exact date.” The reason OHCA has adopted this system is to allow the care home operator to be present during the inspection. There are many reasons that the care home operator could be out the house at any given time; such as bringing residents to their medical appointments, picking up medications, buying provisions and supplies for the residents, outings for residents, and once in a while a trip to the emergency room. In addition, care home operators have also personal appointments and errands. OHCA requires that the primary caregiver, the care home operator, and the residents must be present during the annual relicensing inspection.

For transparency and for the safety and welfare of residents, as provided by a statute, OHCA can conduct unannounced visits at any intervals at its discretion to confirm correction of deficiencies and/or to investigate complaints for suspicion of neglect and abuse.

In the Senate Committee hearing last February 17, the Department of Health stated in its testimony that: “the Department recognizes and understands that care home operators have many responsibilities and cannot always remain in the home. However, if the Department stops by for an inspection or visit and the primary caregiver or homeowner is not home, any patients in the care home must be left in the care of a secondary caregiver. **This secondary caregiver will be able to answer any of the questions that the Department**

may pose, and the primary caregiver's or homeowner's unavailability will not otherwise negatively impact the results of the Department's survey."

That testimony is absolutely inaccurate because, **per Chapter 100.1-23, a secondary caregiver is not required to know any matters about inspection or survey:**

(d) The primary caregiver or licensee acting as the primary caregiver must be present in the Type I ARCH at all times unless the primary caregiver or licensee acting as the primary caregiver has secured a substitute caregiver to provide temporary coverage for the primary caregiver or licensee acting as the primary caregiver.

(e) **The substitute care giver who provides coverage for a period less than four hours shall:**

- (1) Be at least eighteen years of age;
- (2) Have the ability to communicate, read and write in the English language
- (3) Be currently certified in first aid; and
- (4) Be trained by the primary care giver to make prescribe medications available to residents and properly record such action.

(f) **The substitute care giver who provides coverage for a period greater than four hours in addition to the requirements specified in subsection (e) shall:**

- (1) Be currently certified in cardiopulmonary resuscitation;
- (2) Be able to provide personal care to the residents, including bathing, dressing, transferring, feeding, and transporting residents, and be able to provide care as stipulated in the schedule of activities or care plan;
- (3) Have sufficient knowledge and experience in nursing techniques to care for the residents, including taking vital signs, observing for medication efficacy and any untoward reactions;
- (4) Be able to provide recreational programs as developed; and
- (5) Follow planned menus, prepare and serve meals, including special menus and be able to make appropriate substitutions, as required.

Furthermore, your Committee heard HB 2005 HD2 on February 17. This bill has a section that relates to annual inspections for relicensing. After the hearing, your Committee struck out that section:

PART II

SECTION 2. Section 321-15.6, Hawaii Revised Statutes, is amended by amending subsection (a) to read as follows:

"(a) All adult residential care homes shall be licensed to ensure the health, safety, and welfare of the individuals placed therein. The department shall conduct unannounced visits, other than the inspection for relicensing, to every licensed adult residential care home and expanded adult residential care home and any other community care home or day care center licensed or certified and under the purview of the department on an annual basis and at such intervals as determined by the department to ensure the health, safety, and welfare of each resident. Unannounced visits may be conducted during or outside regular business hours. All inspections relating to follow-up visits, visits to confirm correction of deficiencies, or visits to investigate complaints or suspicion of abuse or neglect shall be conducted unannounced during or outside regular business hours. Annual inspections for relicensing may be conducted during regular business hours or at intervals determined by the department. Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department."

Mahalo for your support and attention.

Sincerely,

Ramon Sumibcay, MHA, BSN, RN
ARCA, 1st Vice President

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 1:07 AM
To: HLTtestimony
Cc: cariagacora@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Dino Cacpal	Individual	Oppose	No

Comments:

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To: HLTtestimony
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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Teresita cacpal	Individual	Oppose	No

Comments:

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Grace A Andres	Individual	Oppose	No

Comments:

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SB2384

Submitted on: 3/21/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Maria Corazon E. Cariaga	Individual	Oppose	No

Comments: I am opposing this SB2384 because the CCFFH /HCBS providers are already following a very strict rules and regulations imposed by DHS /DOH . Providers does not want their certificates or licenses to be in jeopardy . The committees in charge into this hearing should take into consideration that these providers are working 24 hours a day , 7 days a week , 365 or 366 days a year and no days off.We can have days off only with the help of an approved substitute caregivers by DOH . Policing is not a good way of checking each providers if we are following the provided rules and regulations. Thank you for giving me this opportunity to submit my testimony.

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Joane E. Cariaga	Individual	Oppose	No

Comments:

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Edgar Alba	Individual	Oppose	No

Comments:

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Met idiots Tiangsing	Individual	Oppose	No

Comments:

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Frances Marie E Cariaga	Individual	Oppose	No

Comments:

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Cristina Martinez	Individual	Oppose	No

Comments:

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Francisca Parayno	Individual	Oppose	No

Comments:

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Ligaya Fernandez	Individual	Oppose	No

Comments:

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Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Erlinda Mirasol	Individual	Oppose	No

Comments:

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From: mailinglist@capitol.hawaii.gov
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To: HLTtestimony
Cc: cariagacora@yahoo.com
Subject: Submitted testimony for SB2384 on Mar 23, 2016 10:00AM

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Tony Ibanez	Individual	Oppose	No

Comments: DOH can have their unannounced visits but Im still opposing this bill due to privacy act.

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From: mailinglist@capitol.hawaii.gov
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To: HLTtestimony
Cc: cariagacora@yahoo.com
Subject: Submitted testimony for SB2384 on Mar 23, 2016 10:00AM

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Lorilyn Lagundi	Individual	Oppose	No

Comments: I don't have a problem with the unannounced visits but I'm still opposing it. Thank you .

