

appreciated the fact that he was close by, they could see him often. It was easier to travel to Mitchell than it would be to travel to Beatrice. The child's physician had trained the staff at the home to administer the tube feedings, and the physician submitted a letter to that effect to evidence his confidence in the staff, as he had trained them. The registered nurse, who had also provided training and follow-up to the staff persons at the home, was also comfortable with the situation. I guess the bottom line was that this child had fewer illnesses, this child was closer to his family, and the family was closer to him and was able to visit him more often. The medical staff support, the actual medical personnel, were close by, were providing follow-up care, and the child was in a home-like environment. Now the department has said it's illegal to do this, this invades the nursing scope of practice, even though it has been done in the community for 10 to 20 years. The people who are affected by this are those individuals with developmental disabilities, those persons who have been moved into home based or home-like base settings, community based settings. And the alternative to providing this type of care is reinstitutionalization of these primarily children to such places as Beatrice. The question was we started looking for a solution. The solution that we came up with was in the form of LB 688, to allow those people to provide some of these types of care. We're not talking about neurosurgery, we're not talking about open heart surgery, we're not talking about anything that would need a certificate of need. We're not talking about anything complex. In short we're talking about some procedures that I think Senator Wesely accurately portrayed, types of procedures that, if it was in the case of parent and child, the parent would be trained to do these. But, because of the on-going care required for developmentally disabled, they generally would be placed in a group home. And because of the fact that they're not at home, they're in a group home instead, they're not allowed to do these types of procedures. Last year the bill was referred to the 407 process. I think as Senator Byars mentioned, the applicant was the Association for Retarded Citizens that submitted the application to the 407 process. The 407 Review Committee recommended base line training. They recommended specifically the use of the home health aide process. The problem we run into is looking for a permanent solution, a permanent...

SPEAKER BARRETT: One minute.