



HOUSE OF REPRESENTATIVES
THE THIRTIETH LEGISLATURE
REGULAR SESSION OF 2020

COMMITTEE ON FINANCE

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NOTICE OF HEARING

DATE: Thursday, February 20, 2020
TIME: 1:00 P.M.
PLACE: Conference Room 308
State Capitol
415 South Beretania Street

*Testimony of John G. McDermott, LSW, ACSW, M.Div.
State Long-Term Care Ombudsman*

In strong support of HB1872 HD1

Purpose of HB1872 HD1: To appropriate funds to the Office of the Long-Term Care Ombudsman for five full-time (5.0 FTE) ombudsman specialist positions; one on Kauai, one on Oahu, one on Maui and two on Hawaii (Hilo and Kona sides).

{Correction: We already received funding for restoring the Oahu position, so we are only asking for one more, not two more, on Oahu.}

Good afternoon, Chair Luke, Vice Chair Cullen and members of the Committee.

My name is John G. McDermott and I have been the State Long-Term Care Ombudsman (SLTCO) since August,1998.

In 1978 the Older Americans Act (OAA) required all states have an Office of the Long-Term Care Ombudsman Program. In 1979 HRS 349 was amended to conform with federal law.

The National Institute of Medicine's 1995 report, "Real People, Real Problems: An Evaluation of the Long-Term Care Ombudsman Programs of the Older Americans Act" recommended **at a minimum** 1 FTE ombudsman per 2,000 residents.

- Hawaii has 1 FTE ombudsman per 12,889 residents.
- National average is 1 ombudsman to 2,208 beds.

This study was done at a time when most residents were in nursing homes. Today's residents live in many more types of facilities (Adult Residential Care Homes, Assisted Living Facilities, Community Care Foster Family Homes) and in Hawaii they are spread over 6 different islands, so the logistics are more complicated than in 1995 and require greater staffing and funding.

The OAA mandates all residents **"have regular and timely access to the LTCOP services."** AOA/Administration on Community Living (ACL) interprets this as "every resident, at a minimum, should be visited quarterly." Our **12,889** long-term care residents live in **1,727** facilities. A quarterly visit means I need to visit **28.78 facilities/day!**

Kauai has 5 NHs w/333 beds, 1 AL w/100 beds, 21 CCFFHs w/48 beds and 6 ARCHs w/26 beds so **33 LTC facilities with 507 beds.**

Maui has 4 NHs w/ 459 beds, 1 AL w/ 144 beds, 59 CCFFHs w/150 beds and 12 ARCHs w/72 beds so **76 LTC facilities with 825 beds.**

Hawaii has 8 NHs w/870 beds, 1 AL w/220 beds, 125 CCFFHs w/339 beds and 42 ARCHs w/190 beds so **176 LTC facilities with 1,619 beds.**

Oahu has 30 NHs w/2,830 beds, 15 ALFs w/2,379 beds, 1,024 CCFFHs w/2,616 beds and 373 ARCHs w/2,113 beds so **1,442 LTC facilities with 9,938 LTC beds.**

Travel to a Neighbor Island includes airfare + car rental + airport parking + per diem. As an example: on January 22nd of this year, the average cost would be \$150 + \$60 + \$18 + \$20 = \$248/trip.

Since airlines require passengers arrive at least one hour before departure – and factoring in the time flying, time picking up the rental car, time driving to the facilities – I have just wasted 2 hours there and two hours back so *only 4 hours left to visit* with the residents.

The time and cost involved clearly demonstrates its much more effective to have "local" ombudsmen who live on the Neighbor Islands, know the people and the community, can be

available for evenings or weekend investigations, family councils, senior fairs, recruiting volunteers, working with the local media, County Councils and local Area Agencies on Aging.

Some are proposing that we continue *contracting* out these positions and not increase the size of state government and associated liabilities. I think that's unfair to the Neighbor Islands and reflects a Honolulu-centric mentality that many find insulting and demeaning – myself included. Neighbor Island residents pay the same federal and state taxes as Oahu, yet they have never had the same “*regular and timely access to services*” provided by the LTCOP. It's unfair.