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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Sent: Tuesday, March 22, 2016 7:57 AM
To: HLTtestimony
Cc: cariagacora@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Franklin Mirasol	Individual	Oppose	No

Comments:

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To: Health Committee Chair Representative Della Au Belatti
Judiciary Committee Chair, Representative Karl Rhoads

Date: 3/22/16

Re: SB 2384 – Relating to Care Facilities

Aloha Chair Bellati, Vice-Chair Richard Creagan and Committee Members;
Chair Rhoads, Vice-Chair Joy San Buenaventura and Committee Members

My name is NORA SORIANO-TRIAS I am a Care Home Operator in Aina Haina. I am in strong OPPOSITION to the bill in particular to the section regarding care homes.

I am respectfully asking the Committee to retain the language of the HRS 321-15.6:
“Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department.”

Community-based care facilities are governed by different regulations regarding unannounced visits and annual inspection for relicensing. The Department of Health has the jurisdiction of the Adult Residential Care Homes under the guidance of HRS 321-15.6. On the other hand, the Department of Human Services has the jurisdiction of the foster family homes using the guidelines under Hawaii Administrative Rules Title 17, Chapter 1454.

The current practice of the Department of Health through the Office of Health Care Assurance (OHCA) is to send notice to the care home operator regarding an upcoming annual relicensing inspection. The notice says “a certain day of the month but it does not announce the exact date.” The reason OHCA has promulgated this system to allow the care home operator to be present during the inspection. There are many reasons that the care home operator could be out the house at any given time; such as bringing residents to their medical appointments, picking up medications, buying provisions and supplies for the residents, outings for residents, and once in a while a trip to the emergency room. In addition, care home operators have also personal appointments and errands. OHCA requires that the primary caregiver, the care home operator, and the residents must be present during the annual relicensing inspection.

The statute already has the provision for unannounced visits. OHCA can conduct unannounced visits at any intervals at its discretion to confirm correction of deficiencies and/or to investigate complaints for suspicion of neglect and abuse.

In the Senate Committee hearing last February 17, the Department of Health stated that: “the Department recognizes and understands that care home operators have many responsibilities and cannot always remain in the home. However, if the Department stops by for an inspection or visit and the primary caregiver or homeowner is not home, any patients in the care home must be left in the care of a secondary caregiver. This secondary caregiver will be able to answer any of the questions that the Department may pose, and the primary caregiver's or homeowner's unavailability will not otherwise negatively impact the results of the Department's survey.”

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To: Senator Rosalyn Baker, Chair, Commerce, Consumer Protection and Health
Committee
Vice-Chair Senator Michelle Kidani

Date: February 17, 2016, 9:00 AM, House Conference, Rm 229
Re: SB 2384 – Relating to Care Facilities

Aloha Chair Baker, Vice-Chair Kidani and Committee Members:

My name is Norma Tenorio/Geronimo Tenorio, a Care Home Operator.
My written testimony is in strong OPPOSITION to the bill.

HRS 321-15.6 has been in existence, I am respectfully asking the Committee to retain the language of the statute **“Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department.”**

Community-based care facilities are governed by different regulations regarding unannounced visits and annual inspection for relicensing. The Department of Health has the jurisdiction of the Adult Residential Care Homes under the guidance of HRS 321-15.6. On the other hand, the Department of Human Services has the jurisdiction of the foster family homes using the guidelines under Hawaii Administrative Rules Title 17, Chapter 1454.

The current practice of the Department of Health through the Office of Health Care Assurance is to send notice to the care home operator regarding an upcoming annual relicensing inspection. The notice says “a certain day of the month but it does not announce the exact date.” The reason OHCA has promulgated this system to allow the care home operator to be present during the inspection. There are many reasons that the care home operator is out the house like bringing residents to their medical appointments, picking up medications, buying provisions and supplies for the residents, outings for residents, and once in a while a trip to the emergency room. In addition, care home operators have also personal appointments and errands. OHCA requires that the primary caregiver, the care home operator, and the residents must be present during the annual relicensing inspection.

The statute already has the provision for unannounced visits. Anybody from the OHCA can conduct unannounced visits at any intervals at its discretion to confirm correction of deficiencies and to investigate complaints for suspicion of neglect and abuse.

The issue of unannounced visit resurfaced last year because a resident passed away in a community-based care facility due to a decubitus ulcer. I do understand the public sentiment regarding the death. In the 90s, there was another death due to the same cause. There was an emotional debate regarding the issue of “unannounced visit”. But such death could be prevented if people are accountable and responsible for what they do. It only takes some administrative actions and measures to prevent such horrible death. In the care giving industry, nobody wants such death to happen. Unannounced

visit could be a deterrent but not a solution if people involved in the care of the resident are not doing their responsibilities. What about oversight? Could we have done a better oversight after the case in the 90s? In other words, enacting bills for unannounced visit for relicensing survey is not the answer. We need to enforce, ACCOUNTABILITY, RESPONSIBILITY and strong OVERSIGHT,

In general, caregivers in all the community-based care facilities are providing excellent care to our aging and frail Kupuna, as indicated by only 2 incidents for the last 25 years. In 2012, Center for Medicare and Medicaid Services (CMS) reported 109 surgical deaths in Hawaii due to preventable complications. There are also many vehicular deaths occurring in our highways. Is there any law passed for conduct unannounced visits to surgical sites or to the DMV's?

Mahalo for your attention.

