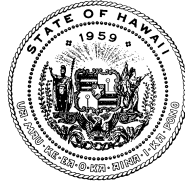




SCR107

| | |
|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Measure Title: | REQUESTING THE CONVENING OF A FAMILY CAREGIVERS WORKING GROUP TO EXAMINE AND ASSESS LEGISLATION RELATING TO THE ROLE OF CAREGIVERS OF PATIENTS DISCHARGED FROM HOSPITALS. |
| Report Title: | Family Caregivers Working Group |
| Description: | |
| Companion: | |
| Package: | None |
| Current Referral: | HSH/HTH, JDL |
| Introducer(s): | CHUN OAKLAND, GREEN, Baker, Ruderman |



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

**Testimony COMMENTING on SCR107
REQUESTING THE CONVENING OF A FAMILY CAREGIVERS WORKING
GROUP TO EXAMINE AND ASSESS LEGISLATION RELATING TO THE ROLE
OF CAREGIVERS OF PATIENTS DISCHARGED FROM HOSPITALS.**

SENATOR SUZANNE CHUN-OAKLAND, CHAIR, SENATE COMMITTEE ON HUMAN
SERVICES AND HOUSING
SENATOR JOSH GREEN, CHAIR, SENATE COMMITTEE ON HEALTH

Hearing Date: March 31, 2015

Room Number: 016

1 **Fiscal Implications:** N/A

2 **Department Testimony:** The Department of Health (DOH) respectfully requests deferral of
3 SCR107 and recommends a Joint Informational Briefing on the findings described in the report
4 to the Legislature requested by HCR78 SLH2014.

5 This report was finalized in late March 2015 because additional time was required to
6 synthesize the complex and numerous discussions and reference attachments generated of over
7 six months of meetings. DOH apologizes for any inconvenience this may have caused.

8 It is worth noting that four of the five recommendations of the HCR78 SLH2014 report
9 were unanimously endorsed, and the fifth carried with a majority. Furthermore, since HCR78
10 SLH 2014 chartered the working group until June 30, 2016, additional concurrent working
11 groups of family caregivers may cause confusion.

12 However, DOH welcomes additional stakeholders contributing to the discussion as a
13 recognition that this issue is significant enough that hospitals cannot reasonably be expected to
14 shoulder the burden of a solution on their own. Rather, a more systematic solution across the
15 continuum of care and into the community involving families, primary care medical homes,
16 healthcare systems, and developing care models such as community health workers is required.

From: [Anthony Lenzer](#)
To: [HSH Testimony](#)
Subject: Testimony in Support of SCR 107
Date: Friday, March 27, 2015 5:10:52 PM

To: Senate Committee on Human Services and Housing
Sen. Suzanne Chun Oakland, Chair

Senate Committee on Health
Sen. Josh Green, Chair

From: Anthony Lenzer, PhD, Member
Policy Advisory Board for Elder Affairs

Subject: Support for SCR 107

Hearing: Tuesday, March 31, 2015, 1:20 p.m.
Conference room 016

The Policy Advisory Board for Elder Affairs (PABEA) strongly supports SCR 107, the purpose of which is to create a family caregivers working group to examine legislation relating to the role of caregivers of patients discharged from hospitals. PABEA serves as the advisory body to the Executive Office on Aging, and as an advocate for Hawaii's older citizens and their families. However, in this testimony we do not speak for the Executive Office on Aging

This Resolution is important because it directs attention to the needs of Hawaii's 247,000 family caregivers, many of whom will have responsibility for caring for a parent or grandparent after discharge from a hospital. In fact, families provide 80% of the care required by Hawaii's Kupuna. In recent years, hospitals have been discharging patients after shorter stays than in the past, due to changes in federal laws and financing requirements. Older patients often have more complex needs for post hospital care, including medication management, injections, infection control, and other medical and nursing procedures. Families often lack the skills required to carry out

these procedures effectively. Without proper post hospital care, patients are often readmitted to hospitals within a short period of time.

During the past two years, legislation was introduced to help provide family caregivers with the information needed to provide such care. PABEA strongly supported these bills, which unfortunately did not pass. A family caregivers working group was created last year (HCR 78) to study the problem. However this group had a disproportionate number of hospital representatives compared to caregiver advocates, and it was unable to reach consensus on the role of hospitals in preparing family caregivers to provide post hospital care. SCR 107 addresses many of the challenges that exist with the current working group by providing an even balance of working group members between caregiver advocates and hospitals, and ensuring that the new group ends before the start of the next legislative session. The new working group will replace the group created under last year's resolution.

