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**CROSS KEYS VILLAGE**  
The Brethren Home Community

July 23, 2009

The Honorable John M. Hall  
Secretary, Department of Aging  
Office of Long-Term Care Living  
Bureau of Policy and Strategic Planning  
P. O. Box 2675  
Harrisburg, PA 17105

**RECEIVED**

JUL 31 REC'D

INDEPENDENT REGULATORY  
REVIEW COMMISSION

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BUR OF LTC PGMS  
REFER TO \_\_\_\_\_

**RE: Proposed Assisted Living Residence Regulatory Package**

Dear Secretary Hall:

Cross Keys Village – The Brethren Home Community is a faith-based, non-profit CCRC located in New Oxford PA. Our 100-bed personal care facility has been serving seniors for twenty years. We currently subsidize housing and services for 25% of our PC residents, which, last year alone, equated to nearly \$700,000 in charity care.

**As a member of PANPHA, we support the comments they have submitted regarding the proposed Assisted Living Residence regulatory package.**

In addition, we would like to emphasize the importance of not becoming so prescriptive in regulation as to hinder our ability to provide person-centered support services.

I have served as the personal care administrator for twenty years. Prior to the current 2600 regulations, we maintained deficiency-free annual surveys and high resident and family satisfaction ratings in biannual satisfaction surveys. Now, under the 2600 regulations, we find ourselves burdened by excessive paperwork and distracted by meeting numerous prescriptive regulations which both added to program expense and take staff away from direct resident interaction. I see our regulatory framework moving closer to that of skilled nursing, which has already proven that excessive regulation results in expensive overhead costs and doesn't guarantee quality service.

The mandate of room square footage in the proposed regulations will mean that our smaller units, which allow residents with minimal financial means to have a private room and bath, will not qualify under the requirement. Essentially we are penalized for offering private rooms with bathroom and closet space as it is not counted in the total square footage. We place emphasis on building a strong program which encourages each of our residents to have a reason to get up in the morning. Public spaces are comfortable and welcoming; encouraging socialization and addressing the various aspects of personal wellness. This regulation package places too much emphasis on the square footage of private and public spaces, which will ultimately affect the daily rates and limit access and choice.

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To expect units to have a kitchen doesn't allow the consumer a choice as the cost of creating the infrastructure will need to be passed on whether the resident wants it or not. In our experience, many residents make the decision to move from their home because they are no longer safe in the kitchen. Our program is already expected to provide three well-balanced meals daily, as well as between meal snacks. In addition residents have convenient access to public kitchenettes. Satisfaction survey results have shown that it meets their needs.

The annual licensure fees alone are excessive as proposed. This will affect our ability to subsidize those with limited resources or the expense will be passed through in higher daily rates.

Since the assisted living regulations are built upon the current 2600 personal care regulations, being a personal care home administrator in good standing should be listed as one of the acceptable qualifications. We have already received training in many of the topics listed in 2800.64; therefore, should be required to only attend a supplemental training. The required AL administrator exam will help ensure that persons are qualified.

Requiring one staff member trained in CPR, first aid and obstructed airway techniques for every 20 residents is excessive for overnight staffing. The 1:50 requirement in our personal care regulations has been sufficient.

Requiring 18 hours of initial direct care staff training and 16 hours of annual training is excessive and expensive, not to mention the additional hours for dementia specific training.


Emergency preparedness is important. However, mandating how we related to our individual municipalities is problematic, as we have no control over their level of interaction with us, thus often resulting in a violation.

Our team of LPN's have been successfully determining resident support needs for twenty years. Requiring another layer of staff time (RN) will only pose delays and increase cost.

Please do not mandate additional paperwork. Personal care homes are already inundated with excessive assessment requirements that have increased cost with questionable benefit.

I'd like to think that we both want the same thing – a safe living environment and quality of life for the wide variety of residents we serve.

Respectfully,



Julie A. Hull, CASP  
Personal Care Administrator