Sincerely,

Care Home Operator

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 9:59 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: Submitted testimony for SB2384 on Mar 23, 2016 10:00AM

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Jayvie Sumoba	Individual	Oppose	No

Comments: I strongly oppose the unannounced licensing of Adult Foster Homes and Care Homes for the following reasons: 1. For Adult Foster Homes we have already our Case Managers to supervise caregivers for the care of our patients as needed 24/7. 2. Unannounced visit is already in place but not licencing. 3. Unannounced licencing is not a guaranty of quality of care given to our clients. 3. We have scheduled appointments for our patients like; doctor's visit, picking up medications, physical therapies and as operators we work 24/7. Time management is so important to be efficient on what we do as caregivers. 4. Licensing people must schedule there visist so we can accommodate in a timely manner with professionalism as a team in the caregiving industry. We can have healthy discussions with regards to the strength or weakness of the program so we can improve it. 5. Unannounced is not a healthy and not a professional way of improving the industry. 6. If there is a uspicious violation of rules and regulations there are already rules and regulations in place . 7. This bill is time consuming and does not insure quality of care to our patients. Thank you very much for this opportunity to testify. Jayvie Sumoba, Adult Foster Home Big Island

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Cc: hsapla@yahoo.com
Subject: Submitted testimony for SB2384 on Mar 23, 2016 10:00AM

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Victoria Llasus Baker	Individual	Oppose	No

Comments: I strongly oppose the unannounced licensing of Adult Foster Homes and Care Homes for the following reasons: 1. For Adult Foster Homes we have already our Case Managers to supervise caregivers for the care of our patients as needed 24/7. 2. Unannounced visit is already in place but not licencing. 3. Unannounced licencing is not a guaranty of quality of care given to our clients. 3. We have scheduled appointments for our patients like; doctor's visit, picking up medications, physical therapies and as operators we work 24/7. Time management is so important to be efficient on what we do as caregivers. 4. Licensing people must schedule there visit so we can accommodate in a timely manner with professionalism as a team in the caregiving industry. We can have a healthy discussions with regards to the strength or weakness of the program so we can improve it. 5. Unannounced visit is not a healthy and not a professional way of improving the industry. 6. If there is a suspicious violation of rules and regulations there are already rules and regulations in place . 7. This bill is time consuming and does not insure quality of care to our patients. Thank you very much for this opportunity to tesfy, Victoria Baker, Adult Foster Home Big Island

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Cc: cariagacora@yahoo.com
Subject: Submitted testimony for SB2384 on Mar 23, 2016 10:00AM

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Maria E Cariaga	Individual	Oppose	No

Comments: Good AM. , I am a primary caregiver for CCFFH , a HCBS setting .I don't want the unannounced visit because we already working hard servicing the needy population yet they still want to police these certified and license homes. I don't know what they want to do , do unannounced visits so they can close the homes. Don't they know that these programs are the one helping the state in saving millions of dollars in sheltering and taking care of these people in our own residences? Thank you once again for this opportunity to testify online.

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Subject: Submitted testimony for SB2384 on Mar 23, 2016 10:00AM

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Helen Sumoba Sapla	Individual	Oppose	No

Comments: I strongly oppose the unannounced licensing of Adult Foster Homes and Care Homes for the following reasons: 1. For Adult Foster Homes we have already our Case Managers to supervise caregivers for the care of our patients as needed 24/7. 2. Unannounced visit is already in place but not licencing. 3. Unannounced licencing is not a guaranty of quality of care given to our clients. 3. We have scheduled appointments for our patients like; doctor's visit, picking up medications, physical therapies and as operators we work 24/7. Time management is so important to be efficient on what we do as caregivers. 4. Licensing people must schedule there visits so we can accommodate in a timely manner with professionalism and as a team in the caregiving industry. We can have healthy discussions with regards to the strength or weakness of the program so we can improve it. 5. Unannounced is not a healthy and not a professional way of improving the industry. 6. If there is a uspicious violation of rules and regulations there are already rules and regulations in place . 7. This bill is time consuming and does not insure quality of care to our patients. Thank you very much for this opportunity to testify. Helen Sapla, Afult Foster Home Big Island

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Benita Riingen	Individual	Oppose	No

Comments: The unannounced visit is been going around by the DOH thru CTA to the CCFFH/HCBS providers . Caregivers are used to already being visited without alarming them. But still I totally disagree with this SB2384 for the purpose of privacy . Thank you .

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Genevie tuliao	Individual	Oppose	No

Comments: I strongly oppose the unannounced licensing of Adult Foster Homes and Care Homes for the following reasons: 1. For Adult Foster Homes we have already our Case Managers to supervise caregivers for the care of our patients as needed 24/7. 2. Unannounced visit is already in place but not licencing. 3. Unannounced licencing is not a guaranty of quality of care given to our clients. 3. We have scheduled appointments for our patients like; doctor's visit, picking up medications, physical therapies and as operators we work 24/7. Time management is so important to be efficient on what we do as caregivers. 4. Licensing people must schedule there visist so we can accommodate in a timely manner with professionalism as a team in the caregiving industry. We can have healthy discussions with regards to the strength or weakness of the program so we can improve it. 5. Unannounced is not a healthy and not a professional way of improving the industry. 6. If there is a uspicious violation of rules and regulations there are already rules and regulations in place . 7. This bill is time consuming and does not insure quality of care to our patients. Thank you very much for this opportunity to testify. Genevie Tuliao, Big Island ARCH

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Subject: Submitted testimony for SB2384 on Mar 23, 2016 10:00AM

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Stacey Okano	Individual	Oppose	No

Comments: I am in opposition of this bill and humbly as that you hear my comments. SB2384 is not realistic for many reasons. I speak for myself when I say our care home has an open door policy and we love to have visitors. However, our residents and their loved ones know that should they show up announced they take the risk of the primary caregiver not being home and or the resident themselves. We are very involved with our residents thus having full schedules including medical appointments, "holo holo" expeditions, shopping days and many other outings. If the Department of Health requires visits to be made they should be scheduled so that we, the care home operators at least have an idea as to which day (Mon-Fri) of the month they will arrive so that we can be assured that we are indeed home. This just makes sense and is more practical than the Department of Health showing up unannounced and no one home. Please do not pass this bill. It does not make sense and is not realistic. Mahalo for your consideration.

