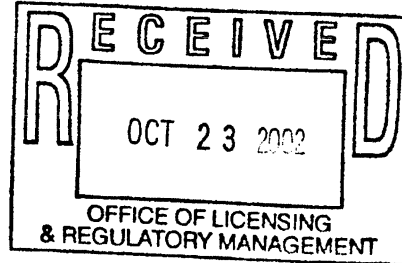


Original: 2294




October 21, 2002

Department of Public Welfare
Teleta Nevius, Director
Office of Licensing and Regulatory Management
Room 316 Health/welfare Building
P.O. Box 2675
Harrisburg, PA 17120

Dear Ms. Nevius:

I have enclosed my comments after reading the new proposed regulations #2600 for Personal Care Homes.

Sincerely,


Beverly Snyder
Administrator

BS/
Enclosure

RECEIVED
OCT 23 2002
OFFICE OF LICENSING
& REGULATORY MANAGEMENT

**PROPOSED PCH REGULATIONS
WRITTEN COMMENT FROM Bellmeade Manor
1929. Pleasant Valley Blvd Altoona, PA 16602**

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
	General Overall Comments	These new regulations eliminate home and community based services. We are institutionalizing personal care. The intervention and responsibility of family, guardian, and POA is removed. All responsibility is on the provider.
Subchapter A	General	
2600.1	Purpose	
2600.2	Scope	
2600.3	Inspections and licenses or certificates of compliance	
2600.4	Definitions	
2600.5	Access requirements	
General Comments	General Requirements	
2600.11	Procedural requirements for licensure or approval of homes	
2600.12	Appeals	
2600.13	Maximum Capacity	
2600.14	Fire Safety Approval	
2600.15	Abuse Reporting Covered by statute	
2600.16	Reportable Incidents	

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
2600.17	Confidentiality of Records	
2600.18	Applicable Health & Safety Laws	
2600.19	Waivers	
2600.20	Resident refunds	
2600.21	Off-Site Services	
2600.22	Legal Entity	
2600.23	Personnel Management	
2600.24	Tasks of daily living	
2600.25	Personal hygiene	
2600.26	Resident-home contract: information on resident rights	
2600.27	Quality Management	
2600.28	SSI Recipients	
2600.29	Refunds	
2600.30	Fees	
2600.31	Notification of rights and complaint procedures	
2600.32	Specific Rights	(e) Private access to phone & free local – Recommend remove. (j) Assist in clean seasonal age & gender appropriate clothing – Recommend remove. (k) Res right to access review & request modification to resident record –

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
2600.33	Prohibition against deprivation of rights	Recommend strike "request modification to the resident records".
Subchapter B	Staffing	
2600.51	Resident Abuse and Criminal History Checks	
2600.52	Staff Hiring, Retention, and Utilization	
2600.53	Staff titles and qualifications for administrators	
2600.54	Staff titles and qualifications for direct care staff	(2) direct care staff high school diploma or GED – Recommend delete or change wording to preferred. (4) Would this require medical physical and drug and alcohol testing on hire? – imposes cost, especially in such a high turnover industry. Recruitment and retention would be difficult.
2600.55	Exceptions for staff qualifications	
2600.56	Staffing	(c) 24 hours requirement: 2600.54 specifies 18 years old not 24 years old. Also concerned with the 20 hours per week requirement for a certified administrator. Cost to licensing multiple administrators (i.e. if administrator is ill or on vacation). (l) Delete "including substitute personnel" – adds nothing.
2600.57	Administrator training and orientation	(b) 60 hour training + 80 hour internship – costly. Recommend delete 80 hour internship requirement. (e) shall include but not limited to sounds mandatory - should be worded as recommended topics. 24 hour training requirement – Recommend current 6 hour requirement. Cost of wages, program, and replacement administrator is extensive.

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
		<p>(e.9.iv) E and G need definition (e.11.i) i does not relate to staff supervision budgeting or financial record keeping (f) Does this mean the same set-up as an NHA license, licensed under Bureau of Occupational and Professional Affairs? Does this refer to initial and/or annual training? What does "shall provide" mean? (g) Absolutely appalled at the requirement to take the PCH admin test for licensed NHA's every time they move to PCH admin. Also 40 hours appears to be in conflict with b above. (e) Direct care home staff 24 hours annual: CNA's in skilled nursing facilities are only required 12 hours of annual training. Why is more required in personal care when the acuity of the residents should be much less? (f) shall include but not limited to sounds mandatory - should be worded as recommended topics</p>
2600.58	Staff training and orientation	
2600.59	Staff Training Plan	A comprehensive staff training plan as shown here will require each facility to have a designated staff development person, which would incur cost of \$45,000 annual.
2600.60	Individual Staff Training Plan	Recommend strike entire section. Much too comprehensive for assisted living.
2600.81	Physical Accommodations and equipment	Add "for new construction or renovations only".
2600.82	Poisons	
2600.83	Temperature	
2600.84	Heat sources	

(b) Does this preclude resident pets?
 (d) covered trash cans will incur a huge cost to the industry and in areas where there is a county health department, why should we exceed code? Also resident ease of use with a covered trash

2600.85 Sanitation

2600.86 Ventilation

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
2600.87	Lighting	
2600.88	Surfaces	
2600.89	Water	
2600.90	Communication System	(b) Recommend delete
2600.91	Emergency Telephone numbers	Delete nearest hospital and delete personal care home hotline number. Residents do not need to contact hospital directly.
2600.92	Screens	
2600.93	Handrails and Railings	
2600.94	Landings & Stairs	(a) Should be for renovation and new construction only.
2600.95	Furniture and Equipment	
2600.96	First Aid Supplies	(a) Delete: syrup of ipecac. Why are manual, thermometer and breathing shield required <u>in</u> the first aid kit?
2600.97	Elevators and Stair Glides	
2600.98	Indoor Activity Space	(b) Is this intended to mean the same as current reg 2620.52 q? Some facilities use recreation or dining rooms to fill this requirement (not just living room). Also the word "or" is confusing used with the word "combined". (c) Remove words like ensure and implemented. Residents have freedom of choice.
2600.99	Recreation Space	
2600.100	Exterior Conditions	(i) Is this the same interpretation as the old regulations or do we need dividers between beds in shared bedrooms?
2600.101	Resident bedrooms	(r) Delete "The resident shall determine what type of chair is comfortable."
2600.102	Bathrooms	(a) Delete family and personnel. How can we evaluate how many family and personnel will be in the facility? (g) A small facility not necessarily able to provide free or to staff a store. Also what if one resident uses one type of deodorant and another resident uses

