



June 23, 2022

Independent Regulatory Review Commission 333 Market Street 14th Floor Harrisburg, PA 17101

RE: Open Comments for Proposed Rulemaking part 4, Long-Term Care Facilities

Dear IRRC and Assigned Analysts,

For the last 104 years, Wesbury has been committed to serving our aging population by providing high quality care in the many care levels and services that we provide. Wesbury stands behind our Mission and Vision; which incorporates our core values of ministry, commitment, health, community, quality, respect, stewardship and serve as the center of all of decision making.

Throughout the proposed changes and in summary, the Department of Health states that many of the proposed changes are to "eliminate provisions that are duplicative and conflict with Federal requirements"; however they plan to impose a substantial increase in the direct care hours that are required per day to provide resident care. This proposal not only specifies the number of direct care hours required, but it also delineates the type of nursing personnel that will be required to achieve these hours.

It is understood that there is a direct correlation between the number of direct care hours provided and the level of quality that is achieved and that is not disputed. Many Long-Term Care Facilities that are able to achieve high quality care already hold themselves to a higher standard than the prior requirement of 2.7 direct care hours per Resident. Our facility strived to achieve 3.42 direct care hours per Resident prior to the COVID-19 pandemic. As we navigated through the pandemic and adjusting policies and procedures to maintain compliance, we just like many (if not all) healthcare facilities, began to struggle maintaining our workforce. In order to maintain the quality of care that we expect it was essential for our organization to responsibly decrease our census to coincide with our available workforce. By decreasing our census by greater than 25% it has had significant financial implications and has caused us to have an inability to accept admissions from local hospitals.

It is with much concern that we ask that you look into alternative methods to improving the quality of care provided by Long-Term Care Facilities. By requiring this significant increase it could drastically impact the number of operating beds in the state and / or cause the closure of facilities that are committed to providing high quality care. Should the Commission agree with the proposals made by the Department of Health we ask that you also take into account the funding provided by the state and the personnel that are counted in those direct care hours to achieve the proposed number of 4.1.(ie: account for licensed therapists providing direct care, etc.)

Respectfully Submitted,

Alishia Stevenson, RN, NHA, VP of Compliance, Risk & Quality

rotuleral terroused RN, NHA-



