



Lori Gutierrez
Deputy Director, Office of Policy
625 Forest Street, Room 814
Health and Welfare Building
Harrisburg, PA. 17120

Dear Ms. Gutierrez,

Thank you for taking the time to consider my concerns as they relate to the proposed staffing changes to Pennsylvania nursing facilities in regard to the minimum staffing requirement. As a licensed skilled nursing home administrator who began my career as a certified nursing assistant in 1993 and continued my career in skilled nursing for over 20 years as a Speech-Language Pathologist before becoming a skilled nursing administrator, I have personally felt and experienced the many changes in the nursing home industry over the years. I am fearful for the future of the industry that I have loved for the better part of 3 decades.

The need for appropriate staffing in a nursing facility is key. There is no argument to that point. My concern is in the fact that requiring a specific number of nursing hours per patient day will not necessarily equate to better quality in the care that is provided. I have worked in many different facilities with varying patient acuity and varying facility layouts which require a staffing model unique to that facility and that population. The federal government recognizes this need for individual assessment of the facility and requires facility assessments and care plans to direct staffing levels instead of offering a "one-size-fits-all" standard of nursing hours per patient day. Nursing hours per patient day are very important, but they are only one piece of an intricate puzzle.

If facilities like mine are required to meet the proposed number of nursing hours per patient day, there will be significant losses felt by our residents and their families. The resources needed to staff nursing at the proposed level will result in the loss of vital music and art therapy staffing and programming that has proven to be life-giving and immensely valuable in the daily care of the population we care for. Dining programs that have been innovative along with interactive entertainment programs and spiritual services that have required ancillary staffing outside of that nursing number will suffer. Nursing hours are VERY important, but we all agree that they are only one piece of what goes into caring for a whole person. It is important to recognize that the services provided by physical therapists, occupational therapists, speech therapists, recreational therapists, music and art therapists, social services, dining, activities, spiritual services, housekeeping and laundry services are not taken into account when calculating nursing hours per patient day and without them, the care is one-dimensional. Placing a requirement on nursing hours alone does not take into account the resident as a whole human being.

Providing quality care in the current climate has been the greatest challenge of my career as we work in a system that has frozen Medicaid reimbursement for many years. The Medicare PDPM system is evolving and will likely reduce reimbursement to skilled nursing facilities and insurance companies continue to incentivize in ways to deny access to care or reduce payments to our facilities. In the economic area where our building is located, private pay rates are not an affordable option for the vast majority of the population. We are continually required to provide more and more care with less and less reimbursement. It is not sustainable and more and more nursing facilities will be forced to close as a result. The population we serve deserves so much more.

I believe in what we do every day to serve this beautiful and vulnerable population and I welcome the opportunity to further discuss the proposed change in nursing hours required or any other issues related to my discussion in this letter. Please feel free to respond or contact me directly at 724-869-6310.

Sincerely,

Rachelle Arnold, M.A., CCC-SLP, NHA
Skilled Nursing Administrator