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Aug 28 2021

Independent Regulatory
Review Commission

From: [Chris Wright](#)
To: [DH_LTCRegs](#)
Subject: [External] DOH Proposed Nursing Home Regulations
Date: Monday, August 23, 2021 9:28:32 AM

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Good morning. Please find below my comments regarding the latest PA DOH Proposed Nursing Home Regulations, specifically the proposed increase in staffing hours to 4.1 nursing hours per patient date. The following are just a few notations that summarize why I feel that this proposal will be more than crippling to Pennsylvania's senior population.

1. It should be noted that an increase in hours does not equate to an increase in quality. For example, quality facilities, like ours, staff according to census and acuity. We have averaged between 3.2 to 3.7 hours per day for many years and we have supplemented care needs at peak times, such as dining and activities, with trained ancillary staff and/or volunteers. Organizations that suffer providing quality care will continue to look for loop holes in order to simply meet the requirement and quality will not increase. Furthermore, many of the already existing quality facilities will be forced to evaluate their business strategies and likely reduce capacities or potentially close, thus eliminating more of the quality systems out of the marketplace and leaving only those poorer facilities that work the system to provide care.
2. We are currently in the most significant staffing crisis in the history of senior living organizations. Even before the pandemic, recruiting and retaining excellent staff was challenging. The pandemic has further resulted in a significant decline in staff. Our organization is down over 20% of our staff base. This is not going to correct itself as the pandemic wains as we can't loose sight that the largest workforce in US history is retiring. A smaller workforce, coupled with the lack of financial resources is making it impossible to recruit new staff into our industry. An increase in hours will only compound this ongoing crisis.
3. Timing, any changes of this magnitude need time to plan. Establishing an effective date of immediately is only setting organizations up for failure, especially considering the current workforce shortages.

In short, this change will likely reduce and eliminate quality providers from the marketplace due to their inability to find staff and their inability to financial afford/sustain these staffing levels considering no Medicaid increases in over 7 years and it will only incentivize non quality providers to continue to look for ways to take shortcuts and make cuts that ultimately sacrifice quality resident care.

I would recommend that the Department of Health look for more effective ways to improve quality in nursing homes. Ways that provoke us all to think outside the box and be innovative. Establish a system that helps providers improve their quality versus live in fear of penalties and repercussion. Consider developing more holistic standards that look at and encourage providers to utilize all resources available to them in order to create an excellent home for their seniors and give some

form of credit to those providers who are doing this already. For example: take into consideration the time spent by ancillary departments that are integral to a residents life in a nursing home, the volunteers who help in so many ways, the nursing administrative personnel, most of which are RN's, who are splitting time between the floor and the daily compliance tasks.

Black and White has never been a quality solution to any problem, using the tools that God granted us to come up with creative solutions that can be widely adopted has always served us well. Please reconsider this Black and White approach for the sake of all Pennsylvania's Seniors and those of us who take tremendous pride in providing a place they can call HOME.

Chris

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