

I am writing in support of mandatory staffing levels at Memory Care Facilities.

I have had the honor and misfortune to be the primary or secondary person responsible for the care of four aging parents and parents-in-law in Oregon over the past 14 years. Three of whom lived first in a communal "independent living" situation, later moving to assisted living and all of them either in memory care or skilled nursing care at the end of their lives. While family members visited daily (until the Pandemic), it was hard to know how long my mother had to wait to use the bathroom or what she was being fed at every meal. Often I would have a conversation with the person in charge of her floor only to find that the concern had not been shared with the next shift. The reason often came down to being short staffed. What helped us be able to call attention to both missed care and neglect was that they were all on hospice for the last months of their lives. The hospice nurses and social workers helped act as another set of advocates for our loved ones.

Our experience was that assisted living levels of care are extremely difficult to verify, especially as even when they functioned fairly well our family members struggled to remember whether a caregiver had been to see them that day or earlier in the week.

Staff to resident ratios should be higher in memory care than in assisted facilities and the staff should have training in dementia care. All facilities caring for vulnerable people should be monitored and inspected by state HHS and it should be verified that they follow the care plan, consistent with the LOC (level of care) for which patients are charged. There should be mandated staff-resident ratios & available medical consultation.

Any inspection should include visits with patients and observing whether the activities occurring are consistent with the activities calendar. In places where patients can report, they often say none of it really happens. In memory care, those activities should be focused more one-on-one on each resident and what they respond to and enjoy.

And this personal note: Consumers need clarity about the capabilities of licensed facilities: When my partner's mother moved to an assisted living facility (ALF), she was beginning to lose her memory. It was not until her dementia gave her periods of disorientation that the ALF told us that they could not manage her care and that she needed to move to Memory Care. We had not researched area Memory Care Facilities and were not prepared for the sudden crisis that occurred. Had we been more aware of the limitations of the ALF, we would have done our homework in advance and been able to move her with her partner to the Memory Care at the same time, rather than move him there two months later, causing further distress for them both in the last months of their lives. Senate Bill 714 is a step in the right direction.