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## AN EMBASSY HEALTHCARE COMMUNITY

August 24, 2021

Department of Health 625 Forster Street Harrisburg, PA 171720 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 Hermitage Nursing and Rehabilitation. Our nursing facility is a 105-bed facility located in Mercer County, PA. We employ 95 employees and provide services to 85+ residents. As the Administrator, I can attest to our facilities commitment to providing high quality care and prioritizing the needs of the residents we serve each 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 27 to 4.1 hours for each resident and excluding other direct care provided by essential caregivers.

Our facility, like most healthcare facilities face a daily staffing challenge. Despite daily intensive recruitment efforts, large sign on bonus's, referral bonus's, shift pick up bonus's, and enhanced starting wages we continue to struggle daily to recruit and retain caregivers for our residents. It is a daily focus just to make sure we have enough staff to meet the current minimum direct care hour standards. We are faced with intense competition from other workforce markets. These competitors are able to increase their prices to offset the additional labor expense where we are not able to do so. We have received no additional Medicaid Funding in 7 years to help us in this regard. Staffing Agencies have created huge challenges to our labor by being able to offer significantly higher wages to recruit which

are then passed on to already financially challenged facilities. Increasing the minimum hours in this current labor market will only exacerbate the current labor challenges of my facility.

Every day our facility utilizes a team based approach to provide care and meet the needs of our residents. Many people come together to help serve our residents. Many of these individuals are assisting significantly in the daily care of residents, but do not meet the "direct care" requirement. Therapists, dieticians, and activity staff all contribute significantly to the care of residents daily yet they do not count in the required staffing minimum. I strongly consider allowing these hours to count towards any increased staffing hour standard.

Increasing the staffing levels of a facility will not guarantee improved quality outcomes. Our facility utilizes acuity driven assessments to determine the appropriate care level needs of our residents and to help us determine the types of residents we admit. We then adjust and move resources accordingly to assist our residents. We utilize our facility assessment to help us determine staffing and care needs of our residents on an ongoing basis. Our facility is currently a 5 -star with our Quality Measures and we do not operate anywhere near a 4.1 for daily staffing. This is a perfect example that quality care is possible with lower quantities of staff when facilities focus on how to allocate the resources they have effectively to meet resident needs. Our facility chooses to focus on quality over quantity. In my experience as an administrator, the times I have had more personnel have not always provided quality outcomes. In many instances, less is accomplished with more people.

In my 20+ years in this industry, these are by far the most challenging. Yet, we continue to work to provide valuable care and services to our residents. Increasing the minimum staffing standard during a time as challenging as now with labor, will do nothing to improve resident quality care and outcomes. In fact, I fear it will result only in potential negative outcomes for our residents.

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 in a manner that will address the concerns raised in our comments.

Sincerely,

Clinton Ansell Administrator