A quick review of our 2017 contractor experience: After receiving permission to post the contracts and get the word out by various e-mail list-serves, we received only ONE application for Kauai, ONE application for Maui, ONE application for Hilo and after many more months ... ONE application for Kona. Disappointing but not a surprise. With Hawaii's high cost of living, young people need full-time jobs, with benefits. The labor market in Hawaii is very tight so lots of competition for these workers. All our applicants were recent retirees who knew of the LTCOP and wanted to help but discovered this type of advocacy within long-term care facilities was much more emotionally and physically draining than they had expected.

These contractors were all part of the *sandwich generation*... some taking care of parents AND children starting lives of their own. Our Kauai contractor had to quit 2/7/20 after her one-year commitment to care for multiple family members. I won't give all the details but her plate was FULL and so she had to move on. On Kauai we contracted with the Kauai Agency on Elderly Affairs after receiving no applications.

Our Maui contractor was previously an ombudsman volunteer for 7 years so no learning curve there. We were happy he applied for the position and he was happy to finally get some money (we don't even have funding to reimburse our volunteers for their gas mileage to the facilities). Unfortunately, he is now having some health issues and may also need to step down.

Our Hilo contractor worked as Director of Social Services at several nursing homes so she also had no real learning curve (although we did have to address any potential conflicts of interest) but after hiring her, she informed us she could no longer do the amount of walking required for this job due to a leg injury.

We then contracted with the Hawaii Office on Aging so we wouldn't lose the money. We got lucky. They connected us to a DOH public health nurse practitioner who had just retired after 40 years and wanted to help the LTCOP after unexpectedly losing her husband and needing something productive to do during this transition period. She is often good-naturedly asking if we have found her replacement yet because she is now ready to move on as well.

Every organization I know of has had problems finding workers on the Kona side. We finally had an applicant who had recently retired to Waikoloa from the Mainland and wanted to get to know Hawaii's people and history through the Ombudsman position. She was very good but decided Waikoloa was more expensive than she had budgeted and left us to work full-time.

Our contractors made a MAJOR difference. For the first time since 1978 when the LTCOP was established, EVERY facility on the Neighbor Islands received quarterly visits by the ombudsman (and monthly on Kauai). We resolved most of the residents' complaints and learned of several systemic problems we need to address with the Department of Health. But contractors take a long time to find, and train, and when the contract is pau, we must do this all over again. It's not fair to the Neighbor Islands kupuna. In this kind of work, you get better over time. You need the cumulative experience to work with people in a crisis. I need 5 FTEs who will make the commitment to be there for 25 years like I did.

Others ask why we don't consider using volunteers? Been there, done that. I created the Volunteer Coordinator position back in 2001 with the support of the Legislature. Since then we have certified almost 250 volunteers. These folks are carefully screened. We provide 20 hours of classroom training and 8 hours of on-site training, one-on-one with me. We ask for a one-year commitment (many have given us years!) and that we all meet as a group monthly, so everyone stays on the same page and we learn from one another by discussing cases and having guest speakers. We currently have 21 wonderful volunteers but most of our volunteers only want to be assigned to ONE facility so I would need 1,727 volunteers to cover all our facilities.

It's much easier to recruit volunteers to clean a beach *for a day*, build a house *for a day*, count whales *for a day*. A quick assignment, folks feel good about what they did, and it's over. That's not the LTCOP. This is a commitment of one year to make weekly visits to talk story with the residents, listen to their concerns and problems, then work on solutions with administration. Sometimes successful, but not always. Vulnerable seniors with dementia or other limitations don't call my office. Many don't have a phone. They don't know what "ombudsman" means. You must go to the facility and face-to-face engage with the residents until they trust you and open up about their concerns. There is always the fear of retaliation so the weekly visits to follow up and make sure the residents are still safe after voicing concerns is critical.

As to another criticism why we don't "partner" with other organizations, I can provide a very long list to prove that we have and will continue to partner with anyone interested in protecting our kupuna.

We appreciate our volunteers and our contractors, but they are NOT a substitute for FTE permanent staff. One FTE Ombudsman for the entire State doesn't work. Our young people are moving away. It's too expensive to live here. Affordable housing is nonexistent. For the kupuna

who decide to stay behind, the *extended ohana* are no longer available to help them, support them, protect them. Our ombudsmen help fill in for that loss. Residents know what they tell the ombudsman is confidential and that the ombudsman will visit again on a regular basis so if their situation deteriorates, the ombudsman will be there to advocate on their behalf.