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
		<p>what if one resident uses one type of deodorant and another resident uses another?</p> <p>f, g, i and j Why do they pertain to bathrooms? Do these items need to be in the bathroom? Can we charge for these items? There's a cost for providing a dispenser with soap in all bathrooms.</p> <p>j This wording is too broad. The term linens: does it pertain to bed linens or towel and washcloth? If it pertains to bed linens, it's not appropriate to store bed linens in a resident room.</p>
2600.103	Kitchen Areas	<p>(a) replace "cabinets for storage" with "appropriate storage areas".</p> <p>(e) Delete "inventoried weekly".</p> <p>(l) Service animals must be allowed as per Americans with Disabilities Act.</p>
2600.104	Dining room	(c) Recommend delete. Could be dangerous to residents with certain health conditions. Condiments is too broad a term. Recommend: modify to available, without the "at the table".
2600.105	Laundry	(a) Remove "This service shall also be made available to all residents that are unable to perform these tasks independently." Addressed in b,c,d & e
2600.106	Swimming Areas	(5) Delete. Should be available through the pharmacy provider.
2600.107	Internal and External Disasters	
2600.108	General Health and Safety	
2600.109	Firearms and weapons	
	FIRE SAFETY	
2600.121	Unobstructed Egress	
2600.122	Exits	Add "for renovations and new constructions".
2600.123	Emergency Evacuation	
2600.124	Notification of	

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
	Local fire officials	
2600.125	Flammable & Combustible materials	
2600.126	Furnaces	
2600.127	Space Heaters	
2600.128	Supplemental Heating Sources	
2600.129	Fireplaces	
2600.130	Smoke Detectors and Fire Alarms	
2600.131	Fire Extinguishers	
2600.132	Fire Drills	(d) 2.5 minutes is not sufficient. Old regulations state 5 minutes.
2600.133	Exit Signs	
	RESIDENT HEALTH	
2600.141	Resident health exam and medical care	
2600.142	Physical and behavioral health	This entire section does not allow for resident choice. (a) What is a resident support plan?
2600.143	Emergency medical plan	Don't know where to begin . . . too absurd to comment.
2600.144	Use of Tobacco & tobacco related products	
2600.145	Supervised care	Modify from: shall be referred to the appropriate assessment agency, to: shall be referred appropriately by the facility".
	NUTRITION	
2600.161	Nutritional	(f) Modify final statement to Documentation of the Therapeutic diet ordered shall be retained in the resident's record.

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
	Adequacy	be retained in the resident's record. (g) Modify to: Other beverages shall be available at the request of the resident. Offering other beverages every two hours will incur the cost of a hydration aid. Also are we offering every two hours throughout the night?
2600.162	Meal Preparation	
2600.163	Personal Hygiene for Food Service Workers	
2600.164	Withholding or forcing of food prohibited	
	TRANSPORTATION	
2600.171	Transportation	If you live at home, the pharmacy has responsibility for advising any side-effects or contra-indications. This should apply in personal care homes as well.
	MEDICATIONS	
2600.181	Self-Administration	(c) What is a resident support plan? (e) Delete section e.
2600.182	Storage and disposal of medications and medical supplies	
2600.183	Labeling of medications	
2600.184	Accountability of medication and controlled substances	
2600.185	Use of medications	
2600.186	Medication Records	(b. 2 and 3) Listing all side effects possible and contra-indicated medications would increase the costs associated with providing assistance with the medication. Who absorbs this cost since pharmacies will not provide this service

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
		<p>medication. Who absorbs this cost since pharmacies will not provide this service free of charge?</p> <p>(b.7) Dosage date, time, and the name of the person is not done in a private home setting—this is an institutional concept.</p> <p>(c) Dosage date, time, and the name of the person is not done in a private home setting—this is an institutional concept.</p> <p>(d) Delete this section. Even in nursing homes, you don't have to call a physician the first time a resident refuses a medication, and by shift's end. Nursing home is three times.</p>
2600.187	Medication Errors	<p>(a) Legal liability and confidentiality issue: Documentation of medication errors shall be kept in a place designated by the administrator, apart from the medication record.</p> <p>(b) This entire section, 1 and 2, should be deleted. This is nursing home.</p>
2600.188	Adverse reaction	Delete because this is a physician's responsibility and accountability. Any change to a resident's condition is reported to the physician.
	SAFE MANAGEMENT TECHNIQUES	
2600.201	Safe management techniques	Delete this entire section. A quality improvement program is a nursing home technique and will add significant cost to design and implement.
2600.202	Prohibition on the use of seclusion and restraints	(4) Delete all except last sentence. A psychotropic drug ordered by a resident's physician is the physician's responsibility.
	SERVICES	
2600.221	Activities program	This is a repeat of 2600.98. Refer to comments there.
2600.222	Community social services	Remove "and assist" residents to use social services in the community.
2600.223	Description of services	Delete this section. Development of a description of services, i.e. a brochure, can be very costly. Development of written procedures will also be very costly.
2600.224	Pre-admission screening tool	

