

June 18, 2024 Board Room 4 10:00 a.m.

Call to Order - Lisa Kirby, NHA, Board Vice-Chair

- Welcome and Introductions
- Mission of the Board
- Emergency Egress Instructions

Approval of Minutes (p. 4-11)

Board Meeting - March 12, 2024

Ordering and Approval of Agenda

Public Comment

The Board will receive public comment on agenda items at this time. The Board will not receive comment on any pending regulation process for which a public comment period has closed or any pending or closed complaint or disciplinary matter.

Agency Report - Arne Owens, Director

Staff Reports

- Executive Director's Report Corie E. Tillman Wolf, JD, Executive Director
- Discipline Report Melanie Pagano, JD, Deputy Executive Director
- Licensing Report Sarah Georgen, Licensing and Operations Supervisor

Board Counsel Report - Brent Saunders, Senior Assistant Attorney General

Committee and Board Member Reports

National Association of Long Term Care Administrator Boards (NAB) Annual Meeting Report –
 Lisa Kirby, NHA

Legislative and Regulatory Report (p. 13-16)

Report on Status of Regulatory Actions - Matt Novak, Policy and Economic Analyst

 Temporary Authorization to Practice for Out-of-State Licensees - Addition of Assisted Living Facilities (HB 511) - Effective July 1, 2024 - Erin Barrett, JD, Director of Legislative and Regulatory Affairs, Corie E. Tillman Wolf

Board Discussion and Action (p. 18-34)

 Consideration of Petition for Rulemaking (Rosenblatt) - Request for Alteration of Limitation on Bed Capacity for Assisted Living Facility Administrator-in-Training Programs or Internships -Matt Novak

Board Member Recognition

Next Meeting - September 17, 2024

Business Meeting Adjournment

This information is in <u>DRAFT</u> form and is subject to change. The official agenda and packet will be approved by the public body at the meeting and will be available to the public pursuant to the Code of Virginia.

Approval of Minutes

Draft Minutes Full Board Meeting



March 12, 2024

Board of Long-Term Care Administrators

The Virginia Board of Long-Term Care Administrators convened for a full board meeting on Tuesday, March 12, 2024, at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, 2nd Floor, Board Room #1, Henrico, Virginia.

BOARD MEMBERS PRESENT:

Jenny Inker, PhD, ALFA, Chair Lisa Kirby, NHA, Vice-Chair Kimberly Brathwaite, ALFA Pamela Dukes, MBA, Citizen Member Ashley Jackson, NHA, MBA Ann Williams, EdD, Citizen Member

BOARD MEMBERS NOT PRESENT:

Lynn Campbell, Citizen Member Latonya Hughes, PhD, RN, NHA

DHP STAFF PRESENT FOR ALL OR PART OF THE MEETING:

Erin Barrett, JD, Director of Legislative and Regulatory Affairs
Sarah Georgen, Licensing and Operations Supervisor
James Jenkins, RN, Agency Chief Deputy Director
Arne W. Owens, Agency Director
Matt Novak, Policy and Economic Analyst
Melanie Pagano, JD, Deputy Executive Director
Sarah Rogers, DPA, Director, Enforcement Division
M. Brent Saunders, Senior Assistant Attorney General, Board Counsel
Corie E. Tillman Wolf, JD, Executive Director
Heather Wright, Senior Licensing Program Coordinator

OTHER GUESTS PRESENT

Ali Faruk Glynis Boyd Hughes, Virginia Assisted Living Association

CALL TO ORDER

Dr. Inker called the meeting to order at 10:01 a.m. and asked the Board members and staff to introduce themselves.

With five board members present at the meeting, a quorum was established.

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Dr. Inker read the mission of the Board, which is also the mission of the Department of Health Professions.

Dr. Inker reminded the Board members and audience about microphones, computer agenda materials, and breaks.

Ms. Dukes arrived at 10:03 a.m. establishing a quorum with six board members.

Ms. Tillman Wolf then read the emergency egress instructions.

APPROVAL OF MINUTES

Dr. Inker opened the floor to any edits or corrections regarding the draft minutes for a Board meeting held on September 29, 2023, and two Assisted Living Administrator-in-Training Resources and Support Workgroup meetings held on September 29, 2023, and December 14, 2023, respectively. Upon a **MOTION** by Ms. Williams properly seconded by Ms. Jackson, the Board voted to approve the minutes as presented. The motion passed unanimously (6-0).

ORDERING OF THE AGENDA

Upon a **MOTION** by Ms. Jackson properly seconded by Ms. Williams, the Board voted to accept the agenda as presented. The motion passed unanimously (6-0).

