



8/2/2021

Department of Health  
625 Forster Street  
Harrisburg, PA 17120  
Attn: Lori Gutierrez, Deputy Director  
Office of Policy

Re: Rulemaking 10-221 (Long-Term Care Facilities, Proposed Rulemaking 1)

To Whom it May Concern,

Please accept this letter of comment on the recently proposed rule, "Department of Health, Title 28. Health and Safety, Part IV. Health Facilities, Subpart C. Long Term Care Facilities, 28 Pa. Code §§201.1-201.3: 211.12(i), Long Term Care Nursing Facilities".

This letter is being sent on behalf of the residents we serve and the direct care staff who work at Quality Life Services facilities. As the Chief Administrative Officer, I oversee the Human Resource functions of ten nursing homes operating across the Commonwealth. Collectively, these facilities are licensed for over 1,000 beds, employ over 1,200 employees and serve over 770 residents. Our organization is committed to providing high quality care and prioritizing the needs of the residents we serve each and every day.

After reviewing your proposed regulation, we have concerns regarding the mandatory increase of the minimum number of hours of general nursing care from 2.7 to 4.1 hours for each resident, which excludes other direct care provided by essential caregivers.

We own and operate ten skilled nursing facilities in Western Pennsylvania. We are a third generation family-owned company spanning almost 50 years. My brother, cousin and I grew up working in nursing homes and were taught that residents always come first. That is the fundamental belief we carry to this day.

As we emerge from the worst year and a half our industry has ever faced, we're left with lingering and devastating effects. Prior to the pandemic it was not uncommon to have staffing challenges, but we are now reaching the point of a staffing crisis.

Please understand that the staffing crisis is NOT from a lack of effort in attempting to recruit and retain staff. We have raised our pay rates significantly in the last few months. In fact, in July 2021 we gave the biggest pay raises in the company's history. We now start all CNAs at \$15/hr and offer a variety of shift and weekend differentials as well. We offer sign-on bonuses, referral bonuses, retention bonuses and even reunion bonuses (for those who have left, but wish to return). We spend over one hundred thousand dollars per year advertising positions on Indeed. We purchase billboard space, place yard signs, and post flyers. We offer shift pick-up bonuses, schedule flexibility, and great healthcare benefits. We offer paid time off, a 401(k) match, tuition reimbursement, and student loan repayment. We meet regularly with administration and staff to brainstorm ideas and leave no stone unturned and yet WE STILL CANNOT FIND ENOUGH PEOPLE TO FILL OUR CURRENT OPENINGS.



As a result of this crisis, we have become heavily reliant on agency staffing and have contracts with no less than a dozen different agencies. The agencies continue to demand more money (with less reliability or accountability) and we have no option but to pay it. The costs are outrageous and WE STILL CANNOT FIND ENOUGH PEOPLE TO FILL OUR CURRENT OPENINGS.

We talk with the competitors in our markets who are reportedly in the exact same boat. Our facilities are in small towns and rural communities where the need for healthcare is great, but the working population is insufficient. We celebrate with every new hire, but recognize that it likely came at the expense of another skilled nursing facility. We strive to be the employer of choice in every market we occupy, but WE STILL CANNOT FIND ENOUGH PEOPLE TO FILL OUR CURRENT OPENINGS.

Due to incredibly stagnant and insufficient reimbursement rates from the state we are continually asked to do more with less. We've risen to that challenge on many occasions and it has not been easy, but 4.1 hours of general nursing per resident under the current conditions seems impossible.

Perhaps a more feasible solution would be to consider in the equation all those who provide care, but who are not considered nursing staff. Physical therapists, occupational therapist, dieticians, wound care nurses, and activities directors are each examples of essential care workers who contribute significantly to the overall care of the resident. Some of our best caregivers aren't nurses, but their efforts are every bit as valuable and essential to our residents' quality of life.

Thank you for your time in reviewing and considering our comments. We are hopeful that the Department of Health will address our concerns and work with providers and staff to ensure continued access to long-term care services in Pennsylvania. We are hopeful that the Department of Health will amend the provisions contained in §211.12(i) in a manner that will address the concerns raised in our comments.

Sincerely,

Susan Tack Beardsley

Quality Life Services, Chief Administrative Officer