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Majority Caucus Administrator



Senate of Pennsylvania

November 25, 2002

The Honorable Feather O. Houstoun
Secretary
PA Department of Public Welfare
333 Health and Welfare Building
Harrisburg, Pennsylvania 17120

Re: Department of Public Welfare
Proposed Regulation #14-475-Personal Care Home

Dear Secretary Houstoun:

I am writing to offer comments on the Pennsylvania Department of Public Welfare's proposed regulations concerning Personal Care Homes.

At the outset I should point out that personal care homes are very widely used in my rural district and provide a real choice for persons who need some assistance with the day-to-day functions of daily living. In general, I fear that the level of regulation proposed in these regulations will have a negative impact on the availability of this option. This is not nursing home care. The residents regard these residences as their home. With each of the proposals we should ask ourselves whether we believe this would be necessary for the protection of an elderly or infirm person living in our own home.

A majority of homes in the Commonwealth meet or exceed many of the regulations that are proposed. Excessive paperwork called for in these regulations diminishes the time available for the primary task of the caregiver such as bathing and cooking. These proposed regulations are similar to those used in nursing homes where residents need medical attention. I have heard from several personal care homes within my legislative district regarding their concerns. I share these concerns and I offer the following comments:

Section 2600.11 Procedural requirements for licensure... (b) Personal Care Homes (PCH) shall be inspected as often as required and more often if necessary. After inspection... need not be visited or inspected annually ...but 75% of all PCH's shall be inspected every two years and all homes every three years. On one hand the department is putting severe undue hardship on all homes with over regulation, by inspecting every two-three years. This over-regulation with less-inspection will NOT improve resident care. The annual or at least semi-annual inspections should still be done. We do not need more regulations; we do need more good, adequately trained inspectors.

Section 2600.14 Fire safety approval. (a) PCH's would now be required to have Labor & Industry give each home a written fire safety approval. Assuming L & I is not currently overstaffed, additional tax dollars will be required to fund this requirement. Local fire authorities cover most homes; it should remain this way.

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Section 2600.19 Waivers. (g) Structural waiver will not be granted to a new facility...or renovations after the effective date of this chapter. Nowhere does it say that existing facilities will be grand fathered; this is imperative. The cost to change or renovate to meet this regulation will be too costly for homes to stay in business. It is devastating for an elderly person to lose their home, but that would be the end result.

Section 2600.20 Residents funds. (12) Upon discharge or transfer...shall immediately return the funds...This is not always possible, transfers and discharges occur at all hours of the day. Within 7 days shall be much more reasonable.

Section 2600.26 Resident-home contracts. (11) List of all personal care services and their costs based on the resident's support plan... This is another accounting nightmare. Each time a resident's needs change, that would necessitate an addendum to the agreement with additional costs to the resident.

For example, if a resident who is completely self care now requires assistance with bathing, the additional cost would be assessed to the resident to provide that service. Where will lower income residents obtain this money?

Section 2600.27 Quality management. Homes shall establish quality assessment and management plans... This is a medical model. Hospitals and nursing homes hire personnel to do this job. This is a waste of time for small homes that may have family members working. We are here to provide a needed service to our residents but developing and continuing to assess these plans will take time away from residents and/or result in additional unnecessary costs to the residents.

2600.53 Staff titles and qualifications for administrator. (a) The administrator shall have one of the following qualifications: Registered Nurse, LPN, 60 credits, licensed as Nursing Home Administration (NHA)...The requirements to become a personal care home administrator are excessive. Most homes will find it impossible to hire an RN, or LPN especially homes with SSI residents. An RN's starting salary in hospitals is \$50,000 and LPN's start at \$32,000. With the nursing shortage in hospitals and nursing homes there is little chance of hiring this type of staff, particularly in rural areas. This skill level is unnecessary and only adds additional costs to residents. New administrators should be able to take a course provided by the state and test out to ensure they meet all the qualifications that the state requires without added formal education. A nursing home in my district had a meeting with a DPW Director and received a verbal agreement that the education requirements would be 60 hours of class given by DPW and 80 hours of on the job training at an approved home. A small or moderate size home with ambulatory, independent or semi-independent residents does not need this type of administrator.

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2600.57 Administrative training and orientation. (11)(f) An administrator...shall provide written verification of successful completion to the appropriate PCH office...More paper work! T
Under current practice they were able to keep records in the homes and the inspectors reviewed them. There will be an increase in DPW's budget to hire a person who will file the mountain of paperwork that will be sent to DPW.

2600.58 Direct care staff must have at least 24 hours of annual training... (e) Twenty-four hours of staff training each year is too high. The administrator and not the staff perform some of the training items such as pre-admission screening and annual assessments that are mentioned in the draft. The staff needs to be trained annually on the following items: first aid, CPR, fire and safety, activities of daily living and transfer techniques. This can easily be done in 8 hours on an annual basis (first aid only needs to be done every 3 years.) Other training may be appropriate depending on the type of residents in the home. Training is an ongoing thing with each resident. It is not always formal, but is in fact educational. Even in hospitals the aids are only trained 8 hours per year and in nursing homes the training is 10 hours. Why then are those who care for more mobile and self reliant residents required to take 2.4 times as much training as a nursing home?

Thank you for the opportunity to review and comment on the Department of Welfare's proposed regulations on Personal Care Homes. Primarily, I object to the regulations that require nurses and LPNs to be on duty. These residents are not sick but do need assistance with some of the activities of everyday living. I am hopeful that these recommendations will assist the Public Welfare Department to implement regulations that will not result in increased costs to the homes because they are unable to pass on additional costs to their residents.

Sincerely,



Mary Jo White
SENATOR 21ST DISTRICT

MJW/pac

cc: John R. McGinley, Jr., Esq., Chairman
Independent Regulatory Review Commission

The Honorable Harold F. Mowery, Jr., Chairman
Senate Public Health & Welfare Committee

Linda Mueller, Owner/Administrator
Colonial Gardens Guest Home of Butler