Variations of companion bills HB1872 and SB2337 have been introduced multiple times before without success, but with the growing numbers of Hawaii seniors needing long-term care placement, *it has never been more important than now to pass these bills.*

The LTCOP tries to protect our most vulnerable, and often hidden from sight, kupuna. The LTCOP should not be confused with Adult Protective Services or the Department of Health's Office of Health Care Assurance (the licensing agency). APS only investigates cases of abuse or neglect and they have a screening process to weed out callers. DOH focuses mostly on annual inspections and then they are gone. Yes, they also investigate complaints but only the LTCOP is there to *pro-actively* prevent problems; to work with residents, family and staff to make the facility better; to provide support and protection to the residents, as well as to investigate complaints and address concerns by visiting at least once a quarter.

Please support HB1872 HD1 so we can better protect our seniors who are responsible for everything we have and love about Hawaii. Mahalo.

Mahalo for giving me this opportunity to testify.



Hawaii's Long Term Care Residents

12,889 LTC residents statewide		(1/23/20)
○ 47	Nursing Homes	(4,492 beds)
○ 433	Adult Residential Care Homes (ARCH), Expanded, type I and II	(2,401 beds)
○ 18	Assisted Living Facilities	(2,843 beds)
○ 1,229	Community Care Foster Family Homes	(3,153 beds)
...Total community beds 8,397		

Total: **1,727** Facilities ... 60 days/quarter = 28.78/day!!

Federal funding for the LTCOP is based on senior population. 12 states receive the same federal funding as Hawaii. The difference is what they receive as additional funding from their Legislatures.

FY2018 Federal Funding Title VII

Ombudsman/Elder Abuse



Based on *Senior* Population – **OMB \$84,052 + EA \$23,710 = \$107,762**

Alaska Delaware District of Columbia Hawaii

Idaho Maine Montana New Hampshire North Dakota

Rhode Island South Dakota Vermont Wyoming

In 2017 the LTCOP received an additional \$157,168 for 3 part-time contractors and restoration of the F/T Oahu position. Without that additional amount, funding would only be \$176,850.

FY2018 State / Local / Total Ombudsman Funding

Alaska \$497,679 state / \$731,241 total funding
Delaware \$384,013 state / \$824,784 total funding
D.C. \$383,252 state / \$562,602 total funding
Hawaii \$102,942 state / \$257,642 total funding
(2017 \$176,850 w/out contractors)
Idaho \$312,443 state / \$652,226 total funding
Maine \$756,033 state / \$1,203,544 total funding
Montana \$536,202 state + \$212,932 LF / \$1,189,171 total funding
New Hampshire \$233,106 / \$612,652 total funding
North Dakota \$227,832 / \$417,795 total funding
Rhode Island \$339,400 + \$46,119 LF / \$724,927 total funding
South Dakota \$62,892 / \$581,029 total funding
Vermont \$88,344 + \$46,119 / \$707,481 total funding
Wyoming \$146,641 / \$328,876 total funding



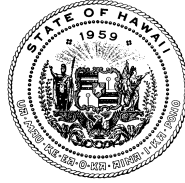
FY2018 State / Local / Total Ombudsman Funding



State	Staffing	State Funding	Total Funding
Alaska	5 FTE	\$497,679	\$731,241
Delaware	5 FTE	\$384,013	\$824,784
D.C.	7 FTE	\$383,252	\$562,602
Idaho	10 FTE	\$312,443	\$652,226
Maine	13.67 FTE	\$756,033	\$1,203,544
Montana	19.72 FTE	\$536,202 + \$212,932 LF	\$1,189,171
New Hampshire	5 FTE	\$233,106	\$612,652
North Dakota	6.50 FTE	\$227,832	\$417,795
Rhode Island	6.15 FTE	\$339,400 + \$46,119 LF	\$724,927
South Dakota	7 FTE	\$62,892	\$581,029
Vermont	6.60 FTE	\$88,344 + \$46,119 LF	\$707,481
Wyoming	5 FTE	\$146,641	\$328,876



DAVID Y. IGE
GOVERNOR OF HAWAII



CAROLINE CADIRAO
DIRECTOR

BRUCE S. ANDERSON, Ph.D.
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**Testimony COMMENTING on HB1872 HD 1
Relating to An Appropriation for the Office of the Long-Term Care Ombudsman Program**

COMMITTEE ON FINANCE
Representative Sylvia Luke, Chair
Representative Ty J.K. Cullen, Vice Chair

Testimony of Caroline Cadirao
Director, Executive Office on Aging
Attached Agency to the Department of Health

Hearing Date: February 20, 2020
1:00 P.M.