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Jonnel Salom	Individual	Oppose	No

Comments: I strongly oppose the unannounced licensing of Adult Foster Homes and Care Homes for the following reasons: 1. For Adult Foster Homes we have already our Case Managers to supervise caregivers for the care of our patients as needed 24/7. 2. Unannounced visit is already in place but not licencing. 3. Unannounced licencing is not a guaranty of quality of care given to our clients. 3. We have scheduled appointments for our patients like; doctor's visit, picking up medications, physical therapies and as operators we work 24/7. Time management is so important to be efficient on what we do as caregivers. 4. Licensing people must schedule there visist so we can accommodate in a timely manner with professionalism as a team in the caregiving industry. We can have healthy discussions with regards to the strength or weakness of the program so we can improve it. 5. Unannounced is not a healthy and not a professional way of improving the industry. 6. If there is a uspicious violation of rules and regulations there are already rules and regulations in place . 7. This bill is time consuming and does not insure quality of care to our patients. Thank you very much for this opportunity to testify. Jonnel Salom, Adult Foster Home Big Island

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Estela Ellazar	Individual	Oppose	No

Comments: I strongly oppose the unannounced licensing of Adult Foster Homes and Care Homes for the following reasons: 1. For Adult Foster Homes we have already our Case Managers to supervise caregivers for the care of our patients as needed 24/7. 2. Unannounced visit is already in place but not licencing. 3. Unannounced licencing is not a guaranty of quality of care given to our clients. 3. We have scheduled appointments for our patients like; doctor's visit, picking up medications, physical therapies and as operators we work 24/7. Time management is so important to be efficient on what we do as caregivers. 4. Licensing people must schedule there visist so we can accommodate in a timely manner with professionalism as a team in the caregiving industry. We can have healthy discussions with regards to the strength or weakness of the program so we can improve it. 5. Unannounced is not a healthy and not a professional way of improving the industry. 6. If there is a uspicious violation of rules and regulations there are already rules and regulations in place . 7. This bill is time consuming and does not insure quality of care to our patients. Thank you very much for this opportunity to testify. Estela Ellazar, Big Island ARCH

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SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Edna Salom	Individual	Oppose	No

Comments: I strongly oppose the unannounced licensing of Adult Foster Homes and Care Homes for the following reasons: 1. For Adult Foster Homes we have already our Case Managers to supervise caregivers for the care of our patients as needed 24/7. 2. Unannounced visit is already in place but not licencing. 3. Unannounced licencing is not a guaranty of quality of care given to our clients. 3. We have scheduled appointments for our patients like; doctor's visit, picking up medications, physical therapies and as operators we work 24/7. Time management is so important to be efficient on what we do as caregivers. 4. Licensing people must schedule there visit so we can accommodate in a timely manner with professionalism as a team in the caregiving industry. We can have healthy discussions with regards to the strength or weakness of the program so we can improve it. 5. Unannounced is not a healthy and not a professional way of improving the industry. 6. If there is a suspicious violation of rules and regulations there are already rules and regulations in place . 7. This bill is time consuming and does not insure quality of care to our patients. Thank you very much for this opportunity to testify. EDNA Salom, Adult Foster Home Big Island

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Subject: Submitted testimony for SB2384 on Mar 23, 2016 10:00AM

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Carlina Fernandez	Individual	Oppose	No

Comments: I strongly oppose the unannounced licensing of Adult Foster Homes and Care Homes for the following reasons: 1. For Adult Foster Homes we have already our Case Managers to supervise caregivers for the care of our patients as needed 24/7. 2. Unannounced visit is already in place but not licencing. 3. Unannounced licencing is not a guaranty of quality of care given to our clients. 3. We have scheduled appointments for our patients like; doctor's visit, picking up medications, physical therapies and as operators we work 24/7. Time management is so important to be efficient on what we do as caregivers. 4. Licensing people must schedule there visist so we can accommodate in a timely manner with professionalism as a team in the caregiving industry. We can have healthy discussions with regards to the strength or weakness of the program so we can improve it. 5. Unannounced is not a healthy and not a professional way of improving the industry. 6. If there is a uspicious violation of rules and regulations there are already rules and regulations in place . 7. This bill is time consuming and does not insure quality of care to our patients. Thank you very much for this opportunity to testify. Carlina Fernandez, big Island ARCH

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To: Health Committee Chair Representative Della Au Belatti
Judiciary Committee Chair, Representative Karl Rhoads

Date: 23 March 2016

Re: SB 2384 – Relating to Care Facilities

Aloha Chair Belatti, Vice-Chair Richard Creagan and Committee Members;
Chair Rhoads, Vice-Chair Joy San Buenaventura and Committee Members

My name is Narcisa Jatico, Care Home Primary Caregiver. I am in strong OPPOSITION to the bill in particular to the section regarding care homes.

I am respectfully asking both Committees to retain the language of the HRS 321-15.6: **“Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department.”**

For transparency and for the safety and welfare of residents, as provided by a statute, OHCA can conduct unannounced visits at any intervals at its discretion to confirm correction of deficiencies and/or to investigate complaints for suspicion of neglect and abuse.

However, I am just respectfully requesting that to please spare with us one day, and that's the annual relicensing visit. The visit is primarily administrative visit just to ensure care facilities are in compliance with the requirements.

