



August 26, 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 who work at Nightingale Nursing and Rehab Center. As the Chief Operating Officer, I oversee 139 nursing home beds operating in Erie, PA. We have approximately 200 employees. Our organization is committed to providing high quality care and prioritizing the needs of the residents we serve each and every day.

After reviewing your proposed regulation, we have concerns regarding the mandatory increase of the minimum number of hours of general nursing care from 2.7 to 4.1 hours for each resident, which excludes other direct care provided by essential caregivers.

Since we took over the facility on June 1, 2021 we have been looking to hire direct care staff, even with offering higher than market salaries and benefits, we can have ads out for RN's and LPN's and not have a single applicant for days at a time. We have given job offers, recruitment bonuses, sign on bonuses and even with all that less than 50% of the individuals who have actually accepted positions even show up to work on day 1. We strive for a 3.6 HPPD but there are days where we are battling barriers to just get us to the 2.7 HPPD.

There are numerous barriers to onboarding new staff which all of my fellow Nursing Home providers face. We have the unemployment being handed out which is incentivizing individuals to remain out of the workforce. The Medicaid rate has not been increased meaningfully in many years preventing the industry from being able to offer wages which would compete with other settings. There is the massive number of people who burned out with the stress of Covid19 fatigue. Facilities are relying on agency staff which cost more and decreases the quality of care provided.

Although some of these issues are very hard to combat, there are some common sense solutions which could be implemented to enable a 4.1 staffing ratio to be achievable. Medicaid rates need to be increased so hard hit facilities can pay staff the well-deserved wages for the difficult jobs which they perform and still be able to stay in business. There is no way the

industry can handle an unfunded mandate without jeopardizing resident care and buildings going out of business.

We have 3 hospitals in our area and 21 nursing homes, the nursing homes need to be able to compete for staff. Incentivize individuals to join the workforce in healthcare related fields- be it through bonuses to work, rather than sitting at home, or programs to pay for education. We care for the most vulnerable individuals, who have all given society their best years, we owe it to them to provide the best care possible.

We have been doing our part with offering exciting employee benefits to attempt to keep the staff that we have employed. We have spent a lot of money on recruiting efforts, which have only paid off minimally. We need help to make this happen.

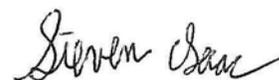
Unfortunately, as well intentioned as they are, the vaccine mandates from the PA Department of Health and the federal government, the way they are currently proposed, will only cause further harm to the nursing home industry staffing crisis. Although I agree that a mandate should be put in place, it should be, as other states have initiated, for ALL healthcare workers and not targeted to nursing homes. Anyone who has a fear of receiving the vaccine will just pick themselves up and go work in another setting and we have heard staff say that they plan on doing just that.

As currently proposed, the 4.1 ratio only includes a portion of direct care staff. Only Nurses and Aides who provide direct care are included. This discounts countless other professionals who provide direct care to our residents on a daily basis. We have Physical therapists, Occupational therapists, Speech Language pathologists, Dietitians, Activity professionals, Nurse practitioners who all interact with our residents in a direct care manner on a daily basis.

There is definitely a pathway to raise the minimum staffing levels but we would appreciate it being in a collaborative manner with those affected by this the most. There need to be common sense adjustments to the ruling to enable providers to abide by the minimum staffing ratio.

Thank you for your time in reviewing and considering our comments. We are hopeful that the Department of Health will address our concerns and work with providers and staff to ensure continued access to long-term care services in Pennsylvania. We are hopeful that the Department of Health 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 "Steven Isaac".

Steven Isaac, LNHA
Chief Operating Officer