Room Number: 308

- 1 **EOA's Position:** The Executive Office on Aging (EOA), an attached agency to the Department
- 2 of Health, is providing comments on HB1872, HD1 relating to the Office of the Long-Term Care
- 3 Ombudsman Program (LTCOP), a program of the EOA.
- 4 **Fiscal Implications:** This measure appropriates an unspecified amount for fiscal year 2020-2021
- 5 to be expended by the Executive Office on Aging to establish staffing support for LTCOP.
- 6 **Purpose and Justification:** The LTCOP is required by federal law¹ and state law² to protect the
- 7 human and civil rights of residents in all long-term care settings. The Long-Term Care
- 8 Ombudsman Program is required to visit facilities quarterly, respond to complaints, engage in
- 9 investigations, provide information, assistance and referrals to long-term residents and their

¹ Title VII, Chapter 2, Section 711 of the Older Americans Act (OAA) of 1965, as amended by Public Law 89-73

² Hawaii Revised Statutes Section 349-21

1 families, facilitate family councils statewide, provide community education, and administer the
2 program.

3 Currently, LTCOP has 1 Long-Term Care Ombudsman, 1 Volunteer Coordinator, and 1 Oahu
4 Ombudsman position that is established but needs to be filled. Thanks to the State Legislature,
5 EOA was able to secure with state funds providing for 3 small purchase contracts with the
6 counties of Hawaii, Kauai, and Maui. These contractors are trained Ombudsmen and have
7 assisted to expand quarterly visits; however, they do not replace the unmet needs that would be
8 filled by full-time staff. A 1995 recommendation is for one full-time ombudsman for every two
9 thousand residents. Hawaii has 12,889 residents in 1,727 facilities statewide. Based on these
10 statistics, LTCOP should have 6 full-time long-term care ombudsmen.

11 EOA conducted a comparison of other LTCOP in states of similar size.

- 12 • Maine population of 1.3 million =13 full-time employees
- 13 • West Virginia population of 1.79 million =11 full-time employees
- 14 • New Hampshire population of 1.36 million = 5 full-time employees

15 To meet the goal of quarterly visits and to advocate for the most vulnerable residents in all care
16 settings, LTCOP needs to conduct 28 visits a day statewide. Based on our current data with our
17 staff, contractors, and volunteers, we average four (4) visits a day.

18 The subject matter committee offered suggestions to expand our volunteer pool and to look at
19 private and public partnerships. EOA's Long-Term Care Ombudsman Volunteer Coordinator
20 continues to build partnerships in the community and train volunteers to be certified Ombudsmen
21 by providing a comprehensive 20 hours training followed by on-site training by our (1) state
22 LTC ombudsman. Our volunteers are a special breed and not everyone is a fit for this critical

1 volunteer role. We will also explore private/public partnerships as suggested. The ideal situation
2 is to grow the LTCOP with qualified staff, an expanded volunteer program, and creative
3 partnerships. Contracting would expedite addressing the need, however, in the long term the
4 situation is not ideal as EOA would need to procure, contract, award and train the contractors
5 every two to four years.

6 EOA would like to offer a correction to HB1872 HD1. Page 2, line 11, delete the word “annual”
7 and replace with the word “quarterly” to read “lacks staff to visit each facility on a quarterly
8 basis...”

9 The population continues to increase with every 4th person in the state being over the age of 60.
10 We need to meet our obligation to residents in all care settings.

11 **Recommendation:** The Long-Term Care Ombudsman Program is not part of the
12 Administration’s budget request. We humbly request support to fund this program provided that
13 its enactment does not reduce or replace priorities with the Administration’s budget request.
14 Thank you for the opportunity to testify.

Harry Kim
Mayor



Roy Takemoto
Managing Director

Barbara J. Kossow
Deputy Managing Director

County of Hawai'i Office of the Mayor

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February 18, 2020

Representative Sylvia Luke, Chair
Representative Ty J.K. Cullen, Vice Chair
Committee on Finance

Dear Chair Luke, Vice Chair Cullen, and Committee Members:

RE: HB 1872, HD1 Making an Appropriation for the Office of the Long-Term Care Ombudsman Program

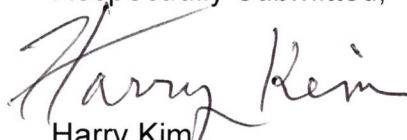
Please accept this testimony in support of the intent and purpose of HB 1872, HD1, dealing with the Long-Term Care Ombudsman Program.

