



**From:** [David Griffith](#)  
**To:** [DH\\_LTCRegs](#)  
**Subject:** [External] Rulemaking 10-221 (Long-Term Care Facilities, Proposed Rulemaking 1)  
**Date:** Monday, August 30, 2021 3:47:24 PM  
**Attachments:** [sigimg1](#)  
[Comments on SNF regulations - 1st package.pdf](#)

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Dear Deputy Director Gutierrez,

On behalf of the LGBT Elder Initiative, I am writing to state our support for the Department of Health's proposed updates to the skilled nursing facility regulations, specifically with regards to the 4.1 hours of direct resident care per day.

As advocates on behalf of older adults for over a decade, we know firsthand how this reform could directly improve the quality of life of innumerable older Pennsylvanians. We previously mailed a letter on February 5, 2021 to the Department of Health urging for the increase from 2.7 to 4.1 hours of care per resident per day. We are appreciative that the Department of Health is continuing to listen to the experiences of impacted nursing home residents and organizations that advocate for older adults.

Since the 1990's, nursing home staffing regulations have remained unchanged. However, Pennsylvania *has* changed. Due to the aging of the Baby Boomer generation, more adults are relying on the long-term care system than ever. In the next decade, Pennsylvanians age 60 and older will comprise approximately 30% of the state's population. 80,000 older adults currently reside in long-term care settings where the reliance is on staff to provide direct support regarding their medical, social, and emotional needs. (Pennsylvania Health Care Association) Adequate staffing is not only crucial to ensuring all residents have their needs met – it's also necessary to minimize risks of infections, falls, malnutrition, bedsores, and more.

The COVID-19 pandemic only exacerbated existing issues caused by lack of staffing and further highlighted the importance of immediate legislative reform. The unfortunate reality is that 48% of deaths from COVID-19 in Pennsylvania were people in long-term care facilities (Pennsylvania Department of Health). Racial health disparities in nursing homes were especially evident. Black and Hispanic individuals were five times more likely to die of COVID-19 than individuals who are White (Kaiser Health Network). Overall, the pandemic made it more apparent that current regulations are inadequate to care for and preserve resident's lives. It is imperative that these regulations become enacted so that older

Pennsylvanians can successfully receive optimal quality of care. These updates are also necessary to ensure that policies are effectively enforced regarding the prevention of virus transmission. Increasing the required direct care hours with residents from 2.7 to 4.1 hours per day is paramount to ensure that the most vulnerable Pennsylvanians are protected and receive exceptional, person-centered care. It's no exaggeration to say that these regulatory updates can save lives.

Moreover, we believe it is important to highlight the unique needs of older Pennsylvanians who face additional disparities in skilled nursing facilities. Since LGBTQ older adults are more likely to be single and not have children, they are more likely to rely on institutional forms of care as they age. Older adults who are lesbian, gay, bisexual, transgender, and queer (LGBTQ) have personally vocalized their grievances to us regarding personal safety and quality of care in long-term care settings. Research by AARP shows that many older LGBTQ individuals have concerns regarding neglect, abuse, harassment, and refusal to access services in these settings. The need for person-centered, culturally competent care is crucial.

We hope that additional regulatory packages will address the need for greater LGBTQ inclusivity in facilities and that cultural sensitivity/competency trainings become a requirement for nursing facility administrators and front-line staff. This mirrors research conducted by AARP, where the vast majority of LGBTQ older adults reported that they would feel more comfortable having long-term care providers who are trained for LGBT patient needs. We also hope that additional trainings regarding racial equity and implicit bias be mandated as part of the staff development trainings outlined in Section 201.20 of the regulations. Lastly, we believe that the admissions policy under Section 201.24 should be updated to prohibit discrimination against residents (including the admission of residents) on the basis of their sexual orientation, gender identity, or gender expression. These steps – along with increasing the staff minimum – will protect the most vulnerable older adults in Pennsylvania.

We are thankful for your consideration of the needs of vulnerable nursing home residents as your department updates these regulations. We are grateful that the Department of Health understands the importance of centering the experiences and needs of nursing home residents, starting with the requirement of a 4.1 hour staffing minimum. As always, we are happy to make ourselves available for any assistance we can provide.

Sincerely,

**David Griffith**

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Pronouns: He/Him/His



<http://www.lgbtelderinitiative.org>