Thank you for the opportunity to testify in support of this important resolution.



March 31, 2015

Senate Committee on Human Services and Housing
Senator Suzanne Chun Oakland, Chair

Senate Committee on Health
Senator Josh Green, Chair

Re: **SCR 107, REQUESTING THE CONVENING OF A FAMILY CAREGIVERS WORKING GROUP TO EXAMINE AND ASSESS LEGISLATION RELATING TO THE ROLE OF CAREGIVERS OF PATIENTS DISCHARGED FROM HOSPITALS**

Chair Chun Oakland, Chair Green, and members of the committees:

AARP is a membership organization of people fifty and over with nearly 150,000 members in Hawaii alone. AARP advocates for issues that matter to Hawaii families, including the high cost of long-term care; access to affordable, quality health care for all generations; providing the tools needed to save for retirement; and serving as a reliable information source on issues critical to people over the age of fifty.

AARP Hawaii strongly supports SCR 107, requesting the convening of a family caregivers working group to examine and assess legislation relating to the role of caregivers of patients discharged from hospitals.

Since 2013 a coalition of family caregiver advocates has supported legislation that would provide Hawaii's 247,000 family caregivers with the assistance they need to properly take care of their loved ones. These family caregivers spend an average of 20 hours a week providing unpaid care, and also spend an annual average of over \$5,000 on out-of-pocket expenses. However, when their loved ones are discharged from the hospital, many of these caregivers don't have as much information as they need to provide proper care. The legislation the advocates have supported would address that.

SB 2264, Relating to Caregiving, was introduced during the 2014 legislative session. The purpose of the bill was to accomplish three things: (1) provide the opportunity for a patient to designate a family caregiver in the patient's medical record; (2) notify the designated caregiver prior to their loved one's discharge from the hospital; and (3) provide the caregiver with an opportunity to receive instruction on after-care tasks prior to discharge. When SB 2264 failed to advance, a family caregivers working group was created by HCR 78 to try to bring the various stakeholders together, assess the matter, and develop solutions.

While well-intended, HCR 78 unfortunately created a structure that made it difficult for the stakeholders to agree on key elements critical to solving this problem. Specifically, the working group created by HCR 78 contained approximately twice as many hospital or hospital representative members as it did members representing caregivers. Additionally, the term of the working group continued until June 2016. This caused confusion because the working group was also supposed to submit a report to the Legislature twenty days prior to the convening of the 2015 session. Reconciling these two separate deadlines was challenging.

SB 296, Relating to Caregiving, was introduced this year in the legislature. This bill contained many of the same aspects of SB 2264, but also sought to address the concerns that were raised last year. For example, SB 296 contained limited liability language and eliminated some of the more precise timing mechanisms that were contained in SB 2264. SB 296 was deferred by the Senate Health Committee and this resolution rebalances the working group, continues efforts to address issues in the bill and bring the stakeholders together to find common ground in advance of next year's legislative session.

While our preference is the enactment of SB 296 as originally introduced, this resolution is a step in the right direction as it addresses the need to help caregivers and addresses the structural issues that exist with the current working group. We have always been in favor of collaborating with all stakeholders to achieve a solution that everyone can support and which provides the necessary support to caregivers. Specifically, we support the provisions of this resolution, which, among other things:

- Requests the members to examine and assess the issues contained in SB 296, including designation, notification, and instruction of family caregivers;
- Provides an even balance of working group members between caregiver advocates and hospitals;
- Ensures that this new working group ceases to exist prior to the start of the next legislative session; and
- Terminates the existing working group once this resolution is enacted.

We urge the committees to pass this resolution and thank you for the opportunity to testify.

From: mailinglist@capitol.hawaii.gov
To: [HSH Testimony](#)
Cc: cory.chun@cancer.org
Subject: Submitted testimony for SCR107 on Mar 31, 2015 13:20PM
Date: Monday, March 30, 2015 2:24:37 PM

SCR107

Submitted on: 3/30/2015

Testimony for HSH/HTH on Mar 31, 2015 13:20PM in Conference Room 016

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|-----------------------------------------------|---------------------------|---------------------------|
| Cory Chun | American Cancer Society Cancer Action Network | Support | No |

Comments: I support the continued work of the caregiver working group and the re-balancing of community groups and healthcare facilities to better represent caregivers.