Not all substitute caregivers are required to know about the inspection. Per Chapter 100.1-23, a secondary caregiver is not required to know any matters about inspection or survey:

(d) The primary caregiver or licensee acting as the primary caregiver must be present in the Type I ARCH at all times unless the primary caregiver or licensee acting as the primary caregiver has secured a substitute caregiver to provide temporary coverage for the primary caregiver or licensee acting as the primary caregiver.

(e) The substitute care giver who provides coverage for a period less than four hours shall:

- (1) Be at least eighteen years of age;
- (2) Have the ability to communicate, read and write in the English language
- (3) Be currently certified in first aid; and
- (4) Be trained by the primary care giver to make prescribe medications available to residents and properly record such action.

(f) The substitute care giver who provides coverage for a period greater than four hours in addition to the requirements specified in subsection (e) shall:

- (1) Be currently certified in cardiopulmonary resuscitation;
- (2) Be able to provide personal care to the residents, including bathing, dressing, transferring, feeding, and transporting residents, and be able to provide care as stipulated in the schedule of activities or care plan;
- (3) Have sufficient knowledge and experience in nursing techniques to care for the residents, including taking vital signs, observing for medication efficacy and any untoward reactions;
- (4) Be able to provide recreational programs as developed; and
- (5) Follow planned menus, prepare and serve meals, including special menus and be able to make appropriate substitutions, as required.

Furthermore, your Committee heard HB 2005 HD2 on February 17. This bill has a section that relates to annual inspections for relicensing. After the hearing, your Committee struck out that section:

Mahalo for your support and attention.

Sincerely,



Narcisa Jatico, CNA
Care Home Primary Caregiver

To: Health Committee Chair Representative Della Au Belatti
Judiciary Committee Chair, Representative Karl Rhoads

Date: 23 March 2016

Re: SB 2384 -- Relating to Care Facilities

Aloha Chair Belatti, Vice-Chair Richard Creagan and Committee Members;
Chair Rhoads, Vice-Chair Joy San Buenaventura and Committee Members

My name is Teresita Oculito, Care Home Administrator. I am in strong OPPOSITION to the bill in particular to the section regarding care homes.

I am respectfully asking both Committees to retain the language of the HRS 321-15.6: **"Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department."**

For transparency and for the safety and welfare of residents, as provided by a statute, OHCA can conduct unannounced visits at any intervals at its discretion to confirm correction of deficiencies and/or to investigate complaints for suspicion of neglect and abuse.

However, I am just respectfully requesting that to please spare with us one day, and that's the annual relicensing visit. The visit is primarily administrative visit just to ensure care facilities are in compliance with the requirements.

Not all substitute caregivers are required to know about the inspection. Per Chapter 100.1-23, a secondary caregiver is not required to know any matters about inspection or survey:

(d) The primary caregiver or licensee acting as the primary caregiver must be present in the Type I ARCH at all times unless the primary caregiver or licensee acting as the primary caregiver has secured a substitute caregiver to provide temporary coverage for the primary caregiver or licensee acting as the primary caregiver.

(e) The substitute care giver who provides coverage for a period less than four hours shall:

- (1) Be at least eighteen years of age;
- (2) Have the ability to communicate, read and write in the English language
- (3) Be currently certified in first aid; and
- (4) Be trained by the primary care giver to make prescribe medications available to residents and properly record such action.

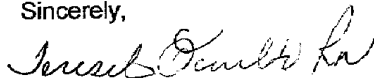
(f) The substitute care giver who provides coverage for a period greater than four hours in addition to the requirements specified in subsection (e) shall:

- (1) Be currently certified in cardiopulmonary resuscitation;
- (2) Be able to provide personal care to the residents, including bathing, dressing, transferring, feeding, and transporting residents, and be able to provide care as stipulated in the schedule of activities or care plan;
- (3) Have sufficient knowledge and experience in nursing techniques to care for the residents, including taking vital signs, observing for medication efficacy and any untoward reactions;
- (4) Be able to provide recreational programs as developed; and
- (5) Follow planned menus, prepare and serve meals, including special menus and be able to make appropriate substitutions, as required.

Furthermore, your Committee heard HB 2005 HD2 on February 17. This bill has a section that relates to annual inspections for relicensing. After the hearing, your Committee struck out that section:

Mahalo for your support and attention.

Sincerely,



Teresita Oculito, RN
Care Home Administrator

To: Health Committee Chair Representative Della Au Belatti
Judiciary Committee Chair, Representative Karl Rhoads

Date: 3-22-2016

Re: SB 2384 – Relating to Care Facilities

Aloha Chair Belatti, Vice-Chair Richard Creagan and Committee Members;
Chair Rhoads, Vice-Chair Joy San Buenaventura and Committee Members

My name is Catherine Salvador am a Care Home Operator in Hilo, HI. I am
in strong OPPOSITION to the bill in particular to the section regarding care homes.

I am respectfully asking the Committee to retain the language of the HRS 321-15.6:
**“Annual inspections for relicensing shall be conducted with notice, unless
otherwise determined by the department.”**

Community-based care facilities are governed by different regulations regarding
unannounced visits and annual inspection for relicensing. The Department of Health
has the jurisdiction of the Adult Residential Care Homes under the guidance of HRS
321-15.6. On the other hand, the Department of Human Services has the jurisdiction of
the foster family homes using the guidelines under Hawaii Administrative Rules Title 17,
Chapter 1454.

The current practice of the Department of Health through the Office of Health Care
Assurance (OHCA) is to send notice to the care home operator regarding an upcoming
annual relicensing inspection. The notice says “a certain day of the month but it does
not announce the exact date.” The reason OHCA has promulgated this system to allow
the care home operator to be present during the inspection. There are many reasons
that the care home operator could be out the house at any given time; such as bringing
residents to their medical appointments, picking up medications, buying provisions and
supplies for the residents, outings for residents, and once in a while a trip to the
emergency room. In addition, care home operators have also personal appointments
and errands. OHCA requires that the primary caregiver, the care home operator, and
the residents must be present during the annual relicensing inspection.

