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Sent: Thursday, March 14, 2013 3:41 PM

To: Rep Johnson

Subject: Testimony re HB3099

Mr. Chairman, Members of the House Committee on Health Care. My name is David Dockham. I have lived for over four years in a 70-unit assisted living facility at 1795 8th St. in Hood River. I am the elected Chair of the Facility's Resident Council.

The incident leading up to this proposed legislation occurred ten months ago when, unable to fall asleep, I pulled the cord by my bed and asked the responding caretaker to have the med aide bring the blood glucose meter to check my blood sugars. Instead, the same caretaker returned with a pressure meter and cuff, proposing to take my blood pressure. With gestures and words, I repeated my request for the *Med Aide and blood sugar meter*. The med aide did finally come, but also proposed to use the equipment to take my blood pressure.

I finally decided that my best chance was to ask them to call 911 for the ambulance crew. As they started to leave, I had visions of them never returning, so I anxiously motioned to them to stay and use my own bedside phone. As the med aide stood frozen with my phone in hand, I realized that the next problem was that she didn't understand the term "911." So, I took the phone back and dialed it myself. My next mistake was to return the phone to her. When I realized that the 911 operator was not understanding the med aide's limited English, I grabbed the phone back and explained my need and location. I then laid back on my bed, trying to relax as much as possible.

When the ambulance crew arrived, they found that my "cbg" level was 51, compared to the "perfect" 100 and the "low" range 43-73. Through the night, I probably would have slipped even further. They gave me a medical solution to drink and left shortly before midnight, after my blood sugar level had risen to 115.

The irony of all this is that I am in assisted living now only because I had passed out at home and was saved 12-18 hours later by a home health nurse who knew my recent surgical history - and diabetes - and realized that my car in the driveway meant that I really was at home. So she came in despite my not answering the door.

It's also important to understand that, *at this time*, I am fortunate to be above the average facility's resident in terms of knowledge of the needs for maintaining my health. I would estimate that probably two-thirds of the residents where I live are senile, in the first stages of dementia/Alzheimer's or have some other condition involving limited mental capacity. Would one of them get the blood pressure or blood sugar test if s/he had a heart attack and could only point at the site of pain in the chest or arm? And what happens to me in the future, if I'm no longer able to dial 911? Obviously, those are the reasons I requested this kind of legislation and why my Representative, Mark Johnson, along with your Chairman, were kind enough to sponsor it.

This is a very important beginning. The lack of knowledge of even the most basic medical terms are indicative of a much bigger problem: the absence of any real training for those, mostly very young caretakers and med aides who will be the first line of defense for your parents and grandparents, as they come to need these kind of facilities. On behalf of those living in them today, I hope you will see fit to take this first but very important step.

Thank you for listening. I'd be happy to try to answer any questions you may have.