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

The Twenty-Eighth Legislature
Regular Session of 2015

THE SENATE

Committee on Human Services and Housing
Senator Suzanne Chun Oakland, Chair
Senator Josh Green, Vice Chair

Committee on Health
Senator Josh Green, Chair
Senator Glenn Wakai, Vice Chair

State Capitol, Conference Room 016
Tuesday, March 31, 2015; 1:20 p.m.

**STATEMENT OF THE ILWU LOCAL 142 ON S.C.R. 107
REQUESTING THE CONVENING OF A FAMILY CAREGIVERS
WORKING GROUP TO EXAMINE AND ASSESS
LEGISLATION RELATING TO THE ROLE OF CAREGIVERS
OF PATIENTS DISCHARGED FROM HOSPITALS**

The ILWU Local 142 supports S.C.R. 107 for another working group to be convened to address the role of family caregivers when patients are discharged from the hospital.

The first working group convened last year to address this issue could not arrive at consensus. Nevertheless, S.B. 296 was introduced this session and included language to exempt hospitals from liability, a major concern for the hospitals. However, hospital representatives were not appeased and vehemently testified in opposition to S.B. 296, resulting in deferral of the measure. We understand that a report from the working group has yet to be released.

S.C.R. 107 is another attempt at bringing the parties together, hopefully with more balanced representation from hospital representatives and caregiver advocates and with a better outcome.

If liability is the main concern for hospitals, we remind them that they may be open to lawsuits whenever something goes wrong—whether they are at fault or not. Furthermore, hospitals risk penalties from the federal Hospital Readmissions Reduction Program when patients fare poorly due to inadequate care at home and must be readmitted to the hospital. It is in the hospitals' best interest to provide as much assistance as possible to family caregivers to ensure that patients are not readmitted and may be cared for in their own homes. Alternative institutionalization will be far more costly to patients, their families, and taxpayers.

The ILWU urges passage of S.C.R. 107 to convene another working group. Thank you for considering our views and concerns.

To: Senate Committee on Human Services and Housing, Senator Suzanne Chun Oakland, Chair
Senate Committee on Health, Senator Josh Green, Chair

Re: SCR 107, Family Caregivers Working Group (Requesting the convening of a family caregivers working group to examine and assess legislation relating to the roles of caregivers of patients discharged from hospitals)

Senate Committee on Human Services & Housing, Senator Suzanne Chun Oakland, Chair
Senate Committee on Health, Senator Josh Green, Chair

Chair Chun Oakland, Chair Green and Committee members:

My name is T. J. Davies and a resident of Kakaako. I am 80 years old. Retired, and disabled and Strongly Support **SCR 107, Family Caregivers Working Group**.

Hawaii's Family Caregivers need assistance to properly take care of their loved ones.

These family caregivers spend an average of 20 hours a week providing unpaid care and an annual average of over \$5,000 on out-of-pocket expenses.

When their loved ones are discharged from the hospital, many Family Caregivers don't have as much information as they need to provide proper care.

I strongly support the legislation that was introduced the last two years to help provide Family Caregivers with the information they need from hospitals. I will continue to support that legislation and work to pass it, but in the meantime we need to pass this Resolution.

The Family Caregivers Working Group that was created last year to study this problem has twice as many hospital representatives as Family Caregiver advocates. It also has an end date of June 2016 that is way too far into the future.

This Resolution addresses many of the challenges that exist with the current **Family Caregivers Working Group** by providing an even balance of working group members between **Family Caregiver** advocates and hospitals and ensures that this new working group ends before the start of the next Legislative session.

Mahalo for the opportunity to testify in Strong Support of **SCR 107, Family Caregivers Working Group**.

T. J. Davies, Volunteer
Kokua Council for Senior Citizens
H.A.R.A. Legislative Committee
AARP Chapter 60, Waikiki
Senate District 26 / House District 43

Aloha Senator Chun Oakland, Chair and members of the Human Services and Housing committee and Senator Green and members of the Health Committee

As the Kokua Council representative to the current Caregiver Working Group (created by HCR78), I strongly urge your support of SCR 107.

The current Working Group was unable to reach consensus.

Family caregivers, of whom there may be as many as 247,000 in Hawaii, need more support. They provide a vital role in the continuum of care of our kupuna. They are often the reason kupuna are able to age in place and not have to go to nursing homes.

This Resolution involves the role of caregivers when their loved ones are hospitalized. Caregivers should be made part of the hospital record and be included in the discharge plan. They need to be provided specific instruction about necessary follow-up care to lessen the likelihood of hospital readmission.

