

Testimony Senate Public Health
March 13, 2012

Our names are George and Louise O'Brien and we'd like to thank you for letting us talk with you this afternoon.

We are here because we all want enough nursing care for our loved ones and for ourselves when we need it. We hope you'll help make this right.

My mother (George's) left Lawrence Memorial Hospital to go to a nursing home. The doctor told us that she needed a place to rehab and that she'd then be able to return home. That was on Thursday. My wife Louise and I were at the nursing home in the daytime and my sister Clara was there in the evening.

The first day, my mom was up and eating in the dining room. My wife and I were there with her. She was a slow eater, she sometimes took one - two hours to finish a meal. Mom had diabetes, so getting to eat the right things at the right time was important.

The second day the nurse came in and moved mom's roommate out and told us she had to be quarantined, but didn't tell us why. Mom was distressed about this. We continued to stay with her in the daytime. From this time forward the nurse would often come to the door and ask us, "Is everything ok?" but rarely did the nurse come in to the room, talk to mom, or check mom's physical condition. At some point we were told that mom had a contagious infection.

At meal time, the Certified Nurse Aide would bring a tray. More than once they took the tray before mom was finished eating. We reminded the nursing staff that mom was a slow eater, and at the next meal a CNA fed mom, to speed the time up. Mom was able to and wanted to feed herself, so we told the nurse she wanted to feed herself. The problems with leaving her tray long enough for her to finish her food continued and mom began to have problems with her blood sugar levels.

To treat her diabetes, Mom got insulin before a meal, then she would eat. But at the nursing home the CNAs removed her food tray before she was finished eating. So she would get the insulin but not enough food and her blood sugar levels started getting very unstable. When her blood sugars got dangerously low, she should have been given Glucagon immediately to restore her blood glucose to a safe level. This should have been treated with Glucagon, which is used to stabilize blood sugar levels.

The nursing home did not have Glucagon on site although they were supposed to have. The nurse called the local pharmacy which did not have it. They called the local ambulance which didn't have any on board, but the ambulance drivers (volunteers) offered to drive to Lawrence Memorial Hospital to get it. The nurse said no. We were told by staff that "They weren't going to get in the car and drive to Lawrence Memorial Hospital to get it (the Glucagon)." The nurse called the doctor who told them only to rub sweet icing on mom's tongue.

These conditions went on until Tuesday. When we arrived the ambulance was there, the ambulance driver told us not to go into mom's room. Mom was being taken to the hospital. The driver told us not to go into the room because he wouldn't want to see his mother in the condition my mother was in. She had been left lying in feces and vomit.

My mother went to the hospital and died there, six days after entering the nursing home.

We realize that my mother was a new patient at this nursing home. The nursing home accepted mom as a patient. After accepting her, the facility did not provide adequate, qualified nursing staff to care for her, or medications required to treat her diabetes. The nurse was not on top of the care mom needed and actually avoided contact with her. The nurse aides did not get direction from the RN to make sure mom got the food she needed or the time she needed to eat it. The nurse did not accept offers from the ambulance to get the needed medication. The nurse delayed getting the medication mom needed and delayed in sending mom back to the hospital until what was supposed to be a stay for rehabilitation, turned into something that ended her life.