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Independent Regulatory
Review Commission

From: [Michelle Lenox](#)
To: [DH_LTCRegs](#)
Subject: [External] Rulemaking 10-221 Long-Term Care Facilities, Proposed Rulemaking 1) 28 PA Code Chapters 201-202 and 211
Date: Wednesday, September 1, 2021 8:58:36 AM

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To whom it may concern

First, a thank you to the Department of Health for undertaking this effort at review and reform.

I fully support the 4.1 hour staffing minimum and look forward to seeing additional staffing standards developed. A 2016 study (Harrington, et al) on the need for increased minimum staffing standards found that “a number of organizations have endorsed the minimum of 4.1 hprd standard, have recommended that at least 30% of total nursing care hours should be provided by licensed nurses, and have recommended that RNs should be on duty for 24 hours per day. These organizations include the American Nurses Association, the Coalition of Geriatric Nursing Organizations, and the National Consumer Voice for Quality Long-Term Care.”

It is always easier to ignore the harsh reality that these regulations impact not only our loved ones now, as they live in such facilities, but our own lives, in that far future, of which we do not know for certain. These proposed changes may appear abstract to those in a position to institute these reforms, but make no mistake, regardless of your position, wealth or profession, you will be directly impacted if there is not an increase in direct care staffing hours from 2.7 hours per resident/per day to 4.1 hours. This minimum is based on research and a consensus among experts that 4.1 hours is the minimum needed to provide adequate care and it has been the recommended standard across the nation for the past twenty years. We, writing these letters, reviewing these comments, and voting for or against these regulations, we are all currently fortunate enough to not have to experience how little care and support for daily living, let alone medical care, can be given on the current staffing rate, but that will not always be the case.

It is clear that comprehensive reform is needed and long overdue. Based on my family's experience with both my mother, currently residing at the Bridges of Warwick facility in Bucks County, PA, and my father, whose death in 2019 is directly attributable to medical error due to low staffing and lack of care coordination at a long-term care/rehabilitation facility, that better care can only come when staffing levels are adequate and staff are both well-trained and adequately compensated. This is a challenging space, driven by profit as much as care, but even still, I fully support the 4.1 hour staffing minimum and look forward to seeing additional staffing standards developed. This is a problem that must be addressed for the lives of our loved ones now, and if that is not motivation enough, for when you might find yourself sitting in a room waiting for someone to answer your own call buzzer.

Thank you,

Michelle Lenox

