

Inhumane and Deadly Neglect Revealed in Assisted Living

Driven by Weak Regulatory Standards of Care and

Underfunding of Regulatory Oversight

Review of Investigations by the Minnesota Office of Health Facilities Complaints (OHFC) reveals many substantiated cases where neglect of healthcare or supervision results in an unimaginable number of deaths and inhuman suffering for elders living in assisted living residences in Minnesota.

Key Findings – Limited Regulatory Oversight Driving Dramatic Increase in Neglect in Minnesota Assisted Living

The horrific cases of neglect revealed in the substantiated investigations point to several key failings in the assisted living industry. These failings result in serious harm and contribute to many premature, painful deaths. The key reasons for this suffering and death include, in part, the following.

- Assisted living is accepting a wide range of care needs without credible authority and responsibility
 - o No clear, consistent standards of care to guide the industry, residents or families
 - O No nurse assessment of care needs *prior* to moving in to the residence
 - o Poor communications among staff, management and other providers
- Severe staffing issues include under-staffing, poor hiring practices, lack of staff supervision and training insufficiencies that result in:
 - o Gross understaffing
 - o Medication errors and theft
 - Ignored or untreated emergencies or changes of condition
 - o Falls as a result of staff being untrained to use equipment for safe transfers
 - Poor care given at times leaving residents for many hours without food, water, toileting care, etc. or poor care of wounds that lead to amputations and severe and sometimes fatal infections
 - Sexual predators that take advantage of elders and vulnerable residents
- Inferior memory care standards result in:
 - Unsafe environments that allow wandering outside the residence
 - o Dementia residents lack appropriate, person-centered activities
 - o Inadequate or lack of staff supervision

Minnesota Legislators – Please hear the voices of our elders and vulnerable adults coming through these investigations, pleading to be helped and to end their suffering and premature deaths. Our loved ones deserve much better care and dignity than they are now receiving. It is their human right.

Minnesota House and Governor Target \$33 million for elder care - Thank You!

Minnesota Senate Target \$5 million for elder care - Shockingly Insufficient!

Stop the Delays - Stop the Suffering and Deaths

Examples of the Gross Neglect Resulting in Death and Suffering

- o A resident appears to get no assistance with hygiene for a number of days, bedding soaked and stained in urine.
- Kitchen staff were directed to provide care and give medications. The assisted living residence had a 1:26 ratio of staff to residents.
- o A resident suffered a brain hemorrhage after a fall but was left on the floor for 4 hours and only given a blanket and pillow while left lying on the floor.
- Heart pump was not plugged into external power source resident died.
- Staff ignored a resident with a history of hernias for many hours who was screaming 'help me, help me' before staff
 finally got help but it was too late the resident died.
- Staff ignored a resident for 3 ½ hours after falling. A staff member walked past the resident without acknowledgement, watched TV, read a magazine and left the area several times.
- o 24 of 42 chemotherapy medication doses were not given the resident died earlier than expected.
- A dementia resident did not get the prescribed wellness check, wandered from the facility and drowned in a pond three blocks away.

Elder Voice Family Advocates, AARP and Legal Aid Call for Legislative Reform This Session

The Minnesota legislature has to finally accept the harsh truth that they have ignored our failing assisted living industry to the point that we are seeing an epidemic of neglect, abuse and exploitation. Here are a few facts:

- The number of nursing home and assisted living complaints to the OHFC have increased from 4,000 in 2010 to 22,500 in 2018.
- o Minnesota is the *only state* that does not license assisted living.
- o Minnesota is grossly underfunding regulatory oversight and enforcement.
- Minnesota has weak or no basic protections for the residents of Assisted Living residences.

Our Legislative Solutions

We ask that our legislators be responsible and fulfill their duty to keep all citizens safe and well cared for, including the elderly who are frail and often unable to advocate for themselves.

Require Assisted Living Licensing to Ensure Care Consistency

- 1. Single contract required for housing and services and adds new contract protections
- 2. Creates three tiers of licensees
- 3. Establishes MDH Regulatory Powers/Authority
- 4. Resident assessments prior to moving in and when condition changes
- 5. MDH establishes rules for minimum standards

Establish Clear Resident Protections

- 1. Home Care Bill of Rights expanded and strengthened and Assisted Living Addendum
- 2. Electronic monitoring authorized
- 3. Prohibit retaliation against residents, families and employees
- 4. Prohibit deceptive marketing
- 5. Private enforcement of key rights
- 6. Protections against arbitrary discharge/service terminations

Increase Funding for State Regulatory Oversight

There are a number of areas that need substantial increases in funding to better enable MDH to regulate and enforce the laws. MDH has been deluged with complaints in the past few years, but hasn't gotten budget increases sufficient to handle to work load and better curtail the abuse.

For more information contact Kristine Sundberg at 952-239-6394 or Kristine sundberg@hotmail.com





