**HB 1343** 

**Human Services Committee** 

**Testimony of Noelle Flodin in support** 

**January 26, 2020** 

Mr. Chairman and Members of the Committee:

I am here today to offer testimony in support of House Bill 1343, which would allow residents of health-care facilities the right to private communication via electronic devices. This bill is important to me because, as a Certified Nursing Assistant of nearly five years, I have worked in a variety of long-term and transitional healthcare settings, and I have seen the importance of electronic communication to my residents firsthand. I would like to shed a light today on some of the residents of healthcare facilities who I have worked with in the past, and how private electronic communication changed their experience of what is often a very difficult situation.

Last summer, I worked with a resident for several months who had suffered a terrible brain injury. At less than 30 years of age, she was very different from most of the residents I was used to caring for. This particular resident struggled to use her arms and hands and needed help with almost every activity of daily living. I often felt bad for her, because it seemed that she had no privacy and no way of communicating with the outside world other than by lifting her eyebrows and occasionally shaking her head. She could clearly understand what we were saying to her, but she did not have an efficient way to communicate back to her care staff or her family or friends. As I got to know this resident better, I learned that she was incredibly connected to the world around her, just not in the ways I expected.

Thanks to her adaptive technology and wheelchair, this resident was able to use special remote controls that were sensitive to her minimal hand movement to type on an iPad. She used

this iPad to send emails, FaceTime her family and friends (including her son), text, update social media, and even create care plans for herself that her nurses and caregivers could use. Both this resident's access to technology and her right to private communication via technology made her recovery much more bearable. Personal relationships help our residents maintain more normal lives even amid their recovery in a global pandemic, and personal relationships require privacy. This resident's caregivers and medical staff did not look at her messages or listen to her phone calls unless she specifically asked for help, and I saw her improved quality of life based on the independent, personal relationships she maintained through her electronic devices. She could have still spoken to friends and family without a right to privacy, but those conversations may not have been as genuine as they were, and she might not have felt safe expressing herself honestly with other eyes watching and ears listening.

With or without our assistance, many of our older residents also benefit from their personal technology and private communication. One resident with dementia asked us CNAs to FaceTime his son every day at work. His son was happy to do this, and often expressed to us how happy it made him to see his father every day. Eventually, we taught the resident to FaceTime his son on his own, and during COVID-19 he used this technology to maintain the relationship. He often Facetimed his son and simply watched him work while sitting in his armchair all day, and it was apparent to all of us that this communication was imperative to his emotional and social well-being.

Today, with the growth of adaptive technology and the user-friendly interfaces that many common electronic companies boast, residents in long-term or transitional care facilities will benefit, during a pandemic or not, from using this technology to promote independence and create social connections during times of recovery, or simply when they are at a time in life

where they need more assistance. The health-care team should always promote independence and enforcing private communication over electronic devices is a wonderful and necessary way to do this.

I thank you for your time this morning and urge a "do pass" recommendation on House Bill 1343.