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
2600.225	Initial assessment and the annual assessment	Is this still the MA51? (b. 3, 6 and 8) What is it and who will do it? (d.2) Change wording from materially to significantly (d.4) Delete. Or add comment "if there is a significant change".
2600.226	Development of the support plan	This will require significant costs to the PCH industry, requiring case managers. This is the exact same thing as a care plan in a nursing home and is not necessary. There is not a care plan out there that has done a good job of taking care of a resident. Delete it.
2600.227	Copies of the support plan	Delete
2600.228	Notification of termination	
2600.229	Secured unit requirements	(a.1.i.) for new construction and renovation only (c.2) What is a geriatric assessment team? (e) Replace 60-day written discharge notice to 30 day notice (conflicts with earlier section & is not consistent with current regulations) (f.2) Why is competency testing required? These requirements are stricter than what is required of a physician.
2600.230	Mobility standards RESIDENT RECORDS	
2600.241	Resident records	
2600.242	Content of Records	(b.6) Incident reports should be available on-site but not required on the resident's record. (c) Emergency medical plan should be eliminated. (d.2) Support plan delete (see section 226) (d.5) Delete. Obtaining some of this information may be difficult or impossible. Delete items 2 and 3
2600.243	Record Retention and disposal	
2600.244	Record Access and Security	(b) Delete this policy and procedure requirement. (c) much too specific

REGULATION NUMBER	SECTION TITLE	COMMENT/SUGGESTION
2600.251	ENFORCEMENT Classification of violations	<p>Something with the potential for such a significant impact to the industry needs to be further evaluated and implemented on a staging process.</p> <p>(b) If they are going to assess class violations and monetary penalties associated with that, the guidelines must be objective and not subjective/open for interpretation.</p> <p>Extremely cost-prohibitive to the industry.</p>
2600.252	Penalties	<p>Something with the potential for such a significant impact to the industry needs to be further evaluated and implemented on a staging process.</p> <p>We are moving from no monetary penalties to substantial penalties without clear and objective indications of what will be penalized. This section needs further review and consideration/development before rushing it through.</p> <p>If they are going to assess class violations and monetary penalties associated with them, the guidelines must be objective and not subjective/open for interpretation.</p> <p>(g) This statement is very subjective. Depending the problem, it may take longer than 15 days to correct.</p>
2600.253	Revocation or non-renewal of licenses	<p>Something with the potential for such a significant impact to the industry, needs to be further evaluated and implemented on a staging process.</p>
2600.254	Policies, plans, and procedures of the home	<p>Policies, plans and procedures will be costly to the industry to develop. There is no time-frame for the development of these plans, no training schedule for the staff, just a broad-based statement that they will be implemented.</p>

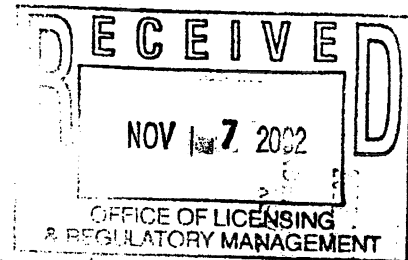
Original: 2294

14-475 (L38)

Deborah Stevens, Administrator and Owner
Evergreen Assisted Living, INC.
141 Evergreen Avenue, Pittsburgh PA 15209

October 20, 2002

Teleta Nevius, Director Office License and Regulatory Management
Pennsylvania Department of Public Welfare
Room 316 Health and Welfare Building P.O. Box 2675
Harrisburg, PA 17120



Dear Ms. Nevius:

I am writing again to express my dismay about the proposed personal care home regulations printed in the Pennsylvania Bulletin on October 5, 2002. My 30 residents are **SSI recipients and they cannot afford all the increases in cost caused by the new regulations.** Because the increased costs cannot be passed onto them, my small business will be forced to absorb this heavy burden without one cent from the Commonwealth to help. Serving low income residents results in a very low, if any, profit margin. The increased cost due to **unfair and unnecessary** regulations by the Welfare Department may cause the closure of my home and the displacement of 30 low income residents. Where will they go? Will they be **warehoused in an institution** somewhere? This is a crucial question because these regulations will most likely result in the closure of all homes across Pennsylvania dedicated to serving the low income/SSI recipient. This amounts to approximately **20,000 homeless SSI recipients who used to have a nice, safe place to live until the Department of Welfare decided to punish the entire personal care home industry for its own failure to enforce current regulations against the small number of homes that need to be shut down.** I believe that Secretary Houston has misled others in implying that there is no or minimal cost ("only a \$680.00 one time cost per resident"). This is simply not true. I would also like to point out that at several meetings held across Western Pennsylvania, you and your staff assured us that it is not the Welfare Department's intention to cause the shut down small businesses in Pennsylvania. You acknowledged the need for medication aide training, not RN's, in personal care homes. You acknowledged the overkill in the requirements for administrators and in the number of hours of annual training for direct care staff. You agreed on 12 annual hours. None the less, when the regs were published, it was apparent you did not follow through on your commitments to my residents and their families. There are even many disturbing and new items! I have been operating my home for eight years. I have never had a citation that involved the health or safety of my residents **The proposed 2600 Personal Care Home regulations need to be stopped now.** The current regulations are sufficient, **if enforced,** until which time reasonable revisions can be made by a team of **knowledgeable, experienced** people. The following are areas of particular concern:

Qualifications for Administrators. 2600.53 (1),(2),(3),(4). Proposed regs require an administrator to be a nurse or a nursing home administrator. DPW dictates very strict standards regarding the level of care a personal care home can provide. Residents who exceed these standards must be placed in a higher level of care, i.e. a nursing home. Therefore, it is clear that the needs of a personal care home resident are much less than in a nursing home. Why is such a medical background necessary? Or why would a nursing home administrator run a personal care home? They are not the same thing. A personal care home is not a nursing home nor a hospital. The proposed regs also require an administrator to have a college degree. **The proposed increase in administrator training and orientation is an improvement over current requirements and will improve the health, safety and welfare of the residents** and thus will negate the proposed requirements. My home is a small, family owned business and I would not be able to pass it on to my sons, who live daily with the experience of running a personal care home. Proposed regulations discriminate against family businesses and small businesses. Again, proposed improvements in training and internships for administrators is sufficient. (I happen to have a master degree in clinical psychology and it didn't help me very much in learning how to operate a personal care home and it doesn't have much to do with my values about how to treat other people).