Please support HCR 107 to continue discussion and collaboration on these important issues.

Thank you for allowing me to provide testimony.

Barbara J. Service

Kahala

19th District

9th Senatorial District



March 31, 2015

The Honorable Suzanne Chun Oakland, Chair
The Honorable Josh Green, Vice Chair
Senate Committee on Human Services and Housing

The Honorable Josh Green, Chair
The Honorable Glenn Wakai, Vice Chair
Senate Committee on Health

Re: SCR 107 – REQUESTING THE CONVENING OF A FAMILY CAREGIVERS WORKING GROUP TO EXAMINE AND ASSESS LEGISLATION RELATING TO THE ROLE OF CAREGIVERS OF PATIENTS DISCHARGED FROM HOSPITALS.

Dear Chair Chun Oakland, Chair Green, Vice Chair Green, Vice Chair Wakai, and Members of the Committees:

The Hawai'i Association of Health Plans (HAHP) respectfully submits comments and proposed amendments on HCR 107, which requests the convening of a family caregivers working group to examine and assess legislation relating to the role of caregivers of patients discharged from hospitals.

HAHP appreciates the intent of this measure and refers the Committees to concerns raised in our previous testimony submitted for SB 296 (2/3/15). We would also ask that a member of our organization be added to the Family Caregiver Working Group should this measure pass; it should be noted that the following provision was included in HCR78 (2014):

(11) One representative from Hawaii's health insurance or mutual benefit society health plans;

Thank you for allowing HAHP to testify on SCR 107.

Sincerely,

Wendy Morriarty
Chair, HAHP Public Policy Committee

Cc: HAHP Board Members

Tuesday – March 31, 2015 – 1:20 pm
Conference Room 016

SENATE COMMITTEE ON HUMAN SERVICES AND HOUSING

To: Senator Suzanne Chun Oakland, Chair
Senator Josh Green, Vice Chair

SENATE COMMITTEE ON HEALTH

To: Senator Josh Green, Chair
Senator Glenn Wakai, Vice Chair

From: Michael Robinson
Executive Director
Government Relations & Community Partnerships

**Re: SCR 107 - Requesting The Convening Of A Family Caregivers Working Group
Comments**

My name is Michael Robinson, Executive Director of Government Relations & Community Partnerships at Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-governmental employer. Hawai'i Pacific Health is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

In 2014, HCR 78 HD1 SD1 was passed by this legislative body, establishing a Family Caregivers Working Group to look at many of the issues outlined in this resolution over a two-year period until June 30, 2016. HPH actively participated in the Working Group. We believe the work begun pursuant to HCR 78, HD1, SD1 is still ongoing. Moreover, many of the items and issues SCR 107 now requests the new Working Group to examine are the same as those that were outlined in HCR 78, HD1, SD1. Thus, a duplication of efforts and resources would occur with the implementation of SCR 107.

The 2014 Working Group's recommendation was to not introduce legislation on this matter in 2015 (by a 16-8 vote). However, several other recommendations were put forth that merit further consideration by the legislature. Chief among those were to increase funding options for county offices on aging and Aging and Disability Resource Centers statewide to enhance their capabilities with post-hospitalization care to patients who are discharged.



We understand the intent of seeking a balance of the Working Group's membership as the resolution purports to seek. However, we believe some key stakeholders were excluded in an effort to strike that balance. At a minimum, neighbor island acute hospitals and long-term care facilities should continue to be represented on the Working Group so that we may understand the needs of the neighbor islands. Additionally, representatives from each of the acute care hospitals should be included in the Working Group, as the different hospitals care for different populations, have differing issues and experiences, and may be significantly impacted by the outcome of the decisions of the Working Group. Suggested language is provided below:

BE IT FURTHER RESOLVED that the participation of the following individuals is invited:

- (1) The Director of Health, or the Director's designee;
- (2) A representative from AARP Hawaii;
- (3) A representative from the Healthcare Association of Hawaii;
- (4) A representative from the Kokua Council;
- (5) Six representatives of private hospitals in Hawaii;
- (6) A representative from each of the acute care hospitals and long term care facilities in the state;
- ~~(6 7)~~ A representative from the Policy Advisory Board for Elder Affairs;
- ~~(7 8)~~ A representative from the Hawaii Health Systems Corporation;
- ~~(8 9)~~ A representative from ILWU Local 142;
- ~~(9 10)~~ A representative from the Hawaii Family Caregiver Coalition;
- ~~(10 11)~~ A representative from each of the county Area Agencies on Aging;
- ~~(11 12)~~ A representative from Project Dana;
- ~~(12 13)~~ A representative from the Hawaii Alliance for Retired Americans;
- ~~(13 14)~~ A member of the Senate, appointed by the President of the Senate, who shall serve as co-chair of the Family Caregivers Working Group; and
- ~~(14 15)~~ A member of the House of Representatives, appointed by the Speaker of the House of Representatives, who shall serve as co-chair of the Family Caregivers Working Group;

