



To: Lori Gutierrez, Deputy Director

Office of Policy

625 Forster Street

Room 814

Health and Welfare Building

Harrisburg, PA 17120

RE comments in response to proposed regulations

Dear Deputy Gutierrez,

I have given over 22 years of my life to long term care, first as a charge nurse, then a unit manager, ADON and for the last 20+ years as a director of nursing. I have overseen the nursing department in buildings ranging in size from 48 beds to 300. I have always been blessed to work in facilities that demonstrated a true commitment to high quality patient care. I have never written a comment before about items posted for comment but this last announcement regarding new regulations has left me sleepless.

- A. 2.7 as a PPD is disgraceful and should increase. I have never budgeted near that number in my career. However, moving to 4.1 in the foreseeable future will be almost impossible for many facilities to meet. We had trouble finding enough staff pre covid but managed. We lost so many staff during the pandemic despite that fact that we had a low number of both resident and staff cases and had NO deaths. Staff developed "covid fatigue" as well as fear of weekly testing, fear of taking it home, tired of the PPE making the work harder. Now, there simply is no staff. They sit home collecting unemployment and stimulus and now the child care credit with ZERO incentive to return to a work force that AGAIN faces a rise in covid cases. Competition to attract CNAs is fierce across the board. I work in a small (48 bed) stand alone so we have limited resources to entice people to come on board. Sadly, our use of agency staff has had to increase at significant cost that does not crosswalk to quality or consistent care and we have had to drop our census because we will not admit people that we cannot provide the best care 24/7. And, even the agencies are unable to attract staff to help us! We would ask that some of the restrictions be loosened around who counts in PPD as well. As the DON, I would love to count the 1-2 hours of my day where I am helping staff feed. I would also love to be able to count the speech therapist who is assisting residents at meals and the OT who is participating in AM ADLs. Not for their whole shift, but a part of the day devoted to these issue.
- B. As we deal with these ongoing staffing challenges, I also worry about the idea of punishment for facilities who fall below whatever number is mandated. If my facility was full with 48 residents (almost an impossibility as patients are so afraid to come to a LTC setting right now) and I had every position filled as I am budgeted, my nursing hours would be 4.01. as, I said – we provide quality care! So, I would still need to add someone I truly don't need to get to the 4.1 and if I had 1 call out that I could not cover, I would be in trouble.
- C. The idea of revamping all the regulations in five parts is also disheartening. While I certainly believe that there is much that could be improved in the regulations and I would hope that

some things would become easier as we try to focus more and more on patient centered care and residents rights, the Administrator and I are without any kind of corporate backing as are many stand alone facilities and the full responsibility of implementation, updating policies, educating staff and families falls on us. The more we are pulled away to develop implementation plans, the less we can focus on what is happening inside the facility. I am blessed with a wonderful administrator who is incredibly involved and hands on, genuinely loving her patient and staff interactions , especially since the everyday battle to find enough staff consumes my life almost 24/7. Whenever new regs come at us, there is a lack of clarity about some issues and a need for guidance which can be slow in coming that complicates the process as well. While I know none of this is happening in the next few months, I fear that COVID is coming again no matter how careful we are and this will again consume our lives and our staff.

I have loved being a long term care leader and I have always taken pride in my staff, my facility and the care we provide. Our team is exhausted and disheartened by the negative publicity about nursing homes, the hospitals telling people to go home and not even testing people for covid, the anger we face from patients and families every time we have to close the doors to visitation because we have had an exposure. The news NEVER highlights good facilities trying to provide great care throughout this pandemic time and going forward. We have ALL hemorrhaged money throughout the pandemic, making it even tougher to have the resources to find staff. We want to provide great care, we want to attract the best and we want to partner with the Department of Health to do the best for the Seniors of Pennsylvania who have contributed so much to our society over many years!

Respectfully,



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*Director of Nursing*

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