The statute already has the provision for unannounced visits. OHCA can conduct
unannounced visits at any intervals at its discretion to confirm correction of deficiencies
and/or to investigate complaints for suspicion of neglect and abuse.

In the Senate Committee hearing last February 17, the Department of Health stated in
its testimony that: “the Department recognizes and understands that care home operators have many
responsibilities and cannot always remain in the home. However, if the Department stops by for an inspection or
visit and the primary caregiver or homeowner is not home, any patients in the care home must be left in the care of a
secondary caregiver. This secondary caregiver will be able to answer any of the questions that the Department
may pose, and the primary caregiver's or homeowner's unavailability will not otherwise negatively impact
the results of the Department's survey.”

To: Health Committee Chair Representative Della Au Belatti
Judiciary Committee Chair, Representative Karl Rhoads

Date:

Re: SB 2384 – Relating to Care Facilities

Aloha Chair Bellati, Vice-Chair Richard Creagan and Committee Members;
Chair Rhoads, Vice-Chair Joy San Buenaventura and Committee Members

My name is Remedios Aguinaldo. I am a Care Home Operator in Waipahu. I am in strong OPPOSITION to the bill in particular to the section regarding care homes.

I am respectfully asking the Committee to retain the language of the HRS 321-15.6:
“Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department.”

Community-based care facilities are governed by different regulations regarding unannounced visits and annual inspection for relicensing. The Department of Health has the jurisdiction of the Adult Residential Care Homes under the guidance of HRS 321-15.6. On the other hand, the Department of Human Services has the jurisdiction of the foster family homes using the guidelines under Hawaii Administrative Rules Title 17, Chapter 1454.

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That testimony is absolutely inaccurate because, per Chapter 100.1-23, a secondary caregiver is not required to know any matters about inspection or survey:

(d) The primary caregiver or licensee acting as the primary caregiver must be present in the Type I ARCH at all times unless the primary caregiver or licensee acting as the primary caregiver has secured a substitute caregiver to provide temporary coverage for the primary caregiver or licensee acting as the primary caregiver.

(e) The substitute care giver who provides coverage for a period less than four hours shall:

- (1) Be at least eighteen years of age;
- (2) Have the ability to communicate, read and write in the English language
- (3) Be currently certified in first aid; and
- (4) Be trained by the primary care giver to make prescribed medications available to residents and properly record such action.

(f) The substitute care giver who provides coverage for a period greater than four hours in addition to the requirements specified in subsection (e) shall:

- (1) Be currently certified in cardiopulmonary resuscitation;
- (2) Be able to provide personal care to the residents, including bathing, dressing, transferring, feeding, and transporting residents, and be able to provide care as stipulated in the schedule of activities or care plan;
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PART II

SECTION 2. Section 321-15.6, Hawaii Revised Statutes, is amended by amending subsection (a) to read as follows:

"(a) All adult residential care homes shall be licensed to ensure the health, safety, and welfare of the individuals placed therein. The department shall conduct unannounced visits, other than the inspection for relicensing, to every licensed adult residential care home and expanded adult residential care home and any other community care home or day care center licensed or certified and under the purview of the department on an annual basis and at such intervals as determined by the department to ensure the health, safety, and welfare of each resident. Unannounced visits may be conducted during or outside regular business hours. All inspections relating to follow-up visits, visits to confirm correction of deficiencies, or visits to investigate complaints or suspicion of abuse or neglect shall be conducted unannounced during or outside regular business hours. Annual inspections for relicensing may be conducted during regular business hours or at intervals determined by the department. Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department."

Mahalo for your support and attention.

Sincerely,

Remedias A. Aguinaldo
Care Home Operator

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:37 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Charing Justo	Individual	Oppose	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:39 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Faye Anastacio	Individual	Oppose	No

Comments:

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Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:41 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Fely Moniz (ARCH)	Individual	Oppose	No

Comments:

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TO: Senator Rosalyn Baker, Chair of Commerce, Consumer Protection and Health
Senator Michelle Kidani, Vice Chair of Commerce, Consumer Protection and
Health Commerce, Consumer Protection and Health Committee Members

DATE: March 22, 2016

RE: **SB 2384 – “RELATING TO CARE FACILITIES”**

Greetings Chair Baker, Vice Chair Kidani and Committee Members:

My name is **Lydia Deguzman** from Waipahu, Hawaii, and I have been a Care Home Owner/Operator in the State of Hawaii for the past 38 years.

I am providing my testimony to **OPPOSE** SB 2384 – “*Relating to Care Facilities*”. The reasons for my opposition of the unannounced visits are:

- We, the ARCA care home operators have to maintain a daily vigorous schedule for our clients that include taking them to their doctor appointments, picking up prescriptions, shopping for groceries, preparing meals, laundry, cleaning, administering medication and completing MAR and progress reports. As a care home operator, I take pride in my work and take exceptional care of all my residents as if they were my own family so any unannounced visit would not be a problem, however, it would disrupt our busy schedule when we have to stop what we are doing to tend to the inspector while they are there.
- The annual inspections are done for all care homes. In my opinion, the inspections are very thorough and all aspects of the operation and facility are carefully reviewed. The department can clearly recognize any facility that appears to be “less than satisfactory” and needs to be monitored regularly. For those instances, it would be reasonable to conduct frequent regular visits throughout the year at the department discretion.