Therefore, we respectfully request that the objectives of the resolution be amended to require the Working Group to assess community-based resources that are currently available statewide (including identifying gaps in caregiver training programs) and quantify the impact that funding cuts over the years to various state and county programs have had on caregiver initiatives, as well as include representatives from each of the acute care hospitals in the Working Group.

Thank you for the opportunity to testify.



Tuesday, March 31, 2015 – 1:20 p.m.
Conference Room #016

The Senate Committee on Human Services and Housing and Senate Committee on Health

To: Senator Suzanne Chun Oakland, Chair, HSH Committee
Senator Josh Green, Vice Chair, HSH Committee

Senator Josh Green, MD, Chair, HTH Committee
Senator Glenn Wakai, Vice Chair, HTH Committee

From: George Greene, President & CEO
Healthcare Association of Hawaii

Re: **Testimony Providing Comments**

SCR107: REQUESTING THE CONVENING OF A FAMILY CAREGIVERS WORKING GROUP TO EXAMINE AND ASSESS LEGISLATION RELATING TO THE ROLE OF CAREGIVERS OF PATIENTS DISCHARGED FROM HOSPITALS

The Healthcare Association of Hawaii's 160 member organizations include all of the acute care hospitals in Hawaii, all public and private skilled nursing facilities, all the Medicare-certified home health agencies, all hospices, all assisted living facilities, durable medical equipment suppliers and home infusion/pharmacies. Members also represent other healthcare providers from throughout the continuum including case management, air and ground ambulance, blood bank, dialysis, and more. In addition to providing quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 20,000 people statewide.

Thank you for the opportunity to provide **comments** on SCR107, which requests the convening of a family caregivers working group to examine and assess legislation relating to the role of caregivers of patients discharged from hospitals.

First of all, HAH recognizes the very important role that family caregivers play along the healthcare continuum, and we applaud their selfless commitment to caring for their loved ones. While we testified in opposition to [SB296](#) (Relating to Caregiving) in the Senate earlier this session, we provide the following comments on this resolution.

As the committees are well aware, [HCR78 HD1 SD1](#) was passed by this legislative body in 2014, which established a Family Caregivers Working Group to look at many of the issues outlined in this resolution over a two-year period. HAH, along with many of our members, served as active participants in the Working Group and attended all 8 meetings during the interim.

Although most of the attention focused on the Working Group's recommendation to not introduce legislation on this matter in 2015 (by a 16-8 vote), there were several other recommendations put forth that merit further consideration by the legislature. Chief among those were to increase funding options for county offices on aging and Aging and Disability Resource Centers statewide to enhance their capabilities with post-hospitalization care to patients who are discharged. To that end, HAH has been supportive of [SB964 SD2 HD1](#) (Relating to Aging) this session to provide such funding.

While we certainly have no issue with an even balance of membership as the resolution purports to seek, we feel that some key stakeholders were excluded, perhaps unintentionally, in an effort to strike that balance. At a minimum, we believe neighbor island acute hospitals and long-term care facilities should continue to be represented on the Working Group.

If the committee is inclined to pass out this resolution, we respectfully request that the objectives be amended to require the Working Group to assess community-based resources that are currently available statewide (including identifying gaps in caregiver training programs) and quantify the impact that funding cuts over the years to various state and county programs have had on caregiver initiatives.

In closing, HAH remains committed to maintaining dialogue with all stakeholders on the important issue of providing support to caregivers in our community, and look forward to continuing our involvement with the Working Group that was established last year.

Thank you for the opportunity to provide comments on SCR107.



THE QUEEN'S HEALTH SYSTEMS

To: Chair Suzanne Chun Oakland
Vice Chair Josh Green
Senate Committee on Human Services and Housing

Chair Josh Green
Vice Chair Glenn Wakai
Senate Committee on Health

From: Paula Yoshioka
Senior Vice President
The Queen's Health Systems

Re: SCR 107, Requesting the Convening of a Family Caregivers Working Group to Examine and Assess Legislation Relating to the Role of Caregivers of Patients Discharged from Hospitals
Hearing—March 31, 2015 at 1:20 PM

The Queen's Health Systems would like to stand behind comments submitted by the Healthcare Association of Hawaii regarding SCR 107, which would continue a working group to discuss issues related to caregivers and post-acute care in the community.