Medication Administration. 2600.181 (b) (c) (d) (e); 2600.182 (d); 2600.186 (b) (2,3,6,) (d) Currently, personal care home staff can assist residents with their medications. The proposed regulations state that unless the resident knows and understands everything about his or her medications (including side effects, contra indications, drug interactions), they no longer qualify for assistance, but need **administration** of medication by a licensed nurse. This is ridiculous – expecting a personal care home resident to be as knowledgeable about medication as a pharmacist! I personally take 2 prescribed medications. I probably don't know as much about my medications as I could, however, I trust my physician and my pharmacist. Personal care home residents have physicians and pharmacists too! The need for a nurse indicates that personal care is an inadequate level of care. You just try to get someone optioned into a nursing home just because they don't understand something about one of their medications! They would not be eligible for nursing care under the DPW and Department of Aging criteria. The personal care home industry as a whole is very adamant about the need for a **medication aide bill** which would allow certain trained personal care home staff to assist personal care home residents with their medication. State sponsored medication training programs are utilized in other group home settings (i.e. mental retardation homes with residents who I am sure do not know as much about their medication as what DPW expects personal care home residents to know). This would be appropriate and adequate for personal care home staff. People being care for in their own home have their medication monitored by social service and private home health agency staff who are not nurses.

Direct Care Staff Training. 2600.58 (c) (e); 24 hours per year of training is proposed and new staff may not interact with residents until they have had their first 24 hours of training (all at once!) The annual training requirement for nursing home aides is 10 hours and for hospital aides only 8.

Again, the proposed regs for personal care homes **exceed** standards for other healthcare industries. On the job training is not given any credence even though it is an integral part of staff training and orientation in hospitals and nursing homes! How are new staff to learn their job without any interaction with the residents? What about new staff with years of experience? At the meetings between providers and DPW staff, 12 hours was agreed to. At least, that is what we were assured by your office. Most homes, in addition to the current required training, require approximately 40 hours per week on the job training before a staff person would ever work **independently** with a resident. By the way, a nursing home administrator is required to obtain 48 hours training (equal to a personal care home aide!) only the nursing home administrator has 2 years to obtain the hours.

New paperwork. 2600.27(a) (b) (c); 2600.59; 2600.60; 2600.16 (b); 2600.26 (iii) (ii) 2600.201 (b); 2600.223 (a) (b). I would like to know why the current screening instrument is not sufficient. DPW is proposing yet a second and third screening instrument on each resident. Why? It is redundant. The same applies to the "Care Plan". DPW is again attempting to turn personal care into mini nursing homes. What if the resident doesn't want the items addressed in the state-dictated care plan? Who is going to pay for the services required in the Care Plan? The demands of these new requirements are excessive and inappropriate to the small personal care home.

Safe Management Techniques. 2600.201(b) I would like to know if this means that I have to keep a resident in my home that creates chaos and makes the other residents uncomfortable or frightened? A personal care home is a **home**, not an institution. These regulations are not necessary and are inappropriate in a personal care home setting.

DPW and the Office of Licensing and Regulatory Management has ignored the knowledge and experience of hundreds of personal care home owners and administrators, including myself. Department staff has been deceptive in allowing me to believe that I had some stake in how my industry is regulated and that I deserved a fair hearing. I feel like my residents as well as myself are being punished for the Department's failure. I am asking that the proposed regulations 2600 be **stopped**. They are unacceptable in current form and they jeopardize my business and my residents. If DPW would **enforce the current regulations**, this would be sufficient in correcting the wrongs that are being done by a very small percentage of personal care homes. Meanwhile, reasonable and acceptable changes could be made to the existing regulations that would benefit everyone involved, including my residents and myself. Any changes need to allow me the opportunity to continue to operate my small business in the Commonwealth of Pennsylvania and afford my residents the choice to remain in their home. Thank you.

Very truly yours,



Deborah Stevens, President
Evergreen Assisted Living, Inc.
141 Evergreen Avenue
Pittsburgh, PA 15209

Original: 2294

Bonnie E. Elder
530 Battle Road
Kittanning, Pa 16201
October 10, 2002

Independent Regulatory Review Commission
333 Market Street
14th Floor
Harrisburg, Pa 17101

Re: Regulation 2600.54

Dear Commission:

I am a personal care giver in a personal care home and I am writing in regards to the above regulation.

Our residents are given highly qualified care and they have become family to us. Taking care of all their daily personal care is very important to their hygiene.

To have nurses replace us; which will be an expense costly to the residents, as well as the administrator of our home, is unnecessary. The paperwork that the nurse will be required to do daily will not leave them time to take care of the residents daily personal care.

We as care givers, are all more trained and capable of doing what a nurse will be doing in the personal care home. More important, the residents we care for and love, will not have a home.

We are interested in a reply to our letters and appreciate your consideration at this time.

Very truly yours,

Bonnie E. Elder

RECEIVED
INDEPENDENT REGULATORY REVIEW COMMISSION
OCT 23 2002

14-475 (34)

Original: 2294

Dear Fellow Republican

10-20-02

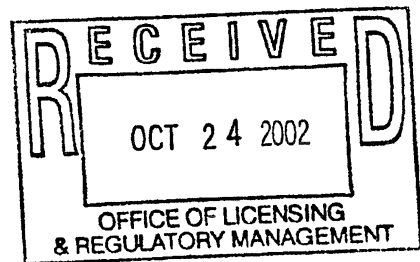
Last week I received a letter in the mail, requesting my continued support for the Republican team of "Fisher and Earl". They promised better government and Lower taxes. This caused me to reflect on the first two years of the Bush administration and I found my taxes had almost doubled in the last two years. Since I am retired and depend on Social Security for my income, this represented quite an increase. Then I recalled Mr. Bush had spent fifty billion dollars of Social Security funds placing that system in peril. The Stock Market has crashed and lost trillions of dollars for investors, the economy is sagging, and unemployment is rising, this is no time for disunity in the party.