It seems clear that Oahu has been grossly underserved, and the neighbor islands almost totally neglected, by virtue of inadequate funding for this program. With our senior population growing daily, it is unacceptable for this situation to continue, now that it has been brought to your attention. According to the bill's preamble, the ombudsman program is mandated by the United States Administration on Aging through the Older Americans Act. It would appear that Hawai'i is currently fulfilling this mandate in name only.

Please approve HB 1872, HD1 with a reasonable allocation of resources and an early effective date. It ought to become part of your base budget as well.

Thank you.

Respectfully Submitted,


Harry Kim
MAYOR



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HOUSE OF REPRESENTATIVES
Committee on Finance
Thursday, February 20, 2020
1:00 p.m.
Conference Room 308

To: Representative Sylvia Luke, Chair

Re: HB 1872 HD1 Relating to an Appropriation for the Office of LTC Ombudsman Program

Dear Chair Luke, Vice-Chair Cullen, and Members of the Committee,

My name is Keali'i Lopez and I am the State Director for AARP Hawai'i. AARP is a membership organization of people age fifty and over, with nearly 145,000 members in Hawai'i. AARP advocates for issues that matter to Hawai'i families, including the high cost of long-term care; access to affordable, quality health care for all generations; and serving as a reliable information source on issues critical to people over the age of fifty.

HB 1872 HD1 appropriates funding to the office of Long Term Care Ombudsman to establish full time equivalent ombudsman specialists for the counties of Oahu, Hawaii, Kauai and Maui.

AARP strongly supports HB 1872 HD1. This office is greatly understaffed to respond and investigate complaints and concerns of long term residents who reside in Hawaii's long term care facilities. There is currently one ombudsman and nine ombudsman volunteers responsible to visit residents in Hawaii's 1,696 facilities, which include adult residential care homes, foster care homes, assisted living and nursing homes, caring for over 12,000 residents.

The requested appropriation provides the necessary funding to hire additional ombudsman specialists in each county who can address our vulnerable residents' needs and concerns in the most expedient manner.

Thank you for the opportunity to testify in support of HB 1872 HD1.



The Thirtieth Legislature
Regular Session of 2020

HOUSE OF REPRESENTATIVES
Committee on Finance
Rep. Sylvia Luke, Chair
Rep. Ty J.K. Cullen, Vice Chair
State Capitol, Conference Room 308
Thursday, February 20, 2020; 1:00 p.m.

**STATEMENT OF THE ILWU LOCAL 142 ON H.B. 1872, HD1
MAKING AN APPROPRIATION FOR THE OFFICE OF THE
LONG-TERM CARE OMBUDSMAN PROGRAM**

The ILWU Local 142 supports H.B. 1872, HD1, which appropriates funds to the Office of the Long-Term Care Ombudsman for an unspecified number of ombudsman specialist positions.

Although nationally recognized standards recommend a minimum of one full-time paid ombudsman for every 2,000 long-term care patients, Hawaii's ombudsman program has had only a staff of one since the Executive Office on Aging's reorganization in 2015—this despite the fact that Hawaii's long-term care population has steadily increased during those years. When staffing had been severely cut, volunteers were recruited, but these volunteers cannot compensate for lack of full-time staff.

Long-term care ombudsmen are vital to ensuring that elderly and disabled individuals who are forced to live in long-term care facilities are properly cared for, receive compassionate and appropriate care, and receive the services they need.

With the likelihood of long-term care facilities increasing as Hawaii's aged population continues to grow and long-term care needs escalate, Hawaii must provide for ombudsmen who can help to ensure the quality of facilities and staffing that serve this particularly vulnerable population.

The ILWU urges passage of H.B. 1872, HD1. Thank you for considering our testimony.

HB-1872-HD-1

Submitted on: 2/19/2020 11:37:34 AM

Testimony for FIN on 2/20/2020 1:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Brent Freemont	State LTCOP	Support	No

Comments:

Aloha, My name is Brent Freemont and I am the contract Ombudsman for Maui County. The Ombudsman program is a valuable resource for our Kupuna and Maui County is made up of three islands to visit, currently I'm only contracted for 20 hours a week. They need our support and I hope that you'll support HB1872 and SB2337. Thank you.

