



Office of  
Ombudsman for  
Long-Term Care



April 2, 2025

**To:** Chair Hoffman and Members of the Human Services Committee

**From:** Alzheimer's Association, MN/ND Chapter, AARP Minnesota, Mid-MN Legal Aid, Minnesota Elder Justice Center, Office of Ombudsman for Long-Term Care, Office of Ombudsman for Mental Health and Developmental Disabilities

**Re:** Support for SF 2443

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Chair Hoffman and Members of the Committee:

The undersigned organizations write in strong support of SF 2443, an omnibus policy bill that strengthens rights and protections for residents in long-term care settings. We appreciate the work of this committee to enhance these rights and protections and Chair Hoffman's leadership to further that goal.

Specifically, we support the following provisions of this bill:

- **Prohibiting a guardian or conservator as a condition of receiving or continuing services in 245D licensed settings, assisted living facilities, and nursing homes.** Article 1, section 2, article 2, sections 12, and 27 of the bill supports the rights of residents to be admitted to or continuing living in the home of their choice without a requirement that their rights are stripped away. While guardianship or conservatorship may be the right avenue for a small group of people, it should not be the first method of supported decision making utilized, nor should it be required for residents as a condition of being at their home. While we recognize the need for providers to be paid for the services they provide, this is too harsh a set of rights restrictions to adopt to ensure payment. Other forms of support decision making must be utilized and exhausted first.
- **Guiding language regarding the limited use of chemical, manual, and mechanical restraints in assisted living facilities.** Article 2, sections 7, 18, 19, 21, 31, and 36 provides guidance on the limitations and procedures in case of use of restraints. In 2019, as provider organizations, consumer advocate groups, DHS, and MDH worked together to establish mutually agreed upon language for a much needed assisted living license, statutory language regarding use of restraints in assisted living facilities was not achieved due to time constraints. This language recognizes a need to provide guidance to providers, MDH, and residents regarding the limitations of restraint usage, the difference between therapeutic use and restraining a resident for staff convenience, and procedures to be used in emergency situations that require the use of manual restraints to address an imminent risk to health and safety of residents and staff. We appreciate the inclusion of this language as it addresses a need to provide guidance to all stakeholders.
- **Impermissible grounds for termination and non-renewal.** Article 2, sections 29 and 30 solve a significant problem for residents and families in assisted living facilities. This language ensures that residents who move into an assisted living facility based on the understanding that a waiver, such as Elderly Waiver, will be available to them should they outlive their lifetime savings. Residents report selecting an assisted living facility specifically because they have been assured they can stay in their home if they outlive their savings. However, residents

report being told that there is no “EW bed” available to them once they have spent down their entire lifetime savings. Residents are forced to move to a new location, often with less choice and a further distance to friends and family. This is an unfair practice that is remedied by this bill.

- **Four comprehensive assessments per year completed by an RN for residents of assisted living facilities.** Article 2, section 32 defines the assessments required for residents in assisted living facilities. These assessments must be performed by an RN every 90 days and at change of condition, providing residents a routine global evaluation of their health and well-being. We are gratified these changes will clarify the requirements in place in 144G/

With the A5, SF 2443 is a strong policy bill that continues Minnesota’s legacy of supporting vulnerable adults receiving care from a variety of facilities. Again, we greatly appreciate the inclusion of the above sections and thank the committee for their on-going work to support vulnerable adults in Minnesota.

AARP Minnesota

Alzheimer’s Association, MN/ND Chapter

Mid-MN Legal Aid

Minnesota Elder Justice Center

Office of Ombudsman for Long-Term Care

Office of Ombudsman for Mental Health and Developmental Disabilities