Now, I have five brothers who have all served in the military and one of my brothers is living in an assisted care home named "The Colonial Manor", this is an excellent facility but the increased cost to the home brought about by the new suggested legislation, may make it impossible for him to live there. This means he would have to go back to the V.A. hospital. I cannot support the Republican Party or any party that backs this legislation and I will work to influence my family, my friends, and my neighbors to support my point of view.

I urge you not to back this new legislation, and to help restore unity in the Republican Party at a time when it desperately needs it.

Yours Truly,

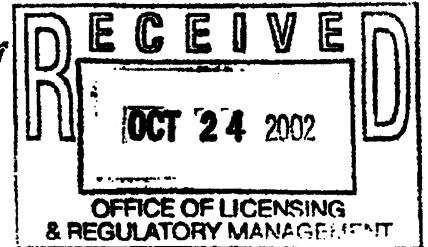
William P. Remy
814-437-6599



Original: 2294

Bonnie E. Elder #14475 (36)
530 Butler Road
Pittanning, Pa. 16201
October 30, 2002

Deleta Nevius, Director
Department of Public Welfare
Room 316, Health and Welfare Building
P.O. Box 2675
Harrisburg, Pa. 16120



Re: Regulation 2600.54

Dear Mrs. Nevius,

I am a personal care giver in a personal care home and I am writing in regards to the above regulation.

Our residents are given highly qualified care and they have become family to us. Taking care of all their daily personal care is very important to their hygiene.

To have nurses replace us; which will be an expense costly to the residents, as well as the administrator of our home, is unnecessary. The paperwork that the nurse will be required to do daily will not leave them time to take care of the residents daily personal care.

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We are very interested in a reply to our letters and appreciate your consideration at this time.

Very truly yours,
Bonnie E. Elder

Blair Nursing Home, Inc.
Blair Personal Care Homes, Inc.

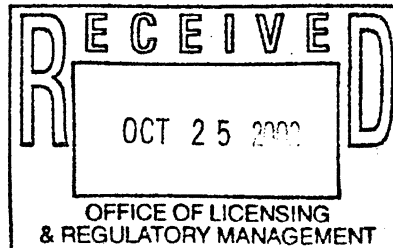
14-475 (53)

Original: 2294

1031 MERCER ROAD • BEAVER FALLS, PA 15010
724-843-2209

October 20, 2002

Teleta Nevius, Director
Department of Public Welfare
Room 316 Health and Welfare Building
P.O. Box 2675
Harrisburg, Pa 17120



MISSOURI STATE ARCHIVES
SERIALS ACQUISITION
1000 G. B. BLISS BLDG.
JEFFERSON CITY, MO 64107-0001

Dear Teleta Nevis,

Well, here we are again, poised to commit an act without thinking it through. How many times have we personally done this? I for one, freely admit to having done a few things without clearly thinking about all the possible outcomes. Every time that this has occurred I ended up paying a substantial price for my lack of judgment.

Today, you are proposing to enact a new set of Personal Care Home regulations. I am sure that these regulations are well intended, and that their goal is ultimately to improve the lives of personal care home residents. Most laws are passed with this goal in mind. Sometimes, honorably intentioned laws and regulations cause serious harm to their intended beneficiaries.

Let us look back at a well-intentioned law whose negative legacy remains with us today. The prohibition act of 1918 was passed to protect our citizenry from the evils of drink. Who could argue with the desirability of this? Unfortunately, the U.S. citizenry did not wish to be protected from the evils of drink. The criminal element took advantage of an excellent business opportunity which provided the cash flow to sustain it through today's far reaching diversification.

Ordinary citizens became law breakers merely because they consumed beverages which were no longer legal to consume.

Your well-intentioned regulations could produce a similar result with regard to the personal care home industry. Personal care home residents and their families currently embrace the concept of personal care homes with positive attitudes. The relaxed casual atmospheres of personal care homes are a favorable contrast to the generally accepted perception and fact that nursing homes are cold, functional institutions whose only saving grace comes from the warmth and charm exuded by some of the staff. Extreme regulations, whose implementation can only be proved through pounds of paperwork and endless time spent in meetings, which of course must be documented, occupy more staff hours than patient care. Department of Health Inspectors, whose jobs are to insure that nursing home patients are receiving proper care, spend most of their inspection time reading the facility produced pounds of paperwork that are designed, to prove beyond a shadow of a doubt that good patient care is being provided.

Yes, some inspection time is spent with patients and their families, but most of the annual inspection survey is spent inspecting paperwork. I do not know if anyone has taken the time to figure out how much this

paperwork costs per pound, but you can be assured that this cost is born by residents and government through high per diem rates.

The Department of Public Welfare has proposed a set of excellent sounding, well-intentioned personal care home regulations. The problem is that they are excessive. Personal care home residents do not need the level of expertise that would be achieved with the implementation of the new regulations. Improved qualifications and increase training for personal care home administrators and staff are great ideas, but who is going to pay for them. Piles of documentation about each personal care home resident will not reflect better care but rather that someone has been hired to produce good paperwork. As in the nursing home licensing process, licensing representatives will spend most of their inspection time, inspecting paperwork. They will need to be trained in this endeavor probably by Department of Health employees who are the most qualified to do this training.

There are many other areas in the new personal care home regulations that I could address, but the bottom line is this, they are overkill! And kill is exactly what they are going to do to the personal care home industry.

Based on my experience in this area, I would estimate that within three years of the implementation of the new personal care home regulations, forty percent of existing personal care homes will close. They will close because they will not be able to afford the cost of meeting the new regulatory requirements. Facilities providing care to SSI residents will be the first to close. They will be soon followed by homes serving low income private pay residents.

