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Longwood at Oakmont

An Affiliate of Presbyterian SeniorCare

INDEPENDENT REGULATORY
REVIEW COMMISSION

September 11, 2008

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BUR OF LTC PGMS
REFER TO _____

Gail Weidman
Office of Long Term Living
P.O. Box 2675
Harrisburg, Pa. 17105-2675

Dear Ms. Weidman:

We at Longwood at Oakmont, a continuing care retirement community and member of PANPHA, have reviewed the proposed Assisted Living Regulations in Chapter 2800. As part of our continuum of service to almost 400 residents, we offer a service now licensed for 49 Personal Care Home residences. We have significant concerns regarding the economic and reasonableness of implementation of the Chapter 2800 regulations. We join with PANPHA saying we do not believe that the proposed regulations for Assisted Living Residences will advance the delivery of care or improve the health and safety of the residents we serve.

The proposed regulations would impose significant new costs to us as providers. These costs will eventually affect the fee schedules of service for our residents who are private pay on a fixed income. We realize that the intent of passing the Assisted Living Licensure Act was to define "Assisted Living" and to ensure access to assisted living services to Pennsylvania's seniors by allowing the public to have choices and an opportunity to age in place and possibly delay or prevent the need for placement in a nursing facility. However, we believe the proposed regulations should be examined thoughtfully to ensure their intent will not cause confusion among our seniors but allow them to choose a care provider with confidence. Our goal is to provide continuing quality care for our seniors in the safest and most financially responsible environment.

The following is a list of our **most** significant concerns with the proposed regulations:

Licensure fees: Under the Personal Care Home Regulations, we currently pay \$20.00 for our licensing of 49 beds. The licensing fee alone for the proposed Assisted Living is a significant increase from the Personal Care Home licensing. Our licensing fee under the proposed regulations would be increased by over 250% which calculates to \$5,645.00. These fees could take money away from the daily resident care services we provide and could affect our budgeted FTE's in our direct care.

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Administrator requirements: According to the proposed regulations, a designee who possesses the same qualifications as the Administrator needs to be present in the residence at all times. Administrators are currently in short supply and finding a second administrator for each facility would be neither feasible nor practical. The cost of a second Administrator could average \$60,000.00 a year plus benefits. This is an additional burden that would be passed on directly to the seniors we serve on a fixed income. It is reasonable to have a temporary qualified administrator serve in the absence of the administrator for vacation or a planned leave. The 40 hours that the administrator is required to be in the building per week would not allow for educational requirements such as Continuing Education Credits for those with Nursing Home Administrators Licenses or RN's who are now required to have credits as part of their license renewal. We propose the current requirement of 20 hours a week for a Personal Care Home Administrator should be sufficient.

Under the regulation 2800.64 for administrator training we recommend that an exception be added to address a Nursing Home Administrator who needs required credits to maintain their licensing. We propose that a Nursing Home Administrator employed as an Administrator of an Assisted Living Residence (prior to the effective date of the regulations) be exempt from training and education requirements of the chapter if the NHA continues to meet their requirements for the Department of State.

Physical Plant Requirements: We are concerned for all providers whose costs for renovation or new construction would prohibit their ability to consider Assisted Living. The cost to provide the proposed square footage would affect the charges for the consumer and not focus on the needs or safety of the residents as they age in place. As residents age and their physical needs increase, safety is always a priority when providing their care. Additional square footage could lead to a higher risk for falls as the residents' mobility needs will also change. An additional 100 square feet of space could add \$17,500 in construction costs per room which would have to be added to the debt coverage supported by the resident.

Staffing requirements: As we allow the residents to age in place in the Assisted Living setting, we recognize that their care needs will be constantly changing. Under 2600.60, the residence should be allowed to assess those needs and staff accordingly as indicated in the resident's support plan. If the needs of the residents necessitate having an RN on staff or contracted to provide supervision of the resident's care plan or care needs, then the residence is obligated to accommodate those needs. Mandating that an RN be on call at all times could incur costs to escalate to \$500 or more per day for such coverage. We propose that the needs of the residents according to their support plan set the standard for staffing requirements.

Regulatory requirements: The Regulation 2800.16(a) (3) for reporting requirements is proposed and taken from the Personal Care Home regulations. As residents age in place and become frailer, their susceptibility to illnesses will increase. The reporting of a resident moving from one level of care to another for what may be a chronic or common illness is not necessary. We recommend following the current reporting requirements for the Personal Care Home regulations.

Dementia Training: 2800.69 We strongly agree that education and training be provided to all employees for residents who exhibit signs of dementia or cognitive impairment. We recommend that the direct care staff have four hours of training within the first year of hire and not within the first 30 days. These hours should be included in the 12 hour annual training as currently mandated in the Personal Care Home regulations. We also recommend that Administrators and direct care staff have two hours of dementia care specific training as part of their annual requirements.

Fire extinguishers: 2800.131 We have serious concerns regarding the placement of fire extinguishers in each living unit. Residents should not be responsible for the operation of the fire extinguisher and, if placed in the unit, the resident may be compelled to attempt to use the extinguisher causing possible harm to themselves or others in the event of an emergency. We recommend that at least one operable fire extinguisher, with a minimum of a 2-A rating, be placed in public walkways every 3,000 square feet and not in each living unit. We also recommend that a fire extinguisher be located in each common kitchen area.

(AED)Automatic External Defibrillators: The proposal in 2800.96 of having an AED in each first aid kit would be a duplicative service whose demand is low. One AED per campus has been sufficient to meet the demand. Additionally, this would be a costly provision. We also ask that you reconsider the requirement to place an AED in the first aid kits in the residence vehicles at the cost of \$2,000.00 each.


Transportation: The regulations 2800.171 and 2800.220 also need to be addressed. The requirement that every vehicle be handicapped accessible would be excessive. We believe that to meet the resident's needs for transportation having one handicapped vehicle accessible would be sufficient.

We respectfully request that our concerns be reviewed.

Sincerely,



Michael K. Hays
Executive Director



Karen F. Paul, RN, NHA
Director of Assisted Living

cc: PANPHA