

April 11, 2019

Wayne A. Smith President & CEO

The Honorable Nicole Poore Senate Majority Leader 411 Legislative Avenue Dover, DE 19901

Dear Senator Poore:

Alfred I. duPont Hospital for Children Roy Proujansky, MD, Chief Executive of Nemours Delaware Valley Operations

Bayhealth
Terry Murphy,
President & CEO

Beebe Healthcare Rick Schaffner, RN Interim President & CEO

Christiana Care Health System Janice E. Nevin, M.D. MPH President & CEO

Nanticoke Health Services Steven A. Rose, RN, MN President & CEO

Saint Francis Healthcare
Daniel Sinnott
President & CEO

Delaware Healthcare Association Wayne A. Smith President & CEO Thank you for your leadership in being the lead Senate sponsor on Senate Concurrent Resolution 30, creating a study group to examine the issue of patient abandonment at hospitals and medical guardianship. The Delaware Healthcare Association (DHA), representing hospitals and healthcare delivery systems in Delaware, strongly supports this important legislation.

Typically, when a patient in hospital has recovered and is no longer acute, they are discharged to recover at home or in the care of a skilled nursing, long-term care, or other appropriate facility. When individuals are unable to make decisions for themselves, they may require a family member or a guardian to act as the decision-maker to facilitate the transition. In some cases, a family member abandons their relative and the patient is remains in the hospital. Our lack of adequate public guardians means having a guardian appointed is often long delayed, leaving the patient to languish in the hospital long after their period of acuity.

The lack of a suitable decision-maker or guardian often leads to long and unnecessary hospital stays. A recent DHA survey of Delaware hospitals found that over a two-year period:

- 115 Extended Stay patients were in hospital a total of 11,398 days;
- 110.7 days was the average length of stay beyond acuity;
- 581 days was the longest length of stay by a single patient;
- 3 hospitals saw longest length of stay exceed one year.

This situation is terribly unfair to the patient who due to challenges in both the guardianship program and with acquisition of the necessary legal authority to make decisions regarding appropriate non-acute care placement, endures an extended stay in a hospital room for long periods of time. Risk of infection as well as an inability to enjoy the fruits of life in a setting appropriate to the particular patient's non-acute care needs make this an issue very much needing a remedy.

There is a secondary and real impact on other patients who cannot be admitted in a timely basis due to unavailability of rooms. This leads to hallway stacking near the emergency department, an uncomfortable limbo for patients and families and very much less than ideal in terms of appropriate care delivery. As you can imagine, during periods of high hospital utilization (like last year's serious flu experience), the lack of availability of rooms occupied by non-acute individuals was acutely felt.

The study group created by this legislation would convene legislators, state officials, the Public Guardian, Court of Chancery, and other stakeholders to examine this issue in detail and report to the Delaware General Assembly and the Governor on their findings and recommendations.

We thank you for your leadership on the medical guardianship issue and encourage all members of the General Assembly to join you in supporting this important legislation. We look forward to working with you to move this bill forward.

Sincerely,

Wayne A. Smith President & CEO

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