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Independent Regulatory Review Commission

From: dkwnyny@aol.com
To: DH, LTCRegs
Subject: [External] Comment on Proposed Updates to PA Dept. of Health Skilled Nursing Facility Regulations.
Date: Thursday, August 12, 2021 9:36:57 AM

To the PA Department of Health: Below is my comment on this urgent proposal on staffing. Please include it in your recorded comments. The proposed staffing increases still don't allow for ideal care but it is a big improvement. Think of the care you'd want your parent or spouse to have. Thank you.

Comment on the Proposed Change to SNF Staffing

I am writing as a former CNA, to give regulators a view from the workplace about what life is like in a long-term care home, and the demands on the time of direct nursing care staff. I'm also writing as someone who has had family members and friends living in LTC communities. I'm specifically addressing the work of CNAs because they are the staff involved most in direct care.

Aides work an 8-hour shift which includes, in Pennsylvania, a one-half hour mandatory meal break. (In some facilities employees are also permitted a second 15-minute break.) The first and last ten or so minutes of a shift are spent getting and giving shift updates to the previous or next shift of aides. Thus each shift aide has about 7.5 hours left for care tasks. Assume that an aid may need a bathroom break or two during a shift and maybe a few moments for a calming 'time-out,' for a helpful conversation with another aide or a supervisor, for an urgent phone call from home. Factor in time spent walking from one room to another, one task to another, one resident to another. An aide might have seven hours to dedicate directly to resident care-giving.

An aide will ordinarily be responsible for the care of six to ten residents on a shift that has plus or minus 420 minutes of available work time. (Would you believe the number of residents might be higher?) If you do the math, you see that aides may have 42 to 70 minutes for each resident on each shift. Over two shifts, this is a total of 85 to 140 minutes to help an elderly, frail resident with toileting, washing (on certain days showering), grooming, dressing and undressing, moving to the dining room, eating, returning to the day room, using the toilet during the day. We—and CMS—expect aides to do all these tasks in a person-centered way.

These tasks mentioned are just the essential ADLs. We also expect aides to engage with residents to give them 'moments of joy,' in the words of one dementia-care author. If a resident has even a moderate degree of cognitive impairment, this has a significant impact on the time an aide will need for each step of care-giving. Other tasks aides are responsible for during a shift:

- for safety purposes, keeping alert to where each resident is;
- distributing drinks to ensure hydration;
- serving snacks;
- checking toileting needs and assisting residents with this as needed;
- repositioning immobile residents every two hours;
- helping with transfers of wheelchair-bound residents (from bed to wheelchair, wheelchair to lounge chair, lounge chair to wheelchair, wheelchair to toilet and back several times in a day, wheelchair to bed);
- helping with transfers of residents who are unsteady or weak;
- helping other aides with two-person-assist transfers;
- responding to resident questions throughout the shift ("When can I eat?" "When will my son be here?" "I'm cold, where is my jacket?" "What time is it?" "Don't I have a doctor's appointment today?");
- accompanying residents to other areas of the building as needed for medical care, hairdressing appointments, other events;
- engaging with residents through conversation.
- in between ADLs, assisting the Activities with activities..

throughout the day there are spills to clean up, phones to answer, paperwork to be done, visitors' questions to be answered.

- in some communities aides are also responsible for making beds, doing laundry and putting it away. refilling supplies of towels and toiletries.

If an aide comes to work with a bad back or sore knees (common complaints) or is pregnant, these things will mean she has a lower energy level or slower response time. When an aide is tired from working a second job, or a double shift, this will slow him down. If an aide should call out at the last minute and the shift is short-staffed, this further impacts care. All these factors take a toll on care. Even if seventy minutes of care per resident per shift were sufficient—and really, it's not—at the current staffing levels in most LTC homes, residents don't get even this. I challenge administrators to refute this with data. Is it really acceptable to pare staff levels so thin that we impair not only the quality of care but the safety of residents and aides alike? Is it acceptable that the owners of long-term care homes sustain their organizations by controlling their costs with sub-par staffing levels (and, *ahem*, substandard wages)?

Those responsible for setting care and staffing standards should feel responsible for doing something about the unacceptably low staffing requirements they've sanctioned, thanks to lobbying efforts of the long-term care industry. (Shame on you, elected representatives!) The rest of us should hold them accountable. Demand that care home managers, healthcare officials and state legislators see what is before their eyes.

Owners, executives and regulators of LTC homes will say, "We don't need more staff, we need better training; our CNAs need to work smarter." Yes, we do need to look at aides' training, especially related to dementia care. But tell me how all this will change the fact that during their waking hours a resident may, on a good day under ideal conditions, receive two hours of direct personal-care assistance. (A resident who may be paying $4,000 to $10,000 a month for care.)

Would we entrust our dog to a kennel that gives our pet only seventy minutes of attention a day? Long-term-care homes care for the people we love. Tell me please, how can we continue to close our eyes to staffing issues? How can we sit still and stay quiet about this appalling reality one minute longer?

Donna K. Woodward
630 Furlong Avenue
Havertown, PA 19083