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## **OLR Bill Analysis**

### **sSB 1079**

#### ***AN ACT CONCERNING NURSING HOME FACILITY MINIMUM STAFFING LEVELS.***

#### **SUMMARY**

This bill requires chronic or convalescent nursing homes (CCNH), beginning October 1, 2019, to maintain a daily minimum per-resident per-day staffing ratio of (1) 2.3 hours of direct care provided by registered nurse's aides and (2) 0.7 hours of medical care provided by licensed nursing personnel.

Current Department of Public Health (DPH) regulations require CCNHs to maintain aggregated licensed nurse and nurse's aide staffing levels of at least 1.9 hours of direct care per resident per day (see BACKGROUND).

Under the bill, DPH must require CCNHs to (1) maintain the bill's minimum staffing ratio, (2) maintain and post daily records on staff schedules and availability, and (3) file quarterly compliance reports with DPH. The department must adopt or amend regulations to implement the staffing ratio and related requirements.

The bill allows DPH to randomly audit a nursing home for compliance with the bill's requirements and take disciplinary action against the facility for failure to comply (see BACKGROUND).

The bill also requires the Department of Social Services (DSS) to adjust the Medicaid rate for nursing homes that provide satisfactory evidence to the DSS commissioner that the facility incurred increased costs to comply with the staffing ratio and related requirements under the bill. The rate adjustment must (1) be within available appropriations and (2) cover costs incurred beginning October 1, 2019.

EFFECTIVE DATE: Upon passage

### **DAILY MINIMUM STAFFING RATIO**

The bill establishes a daily minimum staffing ratio for CCNHs of (1) 2.3 hours of direct care provided by registered nurse's aides and (2) 0.7 hours of medical care provided by licensed nursing personnel. The daily minimum staffing ratio does not include break, vacation, sick, personal, training, education, or other time that is not spent on direct care or medical care provided to a nursing home facility resident.

Under the bill, direct care is hands-on care provided to a nursing home facility resident by a registered nurse's aide, including providing assistance with feeding, bathing, toileting, dressing, lifting, or moving residents. Direct care does not include physical or occupational therapy, medication administration, food preparation, housekeeping, or laundry services.

### **DAILY RECORDS AND REPORTING**

Under the bill, DPH must require each CCNH to maintain a daily record of:

1. the number of facility residents,
2. the number of registered nurse's aides scheduled and available to provide direct care,
3. the number of licensed nursing personnel scheduled and available to provide medical care, and
4. whether a sufficient number of registered nurse's aides and licensed nursing personnel are scheduled and available to comply with the bill's requirements.

The bill also requires CCNHs to file quarterly reports with DPH on the number and percentage of days in the preceding quarter that the facility has failed to comply with the bill's requirements and reasons for this failure. Quarterly reports are due by the 15<sup>th</sup> of January, April, July, and October of each year.

The bill additionally requires DPH to require CCNHs to post their

daily records in a conspicuous place in the facility along with a copy of this bill and information about how to report violations to DPH and the Office of the Long-Term Care Ombudsman.

## REGULATIONS

The bill requires DPH to adopt or amend regulations to implement the bill, including apportioning daily minimum staffing ratios (from 7:00 a.m. to 9:00 p.m. and 9:00 p.m. to 7:00 a.m.). Under current regulation, minimum daily staffing ratios are apportioned in this way (see BACKGROUND). The bill allows the public health commissioner to adopt policies and procedures to implement the bill's requirements before adopting or amending regulations as long as the policies and procedures are posted on the DPH website and the e-Regulations system at least 30 days before adoption.

## BACKGROUND

### *Related Bill*

HB 7099 (File 30), favorably reported by the Aging Committee, requires CCNH to maintain a minimum nursing staff ratio of at least three hours of direct care per resident per day.

### *Current Minimum Nurse Staffing Standards for Nursing Homes*

DPH licenses nursing homes at two levels of care: (1) CCNHs, which provide skilled nursing care, and (2) rest homes with nursing supervision (RHNS), which provide intermediate care.

Minimum staffing requirements for CCNHs and RHNS are set by regulation and depend on the time of day as shown in the table below (Conn. Agencies Reg., § 19-13-D8t).

**Table 1: Minimum Nurse Staffing Requirements for Nursing Homes**

<i>Direct Care Personnel</i>	<i>CCNH</i>		<i>RHNS</i>	
	7 a.m. to 9 p.m.	9 p.m. to 7 a.m.	7 a.m. to 9 p.m.	9 p.m. to 7 a.m.
Licensed Nursing Personnel	0.47 hours per patient (hpp) (28 min.)	0.17 hpp (10 min.)	0.23 hpp (14 min.)	0.08 hpp (5 min.)
Total Nurses and Nurse Aide	1.40 hpp (1 hr. 24 min)	0.50 hpp (30 min.)	0.70 hpp (42 min.)	0.17 hpp (10 min.)

Personnel				
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***Disciplinary Action***

By law, if the DPH commissioner finds that a health care facility has failed to comply with laws related to health care institutions, he may do any of the following after a fair hearing:

1. revoke or suspend a license or certificate;
2. censure or issue a letter of reprimand to a licensee or certificate holder;
3. place a licensee or certificate holder on probationary status and require regular reports;
4. issue a letter compelling compliance with laws or DPH regulations; or
5. impose a directed plan of correction (CGS § 19a-494).

**COMMITTEE ACTION**

Human Services Committee

Joint Favorable Substitute

Yea 19 Nay 0 (03/26/2019)