HB-1872-HD-1

Submitted on: 2/19/2020 1:01:29 PM

Testimony for FIN on 2/20/2020 1:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
jacqueline gardner	Individual	Support	No

Comments:

as a 66 year old female I am in support of HB 1872 because our seniors deserve an ombudsman to represent their rights as residents of long term care. Elders in long term care facilities are vulnerable and have often "lost their voice" Having an Ombudsman allows seniors to voice their concern without as much fear of retaliation. The ombudsman having to rely solely on a volunteer to protect Hawaii's Kupuna is ridiculous.

HB-1872-HD-1

Submitted on: 2/18/2020 10:13:50 PM

Testimony for FIN on 2/20/2020 1:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Lynn Niitani	Individual	Support	No

Comments:

I strongly support this measure to appropriate \$467,651 to establish positions and provide support to the long-term care ombudsman program. Long-term care ombudsmen serve residents by advocating for quality care that can affect changes to simple but important things like the right to nutritious food or a comfortable room temperature to serious issues like receiving appropriate and timely care. The advocacy ombudsmen provide may lead to improved quality of life for vulnerable citizens who are dependent on others for their care.

Having visited relatives in long-term care facilities, I know how important it is to have an advocate who is outside of the facility to whom I can turn to for advice and information free from bias and without fear of retaliation. All of our kupuna deserve access to these services and John McDermott has been doing this alone for too long. It is time to dedicate funding to these much-needed services and ensure this program has the resources it needs. Thank you very much for the opportunity to submit my testimony in support of HB 1872.

HB-1872-HD-1

Submitted on: 2/19/2020 8:06:03 AM

Testimony for FIN on 2/20/2020 1:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Clarence Agena	Individual	Support	No

Comments:

I ask for your support of HB1872, Making an Appropriation for the Office of the Long Term Care Ombudsman Program (LTCOP). I have been a volunteer in the LTCOP for two years, and have been an advocate for residents primarily at Ka Punawai Ola Nursing Facility in Kapolei. I spend over two hours per week helping the residents in the facility. I am also involved with the Project Dana Caregivers Support Group and the City's Elderly Affairs Division. My past career was with the Hawaii National Guard and State Department of Defense. I am now focused as a volunteer with the LTCOP and being a volunteer mentor, advisor, and counselor to seniors and caregivers. As a 75 year old senior myself, for now, I'm just keeping myself busy helping others. Please support HB1872.

HB-1872-HD-1

Submitted on: 2/19/2020 8:37:11 AM

Testimony for FIN on 2/20/2020 1:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jim Springer	Individual	Support	No

Comments:

2/17/2020

House Finance Committee

HB1872 HD1 - MAKING AN APPROPRIATION FOR THE OFFICE OF THE LONG-TERM CARE OMBUDSMAN PROGRAM.

As a LTCO volunteer I support the above referenced bill

Aloha Chair Luke & Members,

My name is Jim Springer, and a State of Hawaii, Long Term Care Ombudsman (LTCO) volunteer here on Oahu. A year and a half ago after an serious illness which was my introduction to aging, as I'm in my 70's; it was a stark eye opener for me to the aging process that we go through and the resources to make it a pleasant journey.

Selfishly, after my recovery, looking for a way to volunteer in the aging area I happened on the State of Hawaii, Long Term Care Ombudsman office that has 2 full time employees and approximately 10 volunteers serving all of the islands 12,500 LTC beds in the State, 9,500 of which are on Oahu.

The LTCO office funding and number of volunteers and staff is woefully inadequate. I don't even remember how I found these 2 souls at the State LTCO office to be able to volunteer. As far as I know, there is nothing of a public nature alerting the public to this amazing wonderful resource for and about kupuna care in LTC facilities. It is federally mandated, and adopted by the State of Hawaii in the 70's. John McDermott, the State LTCO for 20+ years is a tremendous resource to the public and in the field where we volunteers are LTC residents voice with all manner of issues. By enacting SB 2337, the legislature will take a large step forward in providing kupuna in LTC with an advocate for their quality of care and life issues.

In closing, as a volunteer, there is nothing as rewarding and personally satisfying as advocating for a LTC residents quality of care and life issues. We will all be there shortly. The committees passage SB 2337 SD1 will be a feather in your cap.

Mahalo for taking this testimony.

Respectfully submitted by Jim Springer