# California Department of Public Health Center for Health Care Quality

3.5 SNF Staffing Requirements
July 10, 2018



# Today's Agenda

- Introductions
- Recap of Stakeholder Process
- Updates of emergency regulations and final adoption
- Patient needs waiver discussion



#### Introductions

Kristin Vandersluis - Facilitator



### Department Representatives

Scott Vivona, Assistant Deputy Director Center for Health Care Quality

Chelsea Driscoll, Policy and Enforcement Branch Chief



#### 3.5 Stakeholder Process

 Began a series of meetings in August 2017 to discuss implementation of SB 97

 Posted all Meeting Minutes and Written Comments



# **Emergency Regulation Timeline**

 Emergency regulations and workforce shortage waiver AFL went into effect July 1, 2018



### **Final Regulations**

- Two stakeholder meetings scheduled to discuss patient needs waiver
  - July 10, 2018
  - July 24, 2018

Final adoption: January 2019



# Patient Needs Waiver Requirements

Health and Safety Code Section 1276.65, subdivision (c)(2) requires the Department to develop a waiver to meet individual patient needs while maintaining the 3.5 direct care service hours and/or the 2.4 CNA hours



# Existing Patient Needs Language

 The existing language for the patient needs waiver uses the program flex process

 Specifically authorized in Title 22 section 72329.2 and 72213



#### **Patient Needs Waiver**

 Is there a need to have a more specific process than the program flex?

 Are there alternative processes that CDPH should consider?



#### Patient Needs Waiver Cont.

 How frequently should the Department reassess eligibility for the patient needs waiver?

 Should there be a limit on the number of waiver renewals?



# Special Patient Populations: Subacute

- Subacute patients are medically fragile and require special services
- Subacute care units employ a higher level of licensed staff, specified in Title 22 section 51215.5
  - Must provide a minimum 3.8 licensed nursing hours and 2.0 CNA hours per patient day



#### **Subacute Consideration**

 Should there be different rules for subacute units related to the patient needs waiver?

 Because subacute facilities use fewer than 2.4 CNAs, should these facilities have specialized consideration for the patient needs waiver?



# Special patient populations: Small House SNFs

• Small house SNFs (SHSNFs), defined in HSC 1323.5 (c)(2), are facilities that provide skilled nursing and supportive care in small, homelike residential settings to patients whose primary need is for the availability of skilled nursing care on an extended basis.



#### **SHSNFs Direct Care Staff**

- Direct care staff includes
  - Registered nurses (RNs)
  - Licensed vocational nurses (LVNs)
  - Licensed psychiatric technicians (PTs)
  - Certified nurse assistants (CNAs) employed as versatile workers (VWs)
- Versatile Workers are CNAs providing residents with both direct care and non-direct care

#### **SHSNFs Consideration**

 SHSNFs have the option to request a waiver of any requirement as part of their pilot application



#### **SHSNFs Consideration Cont.**

 Should special consideration be given to SHSNFs applying for a patient needs waiver?



# **Final Adoption- Option 1**

Receive comments by end of July 2018

 Department will make changes early August and move documents through the approval process

The regulations will post for public comment in mid September

# **Final Adoption- Option 1**

 If no changes are required based on public comment the effective date of the final regulations is January 1, 2019



# Final Adoption- Option 2

 If there are substantial changes made to the regulations based on the public comment, the Department must hold another comment period of 15 days

 The 15 day comment period will push the effective date of the regulations to April 1, 2019 Next stakeholder meeting on July 24, 2018

 Please submit comments or questions to the CDPH\_CHCQStakeholderForum email address
 CHCQStakeholderForum@cdph.ca.gov