We would like to affirm our support for programs that help patients and families receive needed post-acute care in the comfort of their homes, including the aging and disability resource centers, which connects patients and their families with appropriate post-acute care in the community.

Thank you for your time and consideration of this matter.

The mission of The Queen's Health Systems is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.

March 30, 2015

Senate Committee on Human Services and Housing,
Senator Suzanne Chun Oakland, Chair

Senate Committee on Health, Senator Josh Green, Chair

RE:SCR 107

Requesting the convening of a family caregivers working group to examine and assess legislation relating to the roles of caregivers of patients discharged from hospitals

Most distinguished Chairs Chun Oakland and Green and Members of the Committee:

I STRONGLY **SUPPORT** SCR 107

The organization of a balanced working group of family caregivers (including a variety of experienced representatives in the medical field joined with representatives from caregiver organizations) is an essential and prudent way to establish recommendations for a guideline of minimum and consistent instructions to give to the caregivers who have family members or patients they are medically responsible for in their home environments.

There are many pressures and distractions for home caregivers.

Just considering one of the ailments of elders – Alzheimers * - In 2010, in Hawaii, 54% of the Alzheimer's patients were receiving care in a nursing home. *The balance of these patients* (over 65) receive care in a home environment by a caregiver on call 24/7. It is quite understandable why these caregivers need clear and concise instructions when their loved ones are released from the hospital.

*The following quote from an Alzheimer research study** is most critical to this discussion: (Note: there are 25,000 people in Hawaii with Alzheimer's disease)****

In their analysis of hospitalizations due to any cause, the researchers found that people who developed dementia were admitted 41 percent more often than those who remained cognitively healthy. And for the subset of hospitalizations for conditions—such as urinary tract infections and bacterial pneumonia—that could have been managed with timely outpatient care, admission rates were 78 percent higher in people with dementia.

Dementia patients may end up at hospitals more frequently because they have trouble managing existing medical conditions, the authors suggest. Their dementia makes it hard for them to take medications on schedule, or to alert caregivers and physicians to new symptoms. In addition, the authors write, “underlying conditions that increase the risk of dementia (e.g., stroke) or that develop in the setting of dementia (e.g., trouble swallowing, which increases risk of pneumonia) may increase the risk of hospitalization.”

“If we want to reduce admissions to hospitals in general, then outpatient care of people with dementia would be a very worthy way to go,” said Ken Kosik, a neurologist at the University of California, Santa Barbara, who directs an integrated Alzheimer’s care facility (see [ARF related news story](#)). “This paper brings that message home.”

Please give your vote of support for this resolution to help the Hawaii caregivers.

Respectfully submitted,

Christine Olah
Honolulu Resident

Reference:

*alz.org (Hawaii, 2010, latest statistics)

**“Dementia Patients Hospitalized Twice as Often as Healthy Peers”, Alzforum.org, Jan 25,2012 article

<http://www.alzforum.org/news/research-news/dementia-patients-hospitalized-twice-often-healthy-peers>

**https://www.alz.org/downloads/Facts_Figures_2014.pdf

To: Senate Committee on Human Services and Housing,
Senator Suzanne Chun Oakland, Chair
Senate Committee on Health, Senator Josh Green, Chair

Date: Tuesday, March 31st, 2015

Re: SCR 107, Requesting the convening of a family caregivers working group to examine and assess legislation relating to the roles of caregivers of patients discharged from hospitals

My name is Chalintorn N. Burian, Ph.D. and I am writing in **STRONG SUPPORT** of SCR 107, Requesting the convening of a family caregivers working group to examine and assess legislation relating to the roles of caregivers of patients discharged from hospitals.

I am a family caregiver and I know how important it is for caregivers to get the training needed to care for their loved ones. I believe that Hawaii's 247,000 family caregivers need assistance to properly take care of their loved ones. When their loved ones are discharged from the hospital, many of these caregivers don't have as much information as they need to provide proper care. I strongly support the legislation that was introduced the last two years to help provide family caregivers with the information they need from hospitals. I will continue to support that legislation and work to pass it, but in the meantime we need to pass this resolution.