I humbly request your support by maintaining the current language of the HRS 321-15.6 which states “***Annual inspections for relicensing shall be conducted with notices, unless otherwise determined by the department***”. In my opinion, this language is fair and reasonable to the care home operators based on the reasons provided above.

I understand that there are some care home facilities that are operating below the satisfactory level and thereby placing clients at risk, however, the department should streamline those specific facilities and conduct unannounced visits accordingly instead of placing the burden on ALL care home facilities.

Thank you for your consideration.

Respectfully submitted,

Lydia Deguzman
Care Home Operator

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 12:02 PM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Benita Riingen (Big Island Care Home)	Individual	Oppose	No

Comments:

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From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 12:00 PM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Robert de la Cruz (Big Island Foster Home)	Individual	Oppose	No

Comments:

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Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:59 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Romeo Salom JR (Big Island Adult Foster Home)	Individual	Oppose	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:56 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Jopher Salom (Big Island Foster Home)	Individual	Oppose	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:51 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Nora rimando (Oahu Care Home)	Individual	Oppose	No

Comments:

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Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:49 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Alejandro Salom (Big Island Foster Home)	Individual	Oppose	No

Comments:

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Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:48 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Romeo Salom SR. (Big Island Adult Foster Home)	Individual	Oppose	No

Comments:

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Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:45 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Conchita Acosta (Big Island ARCH)	Individual	Oppose	No

Comments:

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Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 22, 2016 11:43 AM
To: HLTtestimony
Cc: hsapla@yahoo.com
Subject: *Submitted testimony for SB2384 on Mar 23, 2016 10:00AM*

SB2384

Submitted on: 3/22/2016

Testimony for HLT/JUD on Mar 23, 2016 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Myrna Bautista (ARCH)	Individual	Oppose	No

Comments:

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To: Health Committee Chair Representative Della Au Belatti
Judiciary Committee Chair, Representative Karl Rhoads

Date:

Re: SB 2384 – Relating to Care Facilities

Aloha Chair Belatti, Vice-Chair Richard Creagan and Committee Members;
Chair Rhoads, Vice-Chair Joy San Buenaventura and Committee Members

My name is OFELIA SIMPLICIAHOI I am a Care Home Operator in WAIPIAHU. I am in strong OPPOSITION to the bill in particular to the section regarding care homes.

I am respectfully asking the Committee to retain the language of the HRS 321-15.6:
“Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department.”

Community-based care facilities are governed by different regulations regarding unannounced visits and annual inspection for relicensing. The Department of Health has the jurisdiction of the Adult Residential Care Homes under the guidance of HRS 321-15.6. On the other hand, the Department of Human Services has the jurisdiction of the foster family homes using the guidelines under Hawaii Administrative Rules Title 17, Chapter 1454.

The current practice of the Department of Health through the Office of Health Care Assurance (OHCA) is to send notice to the care home operator regarding an upcoming annual relicensing inspection. The notice says “a certain day of the month but it does not announce the exact date.” The reason OHCA has promulgated this system to allow the care home operator to be present during the inspection. There are many reasons that the care home operator could be out the house at any given time; such as bringing residents to their medical appointments, picking up medications, buying provisions and supplies for the residents, outings for residents, and once in a while a trip to the emergency room. In addition, care home operators have also personal appointments and errands. OHCA requires that the primary caregiver, the care home operator, and the residents must be present during the annual relicensing inspection.

The statute already has the provision for unannounced visits. OHCA can conduct unannounced visits at any intervals at its discretion to confirm correction of deficiencies and/or to investigate complaints for suspicion of neglect and abuse.

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at testimony is absolutely inaccurate because, per Chapter 100.1-23, a secondary caregiver is not required to know any matters about inspection or survey;

) The primary caregiver or licensee acting as the primary caregiver must be present in the Type I ARCH at all times unless the primary caregiver or licensee acting as the primary caregiver has secured a substitute caregiver to provide temporary coverage for the primary caregiver or licensee acting as the primary caregiver.

e) The substitute care giver who provides coverage for a period less than four hours shall:

- (1) Be at least eighteen years of age;
- (2) Have the ability to communicate, read and write in the English language
- (3) Be currently certified in first aid; and
- (4) Be trained by the primary care giver to make prescribe medications available to residents and properly record such action.

f) The substitute care giver who provides coverage for a period greater than four hours in addition to the requirements specified in subsection (e) shall:

- (1) Be currently certified in cardiopulmonary resuscitation;
- (2) Be able to provide personal care to the residents, including bathing, dressing, transferring, feeding, and transporting residents, and be able to provide care as stipulated in the schedule of activities or care plan;
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Furthermore, your Committee heard HB 2005 HD2 on February 17. This bill has a section that relates to annual inspections for relicensing. After the hearing, your Committee struck out that section:

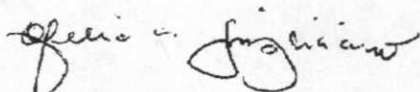
PART II

SECTION 2. Section 321-15.6, Hawaii Revised Statutes, is amended by amending subsection (a) to read as follows:

"(a) All adult residential care homes shall be licensed to ensure the health, safety, and welfare of the individuals placed therein. The department shall conduct unannounced visits, other than the inspection for relicensing, to every licensed adult residential care home and expanded adult residential care home and any other community care home or day care center licensed or certified and under the purview of the department on an annual basis and at such intervals as determined by the department to ensure the health, safety, and welfare of each resident. Unannounced visits may be conducted during or outside regular business hours. All inspections relating to follow-up visits, visits to confirm correction of deficiencies, or visits to investigate complaints or suspicion of abuse or neglect shall be conducted unannounced during or outside regular business hours. Annual inspections for relicensing may be conducted during regular business hours or at intervals determined by the department. Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department."

Mahalo for your support and attention.