Where will all the discharged residents go?

Some will enter nursing homes, under medical assistance. Some might return home with family members. The vast majority, however, will disappear from the public radar screen and reside in unlicensed boot leg facilities. Life will go on and the public wrongly will believe that your department along with our elected officials have solved all the problems plaguing personal care homes.

Personal care homes currently operate under an adequate set of regulations. Most of today's problems can be resolved if licensing representatives would be permitted to do their jobs as prescribed by law.

Please, stop and think about all the negative outcomes that will occur as a result of the good intentioned regulations you are considering. I am sure that if those who passed the prohibition act of 1918 had realized what the next fifteen years were going to produce, there would never have been an eighteenth amendment.

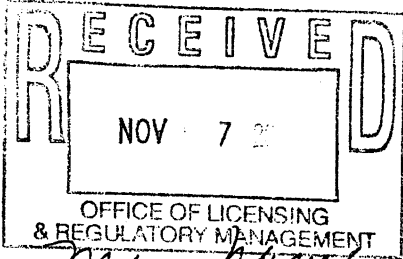
Sincerely,

Ray McMurdy

Ray McMurdy
Admissions/Social Service
Blair Nursing and
Personal Care Homes, Inc.

14-475 (647)

10/19/02



NOV 12 7:03:30

my name is Deborah Beyer. I lived at Evergreen for 4 years. I don't love them anymore. I moved in with my sister last week but I want to tell you that Evergreen helped me alot to become more independent. The staff took good care of me and the owners were on my side & helped me to get stronger emotionally so I could deal with the world again. Evergreen is not a nursing home and I never needed nursing care. The staff helped me stay compliant with my medication. They helped me manage my spending money. They supported me when I could no longer take care of my children. It made me sick to think they might have to close. Stop the new proposed regs now before it is too late!!! Thank you.

10/16/02

To whom this may concern.

I have been a cook at Colonial Gardens for two years + I am very comfortable at my job.

We think that the new regulations are a little to strong. We have U.H. guys here that are veterans.

This is there home + there needs must come first. We understand there has to be rules, but these go a little to much.

+ Hank You
Anna Withrow

2002 OCT 28 AM 10:03
MAIL ROOM CONFERENCE

10/18/02

Original: 2294

TO HONORABLE

I HAVE LIVED HERE FOR TWO
YEARS I WAS NOT SURE WHEN I
FIRST CAME BUT I KNOW ~~HOW~~ NOW
IT WAS THE BEST FOR ME.
PLEASE DON'T TAKE MY HOME
FROM ME I DON'T HAVE ANY
PLACE TO GO. PLEASE CONSIDER
THE LET THAT SERVE THEIR
COUNTRY AND SIR I KNOW YOU
DON'T WANT SOME ONE TO TELL
YOU TO GET OUT OF YOUR HOME
THIS IS MY HOME AND
I DON'T HAVE ANY WHERE TO
GO SO PLEASE DON'T TAKE
MY HOME AWAY
ME

A CONCERT

~~LET~~ T

Wamou Saleh

2002 OCT 23 11:10:02

REVIEW COMMISSION

141 Evergreen Ave
Pgh PA 15209

To Whom It May Concern:

Enclosed you will find 27 letters from residents at Evergreen Assisted Living, a 30 bed personal care home in Millvale, close to Pittsburgh. When informed about the threats inherent in the newly proposed personal care home regulations, they wanted to write to people and have their voices be heard. These 27 letters were dictated to staff at Evergreen and are to be read and hopefully responded to. Thank you.

Debora Geyer
Raymond Worst
Ian Baird
Perkins Harris
Daniel Wisniewski
Alfred Nepudzianski
Lois Ramsey
Allen Mandell
William Stitzman
Brenda Dean
Howard Ward
Paul Fitzgerald
Melanie Looney
Pasquale Berrillo

Robert Mikulan
Kenneth Foulkes
Kenneth Barone
James Bobby
Robert Munz
Samuel Shreve
John Lanning
George Herron
John McKee
Marian Wokutch
Nellie McCants
David Lopez
Myrna Adamson

Evergreen currently has 3 empty beds. Out of the above 27 persons, all but two are on SSI. The other two don't make very much more per month. All 27 of these individuals are residents of Pennsylvania and have been all their lives. Unfortunately, they are not able to take care of themselves and live independently. Most of them have failed repeatedly at independent living. They are not nursing home candidates. Most of them are not even 50 years old yet. Most of these folks have a mental illness and several are also mentally retarded. They may never qualify for nursing home. They do not need nursing care. They are happy where they live. Many of them have lived at Evergreen for several years. Evergreen is their home. It is not an institution. They would all like to know the reason why they might not have a home in the future. They each would like a response from the Department of Welfare and the Office of Licensing and Regulatory Management. They want to know if the Department is going to be able to prevent them from going to an institution if the new regulations make it too expensive for Evergreen to stay open. They like living in a smaller home. They cannot afford any increase in rent because of the source of their income, which is fixed. They have no assets beyond their clothing. They represent several thousand personal care home residents in Pennsylvania who are facing the same potential crisis. It is within the power of our state government to prevent this tragedy. It will create homelessness and institutionalization among this population. With one voice, they are asking for the proposed personal care home regulations to be stopped because they are excessive and unreasonable. If the SSI supplement cannot be increased beyond 2\$ a day (which didn't cover the increase in the cost of their toilet paper and shampoo) they at least want reasonable changes made by reasonable, knowledgeable people. They want the current proposed regulations stopped.

10/19/02

my name is Tebora Beyer. I lived at
Evergreen for 4 years. I don't live there
anymore. I moved in with my sister
last week. But I want to tell you
that Evergreen helped me alot to become
more independent. The staff took good
care of me and the owners were on my
side & helped me to get through
emotionally so I could deal with the
world again. Evergreen is not a nursing
home and I never needed nursing
care. The staff helped me stay
compliant with my medications.
They helped me manage my spending
money. They supported me when I
could no longer take care of my
children. It makes me sad to think
they might have to close. Stop the new
proposed regs now before it is too
late!!! Thank you.