BOARD MEMBER RECOGNITION

Dr. Inker recognized Mr. Faruk for his service and dedication to the Board of Long-Term Care Administrators from 2019 to 2023. Dr. Inker presented Mr. Faruk with a plaque to recognize his service.

PUBLIC COMMENT

There was no public comment.

AGENCY REPORT – Arne W. Owens, Agency Director

Mr. Owens recognized Long-Term Care Administrator Week from March 11-15, 2024, and thanked the Board Members for their service and contribution to the profession.

Mr. Owens spoke about the successful 2024 General Assembly Session. He stated that the General Assembly is scheduled to return in April 2024 regarding the state budget.

Mr. Owens provided a brief overview of the DHP Business Process Re-engineering initiative. He stated that DHP had hired a vendor to review the licensing process to determine if there are any areas of improvement and to review the efficiency of time to complete an application once received.

Mr. Owens introduced Dr. Rogers as the new Enforcement Director. He also reported that Diane Powers, Director of Communications, would retire effective April 1, 2024. Additionally, Mr. Owens reported that

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Lisa Hahn, Chief Operating Officer, would retire effective July 1, 2024. He stated that he anticipates a seamless transition of these positions.

With no questions, Mr. Owens concluded his report.

PRESENTATION

Dr. Rogers provided a presentation and overview of the Enforcement Division and Investigative Process.

STAFF REPORTS

Executive Director's Report - Corie E. Tillman Wolf, JD, Executive Director

Welcome New Board Members

Ms. Tillman Wolf welcomed Ms. Campbell and Dr. Hughes as newly appointed Board Members.

Board Updates

Ms. Tillman Wolf provided updates from the Board's September and December 2023 Administrators-in-Training (AIT) Resources and Support Workgroup. She said that the workgroup was convened with stakeholders to identify resources to better support AITs for licensure preparation.

Ms. Tillman Wolf stated that Board staff held a new board member orientation on December 14, 2023. She noted that Ms. Campbell and Dr. Hughes were in attendance.

Ms. Tillman Wolf reported on the 2023 accomplishments of the Board including the successful transition to an updated website format, the development and implementation of automated bots for licensure correspondence, and the creation and dissemination of AIT and Preceptor information sheets.

Ms. Tillman Wolf reported on the open renewal cycle until March 31, 2024, and announced that a new Workforce Survey question was added regarding occupational burnout. She stated that data regarding this question would be provided at a later meeting date.

Ms. Tillman Wolf announced the 2024 Board initiatives to include continued collaboration with the AIT Workgroup, the Business Process Reengineering recommendations for the licensure process, and the continued efforts to streamline and update applications while focusing on the public-facing information and resources. She also noted that continued efforts will be made to provide additional guidance for those beginning the licensure process.

Ms. Tillman Wolf reminded Board Members of the optional DHP Board Member Training scheduled for March 26, 2024, and encouraged participation.

NAB Updates

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Ms. Tillman Wolf reported that the National Association of Long Term Care Administrator Boards (NAB) Mid-Year Meeting was held on October 25-27, 2023, in New Orleans, Louisiana in which she was in attendance. She also reported on the upcoming NAB Annual Meeting scheduled for June 5-7, 2024, in Oklahoma City, Oklahoma. She stated that one Board Member would be funded by NAB as a participant and asked for Board Members to contact her with interest to attend.

With the announcement of Ms. Hahn's retirement from DHP, Ms. Tillman Wolf thanked her for her years of service and contribution to the NAB organization, and as the former Executive Director for the Board.

Ms. Tillman Wolf reported on the NAB Mid-Year Meeting highlights. The Health Services Executive (HSE) credential is now accepted in twenty-seven states with six additional states working towards the implementation of the credential. NAB announced its efforts to change the current terminology for Administrator-in-Training (AIT) programs to "Administrator Residency." Ms. Tillman Wolf reported on a change to NAB leadership as of January 1, 2024.

Ms. Tillman Wolf stated that NAB released information to boards in early February 2024 regarding the launch of a new Linear On-The-Fly Testing (LOFT) system effective July 1, 2023. The LOFT system allows for indefinite shuffling of exam questions, eliminating the need for the previous limit on applicant test taking attempts per year for the CORE, NHA, and RCAL exams.

Lastly, Ms. Tillman Wolf reported on the ongoing work of NAB committees and task forces related to the mobility of administrators and the frequency of meetings.

On The Horizon

Ms. Tillman Wolf stated that more information would be provided at the next meeting regarding the AIT Resources and Support Workgroup, specifically in relation to the resources to support exam candidates and initiatives for pre-licensure course options in the future.

