Dear Assembly Health Committee:

I am writing to strongly oppose SB 503, an ill-advised legislative maneuver to single out nursing home residents for invasive, dangerous, and deadly treatment decisions without their consent. The bill is a misguided attempt to evade a recent court ruling upholding resident rights to avoid noxious treatment against their will or end-of-life decisions they have not approved.

SB 503 would amend Health and Safety Code Section 1418.8, a statute permitting nursing homes to make non-intrusive and routine treatment decisions on behalf of “unrepresented” residents who allegedly lack capacity to provide informed consent. Notably and regrettably, SB 503 would expand Section 1418.8 and allow nursing homes to make extremely intrusive and even fatal treatment decisions by sanctioning the involuntary administration of powerful antipsychotic drugs and the termination of a resident’s life-sustaining treatment.

Last year, Section 1418.8 was found unconstitutional by the Alameda Superior Court as it pertains to non-intrusive and routine treatment decisions. Expanding the statute into far more worrisome chemical restraint and end-of-life decisions in light of this ruling is extremely inappropriate.

Among its most egregious provisions, SB 503:

- Does not account for residents’ express refusal of proposed treatment. Therefore, SB 503 may permit nursing home residents to be held down or otherwise restrained and forced to receive antipsychotics that double their risk of death and are not FDA-approved for the purpose for which they’re being given;
- Conditions the administration of antipsychotic drugs to unrepresented residents on a review by an “independent” physician – who is hired and paid for by the nursing home;
- Provides residents with an “advocate” as part of the antipsychotic drug review – who is hired and paid for by the nursing home; in other cases, including cases to decide end-of-life decisions, no advocate is required;
- Puts the burden on frail and disabled nursing home residents. SB 503 stands due process and resident rights on their heads by requiring residents to file lawsuits to stop involuntary treatment rather than requiring those who would deny individual rights to seek legal authorization;
- Ignores the trial court judgment in CANHR v. Chapman, which held that antipsychotics could not be administered to an unrepresented resident without court adjudication of the resident’s mental capacity;
- Fails to comply with Rains v. Belshe, which held that a resident advocate must be part of the 1418.8 decision-making team and that non-routine, intrusive treatments could not be made using an inter-disciplinary team approach.

SB 503 is unconstitutional, expensive, and most importantly, ineffective for balancing the treatment needs and personal autonomy of nursing home residents. The bill creates a complicated morass of procedures that would invite litigation and harm the most vulnerable nursing home residents. Please vote no on SB 503.

Sincerely,