



NEWS RELEASE
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Connecticut Advisory Committee to U.S. Commission on Civil Rights Recommends Legislation to Protect the Rights of Residents in Nursing Homes and Long-Term Care Facilities

The Connecticut Advisory Committee to the U.S. Commission on Civil Rights released an advisory [memorandum](#) in September 2020 following its July 2020 [briefings](#) examining the impact of the COVID-19 pandemic on older adult populations in Connecticut long-term care facilities and nursing homes. The Committee is concerned that older adults and communities of color have borne a particular heavy burden from the pandemic—including deaths, increasing instances of failure to thrive, and depression and sadness caused by isolation from family and friends—due to restrictive housing practices put in place in nursing homes. The Committee’s investigation identified issues that it encouraged the state to address to better protect this vulnerable population during the pandemic and to reduce the risk that the consequences of COVID-19 would fall most heavily on older adults of color.

The Committee learned that proposed legislation has been introduced by the Aging and Human Services Committees of the Connecticut General Assembly. The proposed legislation will codify procedures (1) mitigating harmful impacts and disparities through the establishment of person-centered plans of care, (2) permitting older adults to designate essential support persons, (3) enacting a state-wide visitation policy for long-term care facilities, (4) updating the resident bill of rights, (5) allowing the use of the resident’s technology of choice for communications, (6) ensuring nursing home minimum staffing levels, (7) affording residents the right to treat their room as their home with the same rights and protections it would have as a stand-alone unit, and (8) continuing to provide personal protective equipment to workers and residents in long-term care facilities. Most of these innovative and responsive recommendations come at no cost impact to the state or its municipalities.

The Committee is encouraged that the General Assembly is considering this legislation and recommends that any law include the following six components:

1. The clear definition of an **“essential support person,”** which will designate individuals who can visit with the resident without obstruction by long-term care facilities. These essential support persons will provide critical assistance with activities of daily living, including ensuring that the facility is meeting the resident’s physical, psychological, social, emotional, and other needs. Essential support persons are needed because isolation measures designed to limit the spread of COVID-19 have had unintended consequences that disproportionately isolate and thereby burden long-term care residents. While limiting human contact can reduce the spread of illness, the Committee heard testimony that isolating older adults from friends, family and caregivers can have disastrous effects on their overall physical and mental health.
2. The clear definition of a **“person-centered plan of care,”** which would be developed by a resident or resident representative in consultation with health professionals. This plan would focus on the resident’s physical, emotional, psychological, and socialization as well as culturally and linguistically appropriate services and needs, including assigning a primary essential support person or secondary essential support person designated by the resident. The Committee recommends that the State of Connecticut adopt legislation providing for personal care plans for

residents in order to address pre-existing conditions and continue to provide innovative high quality of care, dignity, and sustainable good healthcare outcomes for residents in nursing and long-term care facilities given the nature of the pandemic going forward.

3. The establishment of a **state-wide policy for visitation** with a long term-care facility resident. The policy should be applicable to all long-term care facilities and should incorporate a long-term care facility resident’s need for health, safety and well-being, including, but not limited to, the essential support provided by a primary or secondary essential support person. Establishing robust visitation protocols should allow for more time outside of bedrooms and accommodating visitations by family, friends, clergy, attorneys, watchdog agencies and other stakeholders. Nursing homes should facilitate arrangements for in person medical appointments, religious observations, and family participation in last rites ceremonies and funerals.
4. The affirmation of residents’ civil rights and liberties by **updating the resident bill of rights, including the right of residents to treat their rooms like their home** and to **use the technology of their choice** to be able to keep in communication with family and other essential persons to support social and emotional needs. This is important in the light of strict restrictions that were put in place to contain the spread of COVID-19 in long-term care facilities. Residents deserve the same rights and privileges that are otherwise available in ordinary daily life, including using new and innovative technologies to preserve the freedom to associate with persons of the resident’s choice in private.
5. The maintenance of **adequate staffing**. Appropriate staffing hours and staffing levels are essential to protecting civil rights. Evidence demonstrates that facilities with greater staffing time experienced lower COVID-19 infection and death rates, as well as better outcomes for communities of color and non-English speaking residents. Connecticut should adopt policies that facilitate the maintenance of adequate staffing levels and encourage staff spoken-language diversity for facilities throughout the state.
6. **The continued provision of Personal Protective Equipment**. Continued access to adequate Personal Protective Equipment (PPE) will limit the spread of COVID-19 in long-term care settings. The state’s assistance in acquiring PPE for nursing homes and assisted living facilities contributed to decreasing infection and death rates, and the state should continue these efforts long-term. Without continued assistance from the state, the Committee fears that the burdens of insufficient PPE will continue to fall hardest on facilities that disproportionately serve communities of color, potentially exacerbating racial disparities in COVID-19 infection and death rates in Connecticut.

“The Committee applauds the steps the State of Connecticut has taken to address the disproportionate impacts felt by vulnerable older adult populations in long-term care facilities during the pandemic,” said David McGuire, chair of the Connecticut Advisory Committee. “We encourage the Legislature to continue pursuing innovative responses to the pandemic that has devastated Connecticut’s nursing home and long-term care facilities.”

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[What are State Advisory Committees \(from USCCR website\)](#)

The USCCR maintains 51 State Advisory Committees (SACs), one for each state and the District of Columbia. Each is composed of citizen volunteers familiar with local and state civil rights issues. The members assist the Commission with its fact-finding, investigative, and information dissemination functions.