Good afternoon and thank you for the opportunity to speak to you about what it’s like to be a resident in a nursing home. My name is Cindy Napolitan. I live near Dallas Texas.

My daughter and I were diagnosed decades ago with multiple sclerosis. We were cared for by my husband until his sudden death in 2017. My son attempted to care for us but it was soon clear that we would need to seek long-term nursing care. It was a difficult process to find a facility and to transition to a new living situation while grieving all we had lost.

We’ve lived in several facilities for over four years. Nursing homes have resident councils that meet regularly to talk about issues and concerns. The number one concern is always the lack of staffing. Allow me to provide several examples of what I have experienced.

Imagine your mother is brought to the dining room where she waits several hours to eat because there’s not enough kitchen staff to fix it or aides to serve it, and for those unable to feed themselves, even a longer wait.

Staff shortages in housekeeping means there’s no clean bedding or towels so your husband doesn’t get showered or bathed. If a resident needs to have a diaper change they turn on their call light and wait for an aide to answer. It could be hours. Imagine your daughter laying in her own filth.

Last fall at 4:30 in the afternoon, I witnessed my aide reporting to my nurse that a patient was not waking up. The nurse said they would check on the patient as soon as possible. At 7:00 the nurse calls out CODE, CPR is started and paramedics arrive. After an hour, the paramedics leave the room. My neighbor, someone’s loved one, has died.

These examples of staffing problems are the reason why you need to establish minimum staffing requirements, patient to caregiver ratios and written standards of care.
A second concern is properly trained staff and continuing education. A resident gets used to being cared for by a familiar face. They learn their likes and dislikes, and the resident learns to trust the caregiver. This is especially true for memory care residents. If there’s high turnover, there’s not enough time and resources to properly train a new caregiver.

In my facility, certified nursing aides are required to have two people operate the Hoyer lifting equipment. When my daughter is picked up and transferred with this lift, it’s only one person and sometimes she has to explain to them how to operate it. I’m able to use a sit-to-stand lift, and I’ve had to train them myself as to its operation.

Establishing extensive continuing education is vital to the safety and well-being of every resident.

Thirdly, my facility is nicely decorated with beautiful furniture and artwork. During the holidays, eight Christmas trees are professionally decorated. Tours are given to possible residents and their families; they see the beauty of the outside, but don’t get to see what really happens in the inside.

Would you rather send your family member to a beautiful facility, or to a long-term care facility that uses your medicare and medicaid tax dollars to improve patient care and to help ensure their quality of life?

Establishing transparency of facility ownership and finances would help you answer that question.

As you can imagine passing this legislation is of utmost importance to me, my daughter and my fellow residents. I hope I have provided enough examples to show you the importance of staffing standards, adequate training and fiscal accountability. I appreciate your time and consideration.