

May 9, 2023

Greetings Senator Beebe-Center, Representative Salisbury and Honorable Members of the Criminal Justice and Public Safety Committee. My name is Holly Reid. I live in Bath Maine. This is a letter to testify in favor of :

LD 1863 An Act to Facilitate the Provision of Medically Appropriate Levels of Care for Clients of Correctional Facilities

My background is that I have been a registered nurse for 35 years. I am currently employed as a home health nurse. One of the things I do in this job is to care for people who are in Assisted Living Facilities. I am also an ordained minister in the United Church of Christ and am employed as a part time pastor in Bath Maine. I go into the Maine State Prison weekly as a volunteer chaplain to support a hospice program which occurs within the prison.

From a nursing point of view, it is important that people who require an assisted living level of care live in a facility that is licensed as an assistive living. Along with the licensing comes regulations and standards of care. As a nurse employed in a home health setting, I appreciate the challenges of government regulation. Home Health is heavily regulated by Medicare standards. All of the regulations can make you crazy. But each regulation serves a purpose to ensure that patients receive quality safe care.

If the department of corrections has incarcerated people who need assisted living level of care, then it important that these individuals reside in a licensed facility to ensure they receive safe quality care. I believe that a person who is incarcerated is entitled to the same quality health care as any other Mainer who requires assisted living services. This is not a right you lose because of incarceration.

If the Department of Corrections is not able to provide this level of licensed care, then I believe that the next just, humane and essential step would be to find a community solution for those who need an assisted living level of care.

A community solution is especially important for those who require assistive living services and hospice care at the end of life. Death with dignity is an essential component of end-of-life care when on hospice. I want to be clear that I am not criticizing the Department of Corrections nor I am saying that they are not providing all the dignity possible. When I have visited the infirmary at the Maine State Prison, I have seen amazing care from the hospice volunteers, the nurses, the CNAs and the correctional officers. They are all to be commended.

My point is that it is the very nature of being incarcerated that does not allow full dignity to occur. For example, in the infirmary I have observed that often the correctional officers are called upon to assist with the hospice care. I suspect that the routine training a correctional officer receives is not about how to provide hospice care. I observe that correctional officers are trained to be vigilant and to watch every movement with a wary eye. They are trained to

make sure everyone follows the rules. They are trained to think security first. It is not reasonable to expect a correctional officer simultaneously be in a hospice frame of mind and in the role of correctional officer. This way of practicing hospice care provides a lack of dignity to the dying person and to the correctional officer.

In the infirmary at the MSP I have observed that nurses and aides provide wonderful care. But as a nurse you do not receive any significant hospice training as part of your routine education to become a nurse. I can tell you that just because you are trained as an RN doesn't mean that you are comfortable caring for a person who actively dying.

Hospice is a specialty and to work as a hospice nurse or aide you need additional training. I don't know if the medical staff at the MSP have received this education or are required to obtain this training. Not making sure that everyone has the training they need to provide hospice care is unfair to the medical staff and to the person who is dying. This is why it is so important to be proactive about moving people who need assistive living level of care, who are near the end of life, into the community.

I will close with this. I understand that it is the mission of the Department of Corrections to provide services so that people will not go back into the community and reoffend. A person who is terminally ill can no longer participate in these rehabilitative services and a person who is at the end of life can no longer offend, so there is really no reason to keep them incarcerated.

I hope you will vote in favor of LD1863.
Thank you for reading my testimony.

Respectfully submitted,
Holly Reid RN, MDiv, MSN