



**Care Pavilion Nursing &  
Rehabilitation Center**  
A Bedrock Care Facility



August 16, 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 Care Pavilion Nursing and Rehab. Our nursing facility is a 396-bed facility located in Philadelphia Pennsylvania. We employ 250 employees and provide services currently to 290 residents. As the Facility 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.

Our main goal at Care Pavilion is providing the best possible care for our residents and achieving the highest possible outcomes. That being said increasing the PPD to 4.1 has two major concerns.

1. Staff accessibility.
2. Sustainability.

1. In these trying times especially due to the pandemic it is a daily struggle to staff the facility. It is even more of a struggle in the nursing department, and the struggle is getting harder and harder as less people are joining the Nursing field then the amount of people leaving. This is causing the nursing field to shrink which is placing enormous stress on staffing the facility.

At Care Pavilion we have a very strong recruitment and retention process and we are one of the only facility's not using agency. That being said even we are struggling constantly and facing challenges recruiting and retaining staff, and an increase in the minimum requirement will compound all these challenges.

Perhaps all our other staff can be counted towards the staffing requirement. We have essential care workers like Physical therapists, occupational therapists, dieticians, wound care nurses, activities directors, that all provide patient care which are not counted in the current PPD.



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At Care Pavilion as stated earlier we strive for the highest possible clinical outcomes. In doing so we have implemented numerous processes to ensure that. Such as our quality measure initiative, resident satisfaction survey amongst other initiatives. Being that there are limited staffing resources we focus on obtaining the most from our staff. Setting a staffing minimum too high will not guarantee improved care, and those resources should be utilized in an efficient and effective manner to ensure the health and safety of our residents.

We also ensure adequate care and staffing on a daily basis, and we manage staffing based on resident assessments and needs. For example, we calculate resident acuity, types of diseases, physical and cognitive disabilities, increase in admissions, discharges or special events. There are processes in place that we use to determine the types and level of staffing needed to provide the care and services to the residents residing in your nursing facility. Staffing needs are unique to each nursing facility – it is not a one size fits all. More staff does not necessarily equal better outcomes.

2. Assuming all the aforementioned can be answered and addressed. In order for facilities to operate successfully and provide the best possible care, the facility has to be able to be financially stable. Is there going to be increases in Medicaid funding to cover a higher PPD?

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,

Isaac Cohen, LNHA  
Administrator