Sincerely,



Care Home Operator

ALFE CARE HOMES

Fax

To: Hawaiian Capital From: Virginia Baptista
Fax: 586-9608 Pages: 3 including 2 cover sheet
Phone: _____ Date: 3/22/16
Re: SB2384 HD 2 CC: _____

Urgent For Review Please Comment Please Reply Please Recycle

● Comments:

This communication is intended solely for the individual or entity to which it is addressed, and may contain information that is privileged, confidential, and/or prohibited from disclosure. If the reader of this communication is not intended recipient, copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return original message to the address above via US Postal Service. THANK YOU.

To: Health Committee Chair Representative Della Au Belatti
Judiciary Committee Chair, Representative Karl Rhoads

Date:

Re: SB 2384 – Relating to Care Facilities

Aloha Chair Bellati, Vice-Chair Richard Creagan and Committee Members;
Chair Rhoads, Vice-Chair Joy San Buenaventura and Committee Members

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in strong OPPOSITION to the bill in particular to the section regarding care homes.

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otherwise determined by the department.”**

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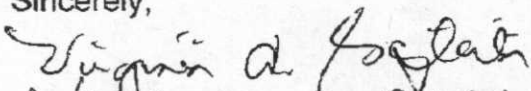
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Mahalo for your support and attention.

Sincerely,


VIRGINIA A. BAPTISTA
Care Home Operator

To: The Honorable Chairs, Vice Chairs and Committee Members of Health and Judiciary

Date: March 23, 2016 1000 AM Conference Rm. 329, State Capitol

Re: **SB 2384 S.D. 1 Relating to Licensing Inspections**

My name is Myriam Tabaniag, a Registered Nurse, owner and manager of 2 home-based Long Term facilities in Kaneohe, a Type I, 5-bed care home and a Type II, 8-bed care home, for 15 years now.

I understand the intent of SB 2384 S.D. 1 **BUT I STRONGLY OPPOSED TO THE SECTION OF THE BILL RELATING TO THE UNANNOUNCED ANNUAL RELICENSING OR RECERTIFICATION OF STATE- LICENSED CARE FACILITIES**, such as Adult Residential Care Homes; Expanded Adult Residential Care Homes, CCFFH homes, etc.

Section 321-15.6 of the Hawaii Revised Statutes states "The Department shall conduct **unannounced visits**, other than the inspection for licensing, to every licensed adult residential care home and expanded adult residential care home on an annual basis and at such intervals as determined by the department to ensure the health, safety, and welfare of each resident. **Unannounced visits may be conducted during or outside regular business hours..... Annual inspections for relicensing shall be conducted with notice, unless otherwise determined by the department.**

So, at the present time, both Adult Residential Care Homes and Expanded Adult Residential Care homes are already subjected with 1 or more unannounced visits per year at anytime. More if the Department found something during the unannounced visit that would warrant the consultant to revisit the care home, such as in cases of abuse and neglect, etc.

The Annual Inspection for relicensing is partly unannounced. The day and month are given but not the date. The notice usually read, "Any Tuesday in the month of May." Occasionally, there may be 5 Tuesdays in the month, so the Primary Care Giver will persevere to wait for that day, as no Primary Caregiver (PCG) would know which Tuesday of the month the Consultant would come. The survey entails reviews of the chart's Progress Notes, Medication Records, Nutrition (Intake and Output) Records, Monthly Weights, Doctor's visits, Incident Reports, Fire Drill Records, Fire Alarms Maintenance Records, Sprinkler System records, Refrigerator Temp. Log records, Menu Substitution Records, and many, many more. Most times, the Consultant will ask questions about the records, the plan of care and please remember that if the Case Manager, who is a part of the Team did not complete his or her job or work, it is the Primary Caregiver of the Home that will get the deficiencies. I've been told by many caregivers that the DOH Consultant may visit them a different day than what was written on the notice, or sometimes, the Consultants are also very busy doing unannounced visits when they are called to check possible cases of abuse and neglect, that they may not be able to come that month. There's always a possibility that the Consultant may come when the PCG is out with a resident who was taken to the ER for an emergency on inspection day. My practice is, I will not leave my resident while in the ER being treated. **It takes about 6 hours to complete a Survey in a 5-bed care home, 2 days for an 8-bed care home.** With the partly unannounced annual inspections, almost all care home facilities still have a minimum of 2-8 pages of listed deficiencies.

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Honorable Chairs, Co Chairs and Members of Health and Judiciary committees, an Unannounced Annual Relicensing inspection and survey will not ensure nor ascertain the physical, mental and emotional health, and welfare of the individual residents. The huge and beautiful building and the well decorated interior of the facility are just a plus. **What really counts and most important, and what the resident is actually paying for when he or she enters a facility is the quality of life and the quality of care that he or she receives.**

What's the sense of having a beautiful and well-decorated home; completed records because that's all what the PCG did the whole time to get a good survey but neglected to give or gone the extra mile to render the quality of care and the quality of life that the resident needed. I truly believe that the 6 hours to 2 days of unannounced annual inspection will NOT cut it as it won't show the many unrecorded activities, outings, restaurant visits, trips that we did for and with them that truly made them smile, laugh and contented with their lives.

I also believe in my heart that the care home industry is over regulated.

Unannounced Annual Relicensing or Recertification Inspections when the Primary Caregivers and owner of the care home facilities are not present in the home when being inspected by DOH Consultants may be infringing in the civil rights of the Residents as well as the Primary Caregivers especially if permission was not granted to enter the property. Annual Inspection include but not limited to the physical inspection of the whole house that may occasionally include the private bedrooms of the primary caregiver. It could also be **discriminatory**. Our personal choices are protected by the freedoms to express himself or herself and the **right to preserve personal privacy**.

Thank you for allowing me to testify.