I have lived at Waverly for 6 years. My family is close by and I visit them and they visit me. We have fun parties here. I tell my roommates. I don't want to move. If you pass the current proposed rules my home cannot afford to stay open. I cannot afford to help them stay open. Please do not pass the proposed regulations. My family asks me to tell you the same thing. Thank you.

John Lanning

My name is Nellie and I
have lived at Creeper
for about 5 years. My
counselor thinks that I have
done good here & I wouldn't
want to have to move. I
like the staff here. I don't
want them to go away.
They help me keep my
room clean and to
remember when to take
my medicine. Will I
have to move?

Sincerely,

Nellie McRants

I was able to move into evergreen
which is in the same town I've lived in.
My home is close to where my family lives,
& they can visit me a lot, and I can visit
them too. My family is very thankful for
my home & the staff & the owners. I don't
understand about all the new regs but I
know I don't want to move to another
place. I'm eighty years old & I want
to stay in my hometown. I have
lived here for 6 years

William Sitzmann

de

I have lived at Emergreen
for 8 1/2 years. Ever since the
new owners took over. They are
good to me. They always make
sure my staff is here to take
care of me. I go to daytime
mental health program and I
see my doctor out in the
community. This is my home.
Why would you want to
threaten that? I don't need
a nurse. I don't need a college
educated staff. I need what
I have. I don't know where
I would go. I cannot help
with any increased cost
because I live on SSI

Stop the new regs as
they are currently
written. They hurt me
very much.

Alton Mandell

The staff calls my caseworker
wherever I need to go to the doctor. My
caseworker takes me out. The food is
good and I get my medications. I want
to stay here. It's my home. The
staff like me + I like them. I
lived with my niece before + she took
all my money. The owners talk to me
& watch my health. I have lived
here a long long time.

PAUL F.
d

I live at Evergreen because
2 other homes have kicked me
out because they could not
tolerate my being different due
to my mental illness.

Evergreen has worked with me
and I am following the rules
because I know I am loved
here. Do you have any idea
how hard it is to find a
home like this when you
are poor? If you pass the
new PCR regulations Evergreen
might have to close.

Please do not let that
happen. I have been here
almost 1 year.

Melanie
Looney

I live in this home because I use
to drink + had a stroke. The staff
spoil me. The owners have explained the
new regs to me + asked me to dictate
a letter. I have been here 8 1/2 years.
The owners will even drive me to visit my
girlfriend if I want to. I need assistance
in bathing + dressing. I can't afford to
live in a fancy home. I've never been
in a hospital since I've been here. I'm
taken care of + I like the owners + staff.

Yours love
(Howard Ward, Jr)

du

The new personal care home regulations were explained to me. I am upset because I like living in the home I live in now. I've lived here for 4 years. Most of the people here are young and have the same problems I do. I only get SSI and could not afford to live elsewhere. Also some times don't understand my emotional problems. The home is small & I like the staff. Please do something that will keep these regulations from passing.

Sincerely,

Brend L Deary,
dne

(Brenda has lived at
Evergreen for 6 1/2
years)

I have been told about the new personal care home regulations and I am writing to tell you that they should be stopped in their current form.

I live in a small home and I like it here. I don't want to be homeless or live in an institution somewhere - I have lived here for 3 1/2 years.

I am only 53 years old and I am healthy and do not need a nursing home.

I am on SSI and if SSI homes close I don't know what will happen to me.

Please don't let the proposed reg pass.
Thank you,

JK

Paquale J. Bevilacqua

PASQUALE J BEVILLAGGIO
CUNY/CCNY ASSISTED LIVING

I live on SSI. If the current proposed regulations pass for personal care homes my home won't be able to stay open because me and my roommates cannot afford to pay more. I don't know where I would go. I love my home, I don't want to live in a nursing home. I don't need nurses to care for me. In my small home the staff care about me. I can talk to the owners in the middle of the night if I need to. I can call my family when I need to talk to them. Please don't pass the regulations as they are now. I have lived at Evergreen for 5 1/2 years.

Raymond Worst

ds

To Whom It May Concern:

I get three good meals a day here plus ~~snacks~~. The owner of the home explained to me about some proposed regulations. I am not able to call my doctor + ask him questions. I am afraid the cost living here will go up + I don't want to move anywhere else. I should have a choice where I live. I don't have any family or friends I could live with, + I need assistance with my needs, but I know what they're for + don't need a nurse. I've never been given a wrong med.

John T. McKee/dme

I live at Evergreen.
I Am mentally ill.
I WAS thrown out of a CRR
which is a mental health group home
because I cannot take care of
myself. I don't want to have to go
to a state mental hospital. That
will happen if I don't have any
where to live. If the personal
care home regulations pass as is
my home will have to close.
Please stop the regulations
NOW

Tom Baird

23

To Whom It May Concern:

I like living at Evergreen. It's like living at home but not. The staff are nice and the food is good. I am afraid that my home will have to close if the new laws make it too expensive for the owners to stay open. I don't know what I'd do. I don't want to go back to a state institution. I'm poor and can't pay my own bills. Please do something to prevent this.

Sincerely
Perkins Harris
dhr

Please don't let the personal care home regulations pass as proposed. Me and my mother don't get along real good. And I don't want to live with her. I like where I live and I don't want to move. Stop the new regulations now until they can write ones we all can live with. I live in a good home and the owners and staff help me a lot. I don't want to be forced to go to a big institution. THANK YOU.

James P. Bobly

I love it here. Nurses come in to change the bandages on my legs. My doctor comes to the home. The staff take good care of me & make me laugh. I would be depressed if I have to go somewhere else. My coseworker from St. Francis comes & takes me shopping. I can't read or write. They take good care of me. Don't do anything that would make me move.

Alfred has lived at Evergreen for 4 years.