The family caregivers working group that was created last year to study this problem had twice as many hospital representatives as caregiver advocates. It also had an end date (June 2016) that was way too far into the future. This resolution addresses many of the challenges that exist with the current working group by providing an even balance of working group members between caregiver advocates and hospitals and ensuring that this new working group ends before the start of the next legislative session.

Thank you for allowing me to testify in strong support of SCR 107.

Sincerely,

Chalintorn N. Burian, Ph.D.

Paauilo-Mauka, The Big Island
Phone: (808)775-1064

From: mak221@aol.com
To: [HSH Testimony](#)
Subject: Writing in STRONG SUPPORT of SCR 107
Date: Sunday, March 29, 2015 11:30:19 PM

Honorable Senators Green, Chun-Oakland and Committee members,

I am writing in STRONG SUPPORT of SCR 107 to reconstitute the Caregivers Working Group fairly.

It is obvious that more public members and fewer hospital members need to be on the Committee because otherwise the Caregivers' Bill would have passed easily. Hospitals have the numbers but don't seem to realize the implications that if caregivers are not given proper discharge instructions, the patient is more likely to return within 30 days. This early return:

1. is harmful to the patient
2. reduces Medicare payments to the hospital
3. reduces ratings of hospital quality
4. costs taxpayers money for Medicaid reimbursement.

How could a hospital not be in favor of it? Obviously because patient and caregiver advocates are not visible enough on the Group to point out the FACTS to hospitals.

You may remember a similar disaster when the Health Exchange was not properly constituted. It took the resignation of the Chair to set things on the right track.

Caregivers are on the front-line after discharge. They must know what to do for the patients' sake, their sake and the hospitals' sake.

As a start, please pass SRC107 to get the process moving to help our citizens and hospitals.

Mahalo for reading.

Mark A. Koppel, Ph.D.
Umauma

From: mailinglist@capitol.hawaii.gov
To: [HSH Testimony](#)
Cc: maucrowe@gmail.com
Subject: Submitted testimony for SCR107 on Mar 31, 2015 13:20PM
Date: Saturday, March 28, 2015 2:10:25 PM

SCR107

Submitted on: 3/28/2015

Testimony for HSH/HTH on Mar 31, 2015 13:20PM in Conference Room 016

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| james crowe | Individual | Support | No |

Comments: Please support the formation of this group. I am a senior. My wife is my caregiver. I have experienced discharge from a hospital. Correct, clear medical instructions will enhance the patient's return to health, extend the successful work of the hospital staff and reduce the potential for more expenses for all concerned.

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: [Mary Wahlman](#)
To: [HSH Testimony](#)
Cc: jwisch@aarp.org
Subject: SCR 107 Resolution
Date: Monday, March 30, 2015 3:17:04 PM

Attention to committee chairs : Sen. Suzanne Chun Oakland and Sen. Josh Green

I attended more than one committee hearings regarding the C.A.R.E. act trying to get it placed before the senate for a vote—how very disappointing those results were. Lucky I'm retired, so I didn't also, lose a day off or a day of work—very challenging in our current economy.

This concern is the current caregiving working group which is aggrievedly unbalanced on the side of hospital representation. This resolution would hopefully correct that imbalance.

No, I can't imagine 247,000 family caregivers attending your committee meetings but this is how many of Hawaii's families are currently providing that care to aged or challenged family members. Those caregivers are nearly all providing also, out of pocket expenses estimated at greater than \$5000.00 per annum. (Note this expense keeps them working, and the economy grinding away at their incomes making their care-giving jobs ever more challenging.)

Is it not understandable that any help the caregiver can receive from an institution that could provide first-hand instructions, written instructions, hands on guidance, illustrations—whatever the institution's guideline as stated in hospital policy and procedure would be most welcome, informative and most of all lessen the number of readmissions to institutions? Medicare guidelines currently are beginning to penalize institutions for readmissions within a 60 day period for the same diagnoses—hospitals, also, should welcome the opportunity to discharge promptly and properly to prevent this readmission financial penalty.

On 3/28/2015 AARP sponsored a Caregivers conference at the Japanese Cultural Center on Beretania St. I helped at the check-in tables to pass out name tags to registered persons, I was surprised to see multiple family members attending—that is how urgently people need this type of information. Also, many persons attended that heard about the conference last minute and could only show up last minute. Many walk-ins were late but still welcomed. Special interest breakout sessions could only accommodate those registered first. (The main speaker's room had persons lining the walls, no remaining seats!) The majority of break-out sessions too, had standees along the walls.

This subject is too important to again be stymied by a committee structure proven unworkable.

