

To the Attention of Chair Gelser-Blouin, Vice Chair Linthicum and Members of the Committee,

In support of SB 228

One of the issues in long term care facilities is the lack of reliable communication. Decision makers often have limited decision-making power, and corporate typically ignores issues until forced to deal with them. Our family has had three members in long term care facilities, and all three had, or are experiencing, problems.

Communication between shifts is spotty. For example, there have been a number of times during an infectious disease lockdown when my wife or I delivered a needed medication or hygiene product and dropped it off to a staff member at the front door. But when we phoned Mom the next day, she had yet to receive the needed items. When we called the facility, no one seemed to know where the items were, but said they would look into it. Finding them, however, often took an additional day or two. Sometimes things just disappeared.

Last year, my wife took her Mother to Tennessee for a week to visit family. Before leaving, the med tech gave her all of her Mother's medications for the week. They were divided and labeled by time of day, which would have been fine, but they managed to reverse morning and evening pills. PM pills in the AM bag and vice versa. That's dangerous. Mom is diabetic and, the first day, she didn't receive her full dose of diabetes meds. At first my wife thought her pill regimen had changed without her knowledge, but became suspicious that there were so many pills in the PM bag.

In another instance, the building was infected by a Norovirus whose symptoms include vomiting and diarrhea. Dehydration is huge problem, especially for the elderly. Residents and staff both had it and the facility ran out of Pedialyte, which my wife discovered when she called to check up on her Mother and was told she had not been given any. A call to the front desk confirmed that they had run out, but had done nothing about it.

I ended up driving into town, purchasing over \$100 worth of Pedialytes and delivering them to the facility. So many of the staff were out that they had no one available for errands. That was December 12, 2024, and as of this writing, we have yet to be reimbursed.

Amazingly, when I arrived at the facility, not all staff bothered to wear masks—which was also the case during the Covid epidemic. When there is a potentially fatal illness burning through the facility that, to me, is irresponsible.

The bottom line is that, in spite of paying thousands of dollars each month, families still need to micromanage care and to do that effectively they need an independent council to help hold the

facility to account without fears of reprisal or neglect of their loved ones. For the welfare of the residents and the family members who care for them, I urge you to support SB 228.

Thank you,

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