

**Health and Medicine Policy Research Group  
Nursing Home Safety Task Force Testimony  
October 20<sup>th</sup>, 2009**

My name is Phyllis Mitzen. I speak on behalf of the Health & Medicine Policy Research Group, Center for Long-Term Care Reform in commending Michael Gelder and the Nursing Home Safety Task Force for the way you are handling this delicate and extremely important topic. The collaboration among state departments is not only refreshing but necessary to successfully improve the way people are served in our Illinois nursing homes. The current 'crisis' evolved over the years because of Illinois' failure to adequately plan for the long term needs of people with severe mental illness. Nursing homes stepped in to fill the void and the state responded by adding regulations.

At the risk of repeating what has already been stated, the state of Illinois has a moral obligation to care for the health care needs of our most frail and vulnerable citizens, including meeting their mental health needs. The severely mentally ill deserve competent and appropriate care that they are not currently receiving in some nursing homes, despite explicit regulations.

To maintain the dignity of all people residing in nursing homes, we must learn from research into best practices and benefit from the experiences of other states who have encountered similar difficulties. The problems are too significant for expediency to triumph over careful planning. While we understand that fiscal realities may not permit the separation of frail older adults and younger disabled people from the mentally ill in these nursing homes, Illinois must invest resources to serve each of these individuals in evidence-based programs where each person can live safely and receive the services they need. It is imperative that people are effectively assessed and reassessed to ensure that their well-being, safety, and needs are met throughout their stay in our nursing homes.

Long term care planning requires a systematic approach. We are pleased that the Governor has taken this first step to bring all of the parties around the table to address nursing home safety. That said, we find ourselves in this current situation with a need to

change the entire long-term care system: the nursing homes are in obvious need of purposeful intervention AND the home and community based services we offer are in dire need of attention and funding. Five years ago, the state legislature mandated that Illinois transform its comprehensive system of older adult services. Central to this transformation was the commitment to care for people at home, rather than in nursing homes, for as long as possible. This goal remains essential if we are to take seriously the wishes of the state's elders and their families. We trust that this present collaboration among state departments will serve as a model to guide further reform of long-term care. This commitment must extend to all people who need assistance. It has been said that a crises is too important to waste. We are in crises now—budget woes that are threatening home and community-based services, serious problems within our nursing homes, cuts to other services we need and value. Let us use this crisis to make a renewed commitment to those among us who must rely on others to do what so many of us take for granted. We who are seated in this room recognize the gravity of this situation; if we do not act with urgency, the long-term care system in Illinois will continue to show up as exposes in the Chicago Tribune.

Phyllis B. Mitzen, Co-Director  
Center for Long-Term Care Reform  
Health and Medicine Policy Research Group  
312-372-4292