Thank you for the opportunity to urge passage of the resolution.

Full disclosure: Yes, I am an AARP volunteer, since March 2014. League of Women Voters member and LWV office monitor on Thursday only, since March of 2015. Hawaii voter since 1973. Car owner and driver from the Central district, my second car is TheBus, I'm privileged to pay for a Senior Bus pass since 2010.

From: mailinglist@capitol.hawaii.gov
To: [HSH Testimony](#)
Cc: marvshel@gmail.com
Subject: Submitted testimony for SCR107 on Mar 31, 2015 13:20PM
Date: Saturday, March 28, 2015 6:34:15 PM

SCR107

Submitted on: 3/28/2015

Testimony for HSH/HTH on Mar 31, 2015 13:20PM in Conference Room 016

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| MICHELE PAULARENA | Individual | Support | No |

Comments: Aloha, I support SCR 107, requesting the convening of a family caregivers working group to examine and assess legislation relating to the roles of caregivers of patients discharged from hospitals. My husband was in the hospital three times this year and each time it was important that we receive explicit discharge instructions to ensure his recovery. Mahalo, Michele Paularena Kahului, HI

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: [Midori Kiso](#)
To: [HSH Testimony](#)
Subject: In support of SCR 107
Date: Saturday, March 28, 2015 8:53:09 PM

Senate Committee on Human Services and Housing, Senator Suzanne Chun Oakland, Chair, AND
Senate Committee on Health, Senator Josh Green, Chair.

Dear Senator Chun Oakland and Senator Green:

May I respectfully ask you to re-convene the family caregivers working group to examine and assess legislation relating to the roles of caregivers of patients discharged from hospitals, and ask you both to give support and pass SCR 107 which hearing is scheduled on Tuesday, Mar. 31 at 1:20 pm?

The working group that was created last year when the CARE Act did not pass was not evenly balanced between hospitals and caregiver advocates. It also had a number of other structural issues that this new resolution attempts to fix.

So I am asking you again to support SCR 107 to help us family caregivers in Hawaii who need assistance to properly take care of their loved ones. SCR 107 will give much needed assistance to these many family caregivers who are now spending many hours providing unpaid care and out-of-pocket expenses (of an annual average of over \$5000). SCR 107 will also help many of these caregivers by giving them confidence and as much information as they need to provide proper cares when their loved ones are discharged from the hospital.

I strongly support the legislation that was introduced in the last two years to help provide family caregivers with the information they need from hospitals. I will continue to support that legislation and work to pass it, but in the meantime we need to pass this resolution.

May I remind you that the family caregivers working group that was created last year to study this problem had twice as many hospital representatives as caregiver advocates. It also had an end date (June 2016) that was way too far into the future.

This resolution addresses many of the challenges that exist with the current working group by providing an even balance of working group members between caregiver advocates and hospitals and ensuring that this new working group ends BEFORE the start of the next legislative session.

Thank you both for your tireless work for these years in support of SCR 107.

Respectfully yours,

Midori Kiso
Moiilili District

To: Committee Chair on Human Services, Senator Suzanne Chun Oakland
Committee Chair on Health, Senator Josh Green

Date: March 31, 2015, 1:20 pm, State Capitol, Rm 016

Re: SCR 107 – Requesting the convening of a family caregivers working group to examine and assess legislation relating to the roles of caregivers of patients discharged from hospitals

Chair Oakland, Chair Green and Committee Members:

My name is Ramon Sumibcay, a registered nurse. I am an Advocacy Volunteer for AARP. Thank you for the opportunity to express my **STRONG SUPPORT** to the resolution.

Family caregivers have become significant an integral part of the healthcare system. There are about 247,000 family caregivers in Hawaii. These caregivers provide lots of, if not all, after-care for patients discharged from hospitals. Therefore, it is very crucial and critical that these caregivers should be educated and trained in great detail the importance of proper delivery of after-care for the patients. It is very critical for the speedy recovery of every patient. Also, after-care, when done right, could prevent patients from being re-admitted back to the hospitals for the same reason. It should a cost-effective and a common-sense approach of patient care as a whole.

In addition, the working group to be convened should have a balance representation from family caregivers, advocates of the family caregiving, proponents of the Care Act, and from the hospital health systems. This is a the second time a working group for this legislation, and let's do the right with regard to the composition of the working, so we don't waste more precious time, effort and other resources (legislators could be taking on other important issues.

Mahalo.

Ramon Sumibcay, MHA, RN
MAJ (ret. US Army)