

2/1/23

SB 352 Proponent: In Person Testimony

Dear Chairwoman Gossage and Senate Public Health and Welfare Committee Members,

I am submitting testimony in support of SB 352. Thank you for offering this bill a fair hearing. As a geriatric nurse practitioner most of my clients reside in long term care centers. I witnessed first hand the withdrawal of the patients bill of rights and the devastating impact it had on the lives of my residents.

My clients were forced into solitary confinement to a single room for over a year in some buildings. Staff were told to engage with them as little as possible and all meals were served alone in their rooms. We created a bed to chair existence for these folks and most of them died because of the hazards of immobility and isolation.

Isolation and mortality are closely linked. The risk of death is perhaps as much as smoking, obesity, and sedentary lifestyle put together according to research. Isolation is associated with almost a 50% percent increased risk of dementia, 29% increased risk of heart disease and a 32% increased risk of stroke. Isolation is also associated with depression, anxiety, and suicide. For heart failure clients there is nearly 4 times increased risk of death, 68% increased risk of hospitalization, and 57% increased risk of ER visits.

<https://www.cdc.gov/aging/publications/features/lonely-older-adults.html>

Johns Hopkins conducted a metaanalysis in 2022 based on 34 studies and found lock downs reduced death by 0.2%. Authors suggested that due to the devastation the lockdowns caused, in the future they should be **“rejected out of hand as a pandemic policy instrument.”**

<https://sites.krieger.jhu.edu/iae/files/2022/01/A-Literature-Review-and-Meta-Analysis-of-the-Effects-of-Lockdowns-on-COVID-19-Mortality.pdf>

The patient’s bill of rights was established in 1987 as part of the Nursing Home reform law. A big portion of this includes the right to visitation anytime by anyone they choose. I had veterans say to me “you people are denying me the very rights I bled for and my brothers died for. I recall driving home in tears after comforting a woman who was told she would be kicked out of her assisted living center if she attended her only child’s funeral. Imagine that for a minute. Staff can come and go and that is okay but she is not allowed to morn with her family. Of course, she was denied any visitors as well. Another man told me he had never gone a day without seeing his wife. He came with a lawn chair everyday and sat outside her window until he got sick with pneumonia and died. The constant exposure to the elements likely contributed to this.

Even when folks were dying staff often resisted letting family in. Long term care centers did not have enough people to check in and police outside visitors. The average life expectancy when

you enter a long-term care center is two years with 65% of people dying in less than a year. <https://geripal.org/length-of-stay-in-nursing-homes-at-end/>. Why torture folks at the end of their life through isolation?! I recall a woman who was dying saying “my only wish is to embrace my family one last time.” Of course, she was denied such a request.

Do you want to understand why so many in healthcare have left the field? We were asked to be a part of something wicked and we knew it was wrong. One nurse said to me, I have enjoyed working with you, Amy. This may be the last time I see you, however.” I pleaded with her not to leave and her words still haunt me today. She said “you know what we are doing here is wrong. We are contributing to the suffering and death of our clients. Me leaving should not surprise you. You staying is what shocks me.”

I urge you to pass SB 352. When someone is in a hospital or long-term care center, they are facing one of the most vulnerable states of their existence. We must never again allow our patients to be subjected to isolation and suffering like this again. Stand for the patient’s bill of rights. You have been called to lead during such a time as this. You must take a stand and do the right thing regardless of the pressures you may be facing.

Respectfully,

Amy Siple, APRN, FNP, GS-C