Alfred NIESPODZIANSKI

Witness:
X Caroline D. Murray
dhr

I am ASKING you not to PASS
Any new rules that will force
my home to close because of
the cost involved.

My case worker says I have done
real good here and if I
have to move to a sig place
or go to a shelter I will get
sick AGAIN. I love my home.
Please don't TAKE it AWAY

George has lived at
Evergreen for 2 1/2 years

George Herron

I like Caroline + all the staff
here. I use to get mad + hit people -
I don't do that anymore, I see
doctors + get my needs, I don't
want to move. I get baths +
they help me dress to look nice. I like
to give hugs. I'm happy here.

(Kenneth has lived at
Evergreen for 7 years).

KEN Foulkes
dne

I live on SSI. If the new
personal care home regulations
make my home cost more I can't
stay because I don't have any
more money. The staff help
me remember to take a shower
and use soap. They cook me good
food and I eat in the
dining room like a normal
person. You must not let
NEW EXPENSIVE rules pass!
I don't want to live anywhere else
and I don't need nursing home.
I have lived here for 2
years.

Robert Murray

Diane English, one of the owners explained to me about the new welfare regulations. I don't know why things need to change. I am very happy here. The owners are always willing to talk to me when I'm upset. Staff are to call them late at night if necessary.

I am a diabetic. Staff tell me when to take my blood sugar - I ~~can~~ do my own + don't need help with it, much less a nurse to do it. I have lived on my own + cannot do it anymore because I need some assistance. I am young + this home has a lot of younger mental health people. I'm comfortable here + feel at home + accepted.

Please do what you can to prevent some of the new regs.

(Diane has lived in Evergreen for 17 years).

Diane English

I have lived at Ellengreen for 6
years. I live in a small
home because I choose to.
I understand that the Welfare
Department is trying to pass
ridiculous regulations that are
unnecessary, excessive and not
very well thought out.
Ellengreen has always been a
good home with competent
caring staff. My needs are
met here. I don't know where
I would go and I don't
believe that my government
should be so unfair as to
take away my choices. The
small personal care homes in PA
must survive. Stop the regs
now before it's too late.
Thank you.

Lois Ramsey

My name is Robert. My
parents found me
and we are very happy with
this home. The staff are
good and they are nice.
I go to Loyale Clinic & they
make sure I take my
Loyale right. Help
me stay here and don't
make any new laws that make
me have to leave that
isn't fair. My parents want
to know if I will get to
come and live with you.
I am finally happy somewhere
and I really really
don't want to move again.
I visit my parents but I
don't want to live with them
because I am a grown up.
Thank you.

Robert M. Miller

I have lived at Evergreen for
5 1/4 years. I have been kicked out of
a CR. I am not very good
about following the rules. I
do not want to go to the
State Hospital and I am ~~afraid~~
afraid that will happen if
Evergreen and home life it will
take people life we have to
shut down. The people who
work here are nice and they
give me my medicine so I
don't make mistakes and they
look up my money for me.
I like it here and I don't
want to move. I don't have
any place to move to. My
nurses can't take care of me.
Thank you very much for helping
me.

Mildred Charles Womack

I HAVE LIVED AT EVERGREEN
FOR THREE YEARS. MY SISTER
FOUND IT. SHE VISITS ME A LOT.
I HAD TO MOVE HERE WHEN MY MOM
WENT TO A NURSING HOME. I
COULDN'T GO TO A NURSING HOME
BECAUSE I AM TOO HEALTHY.

BUT I NEED HELP WITH OTHER
THINGS I LOVE IT HERE.
MY SISTER PAYS \$200 EXTRA A MONTH
SO I CAN HAVE A PRIVATE ROOM.
SHE CAN'T PAY ANYMORE. I CAN'T LIVE
WITH HER. SHE LIVES IN MONROEVILLE
AND I WANT TO STAY IN MILLVALE.
ALL MY FRIENDS ARE HERE. I HAVE
LIVED IN MILLVALE ALL OF MY LIFE.
I DO NOT WANT TO HAVE TO MOVE.
DON'T PASS ANY LAWS THAT COST TOO
MUCH MONEY BECAUSE WE ARE ALL
POOR. I NEED SOME MONEY SO I
CAN PLAY BINGO. I DON'T WANT TO
GIVE THE GOVERNMENT MY BINGO
MONEY. SORRY. PLEASE HELP ME
AND MY FRIENDS STAY AT
EVERGREEN.

MARIAN WOKUTCH

I have lived at Eweyven
for 10 months I used to
live with my sister but I
can't anymore. I ~~can~~ come
and go as I want to.

Staff tells me when to take my
medicine and they keep it locked
up for me so I don't lose it.

They give me the right medicine
and have not made a mistake.
I like it here and want to live
here for the rest of my life.

My girlfriend can visit me here.

The people are nice. Help me
stay here cause I don't have
any more money.

Very truly yours,

Samuel Shreve

Ken Bevone is my name. I am recovering Alcoholic for 7 years. I have Schizophrenia. I go to (Loran) Clinic every Tuesday. I am clean. I go to AA. I go to daytime social rehab programs and I am in a work program. I am not able to live in a CRR. I tried to go. But I can live at Evergreen. I need the type of help in a personal care home. I have friends here. I like the staff here. The owners don't hire anyone who isn't good enough to take care of us. You shouldn't let anything bad happen to me or my home. It has been my home for 4 1/2 years

Kenneth A. Bevone

I have lived at Aves Green for
2 years - I have a boyfriend but
he doesn't live here. When I
get married next year I will live
with him. I can walk to my dad's
house from here. I can take
the bus to my part time job.
I see a Therapist and I go to
Bingo. Barbara from the
hospital mental health center
comes here and we play
games. I go to my own
doctor. If I ever needed
a nurse I would have
a home health nurse come here.
I like it here. They do a
good job and you would be
stupid to make rules that
would close them down.

Please don't do that

Thank you.

Merna Adamson