

time so that this area could be worked out. The bill was then introduced as LB 287 this year, and is offered as an amendment to LB 703. LB...The issue first came to the forefront, or first came to my attention anyway, dealt out of a problem occurring at Martin Luther Home in Mitchell, Nebraska. I was contacted by the Association for Retarded Citizens, which served as the...who did serve as the advocacy group, through the 407 process, on LB 688, to go through this. Basically, the problem that's trying to be corrected is that there are some individuals who are developmentally disabled who have some minor medical needs that have to be taken care of that if not for the developmental disability they could take care of that need themselves, but because of the disability they are not able to do that. The type of procedures we're talking about, for example, would be routine colostomy, ileostomy care, continuous oxygen administration, excluding the discretionary administration, some urinary, blood glucose testing, and those types of minor medical activities. If it were one of us here that had the same type of medical need, we would do it on a self-administered basis. But the question...the problem you run into is when you get into a third party administering that, and the question whether it has to be done by a nurse. In the past the department has ruled that it must be accomplished by a nurse. What this amendment, which has been agreed to by all the parties involved over the past year, year and a half, would allow some special care providers, people at the group homes to perform these tasks under the supervision of a nurse. It would provide for training of these special care provider under rules promulgated jointly by the Department of Public Institutions, Office of Mental Retardation, and the Board of Nursing with the intent being that the training standards that have been in use by the Department of Public Institutions would be continued. In a nutshell, the intent of this is to allow some of these...some of the people who have the developmental disabilities, but also have a medical need to continue in a community based setting, as opposed to being institutionalized. It's hopefully the goal to allow some of the people to remain in the least restrictive alternative. First of all, because it's more beneficial to the individual; second, because it's less expensive to the state. As I mentioned, the alternative, if it's required that nurses be required to perform these tasks, a good portion of these people will be required to be institutionalized, when it's simply unnecessary. With that, I would be happy to answer any questions, and I would urge the adoption of the amendment to LB 703.