



A Voice for Nurses. A Vision for Healthcare.



OAKLAND
155 Grand Avenue
Oakland CA 94612
phone: 800-504-7859
fax: 510-663-1625

SACRAMENTO
Government Relations
770 L Street
Suite 1480
Sacramento CA 95814
phone: 916-446-5019
fax: 916-446-3880

February 9, 2018

Scott Vivona, Assistant Deputy Director, Center for Healthcare Quality
Chelsea Driscoll, Chief, Policy and Enforcement Branch, Licensing and Certification Program
California Department of Public Health
1615 Capitol Avenue, MS 3201
Sacramento, CA 95814-5015
VIA EMAIL AND U.S MAIL

RE: SB 97 Waiver Minutes of January 22, 2018 Meeting, Comments of the California Nurses Association/National Nurses United (CNA)

The minutes of the January 22, 2018 meeting state that CDPH's proposed changes to the November guidelines include a requirement "that facilities also include a patient assessment for each resident in the plan to address resident needs."

The California Nurses Association/National Nurses United (CNA) strongly supports the submission to CDPH of patient assessment information for each resident along with the facility's plan to meet the assessed needs of existing patients.

The minutes indicate that the California Association of Health Facilities (CAHF) objected to this requirement and stated that it would be impossible for facilities to conduct patient assessments for each patient in the facility. As noted below, existing law requires that patient assessments be completed for every patient upon admission and then updated quarterly and more often if there is a change in the patient's condition. CAHF's statement at the January 22nd meeting is a frightening admission of inadequacies if these requirements are not currently being met.

In relevant part, 22 CCR Section 72311 (a) states:

- (a) Nursing service shall include, but not be limited to, the following:
 - (1) Planning of patient care, which shall include at least the following:
 - (A) *Identification of care needs based upon an initial written and continuing assessment of the patient's needs with input, as necessary, from health professionals involved in the care of the patient. Initial assessments shall commence at the time of admission of the patient and be completed within seven days after admission.* (emphasis added)

(B) Development of an individual, written patient care plan which indicates the care to be given, the objectives to be accomplished and the professional discipline responsible for each element of care. Objectives shall be measurable and time-limited.

(C) *Reviewing, evaluating and updating of the patient care plan as necessary by the nursing staff and other professional personnel involved in the care of the patient at least quarterly, and more often if there is a change in the patient's condition.* (emphasis added)

(2) Implementing of each patient's care plan according to the methods indicated. Each patient's care shall be based on this plan.

CNA believes that a facility requesting a waiver of the minimum staffing requirements under SB 97 should include a patient assessment for each resident in the plan to address resident needs. A patient assessment is already a requirement for each patient and describing how these needs will be met with staffing under the requested waiver should not impose an unreasonable burden on any facility.

Thank you for considering these comments.

Sincerely,

A handwritten signature in blue ink, consisting of a stylized initial 'S' followed by a long horizontal line.

Saskia Kim, Regulatory Policy Specialist
California Nurses Association/National Nurses United