



a tradition of caring

August 12, 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 of Bradford Manor. Our nursing facility is a 115 bed facility located in McKean County, Bradford, Pennsylvania. We employ 99 employees and provide services to 77 current residents. As the Nursing Home Administrator, I can attest to our facilities commitment to providing high quality care and prioritizing the needs of the residents we serve each and every day.

After reviewing the proposed regulation, we have grave concerns regarding the amendments to increase the required minimum number of hours of general nursing care from 2.7 to 4.1 hours for each resident and excluding other direct care provided by essential caregivers. A facility cannot function appropriately without the additional staff that are being overlooked with this new requirement. My fear is that in increasing the requirement for nursing staff, other important positions will be cut to compensate. We need our therapist, dietary staff, activity staff, housekeepers, office staff, etc to run efficiently. We are required to have a wound nurse, infection preventionist, and dieticians who are all licensed professionals and are not included in that ratio. If you the 4.1 hours is passed, I would ask that you please consider including some of those essential care positions in that staffing requirement.

Staffing is a challenge in many buildings. Many facilities have resorted to using staffing agencies to help them meet the current 2.7 requirements. I feel that fulfilling a 4.1 staffing requirement would be a challenge in itself. We are currently recruiting for all positions with minimal applicants so we are offering sign on bonuses. Many people are shying away working from healthcare now. Fortunately, we have not had to resort to using agency staff. We are adjusting and staffing with acuity, behavior needs, admissions, census, etc but we are always meeting or exceeding the 2.7 requirement. I feel that since we already adjust to meet the needs of the residents, it is not necessary to impose such a huge jump in staffing requirements. We are focusing on retention of

the current staff. Staffing needs are unique to each nursing facility – it is **not a one size fits all**. More staff does not necessarily equal better outcomes.

The financial burden that this new requirement would carry is going to have a huge impact on our operations as well. We lost a substantial amount of money while protecting our staff from Covid and modifying our daily operations to comply with all the regulations, reporting, hazard pay, etc related to Covid. Many facilities are experiencing lower than normal census right now as we are not “bouncing back” from Covid as quickly as we had hoped. This requirement could be detrimental to some already struggling facilities.

Thank you for your time in reviewing and considering our comments. We are hopeful that the Department will amend the provisions contained in §211.12(i) in a manner that will address the concerns raised in our comments.

Sincerely,

A handwritten signature in cursive script that reads "Tracy Blake, NHA". The signature is written in black ink and is positioned above the typed name.

Tracy Blake, NHA
Nursing Home Administrator