2024 Board Meeting Schedule

Ms. Tillman Wolf reminded Board Members of the remaining 2024 Board meeting dates:

- June 18, 2024
- September 17, 2024
- December 3, 2024

Notes and Reminders

Ms. Tillman Wolf provided reminders to the Board Members regarding participation at Board meetings as it relates to the quorum requirements. She also provided reminders regarding any changes to contact information. She thanked members for their service to the Board.

With no questions, Ms. Tillman Wolf concluded her report.

Discipline Report - Melanie Pagano, JD, Deputy Executive Director

As of January 31, 2024, Ms. Pagano reported the following disciplinary statistics:

- 84 Patient Care Cases
 - o 3 at Informal
 - o 1 at Formal
 - o 20 at Enforcement
 - o 58 at Probable Cause
 - o 2 at Administrative Proceedings Division
- 26 Non-Patient Care Cases
 - o 2 at Informal
 - o 0 at Formal
 - o 5 at Enforcement
 - o 19 at Probable Cause
 - o 0 at Administrative Proceedings Division
- 3 at Compliance

Ms. Pagano reported the following Total Cases Received and Closed:

- Q4 2021 28/23
- Q1 2022 20/19
- Q2 2022 26/39
- Q3 2022 19/20
- Q4 2022 19/17
- O1 2023 23/39

- Q2 2023 14/22
- Q3 2023 18/23
- Q4 2023 23/18
- O1 2024 24/14
- Q2 2024 26/22

Ms. Pagano appealed for assistance from the Board regarding open probable cause review files. She requested Board Members to contact her with their availability to process and review cases.

Ms. Pagano answered questions about compliance cases and the Administrative Proceedings Division.

With no further questions, Ms. Pagano concluded her report.

Licensure Report - Sarah Georgen, Licensing and Operations Supervisor

Ms. Georgen presented licensure statistics that included the following information:

Current License Count – ALFA and NHA

ALFA	Q2 – 2024	NHA	Q2 – 2024
ALFA	663	NHA	966
ALF AIT	116	NHA AIT	97

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Preceptor	216	Preceptor	220
Total ALFA	995	Total NHA	1,283

Ms. Georgen reviewed the trends of licensure counts since Q4 - 2018.

Licensure Renewals – 2023

License	Renewed	Not Renewed	Renewed Percentage
Assisted Living Facility Administrators	546	77	87.64%
Assisted Living Facility Preceptors	182	21	89.66%
Nursing Home Administrators	791	102	88.58%
Nursing Home Preceptors	190	26	89.96%

2024 Renewals

Ms. Georgen provided information on the 2024 renewals, including notification dates of notices to licensees.

Licensing Updates

Ms. Georgen provided updates regarding the automated licensing correspondence bots effective December 2023. She also provided updates to the website formatting effective January 2024.

Ms. Georgen spoke to the Business Process Reengineering process and the expected completion date.

Customer Satisfaction

Ms. Georgen reported on the customer satisfaction statistics and provided comments for Q1 - 2023 to Q2 - 2024.

Call Trends

Ms. Georgen provided a brief report on the call trends from 2019 to 2023. She stated that an average of 3,600 calls are received by the Board each year.

Updates for Expense Reimbursement Vouchers

Ms. Georgen provided information on changes to the IRS Standard Mileage Rate increase effective January 1, 2024. She provided information to the Board Members on using an optional Virginia Department of Accounts Remittance Electronic Data Interchange (REDI) system for pending deposit notifications.

With no questions, Ms. Georgen concluded her report.

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BOARD COUNSEL REPORT - M. Brent Saunders, Senior Assistant Attorney General

Mr. Saunders did not have a report to provide.

COMMITTEE AND BOARD MEMBER REPORTS

Assisted Living Facility Administrators-in-Training Resources and Support Workgroup – Jenny Inker, ALFA, Workgroup Chair

Dr. Inker provided an update on the September 29, 2023, and December 14, 2023, meetings of the Assisted Living Facility Administrators-in-Training Resources and Support Workgroup.

LEGISLATION AND REGULATORY ACTIONS

Report on Status of Regulations - Erin Barrett, Director of Legislative and Regulatory Affairs

Ms. Barrett provided an update on pending regulatory actions and the status of bills of interest in the General Assembly.

Ms. Barrett also provided an update on pending regulatory actions.

With no questions, Ms. Barrett concluded her report.

BREAK

The Board took a break at 11:39 a.m. and returned at 11:51 a.m.

NEW BUSINESS

Review of Designation of Documents as Guidance Documents – Erin Barrett, Director of Legislative and Regulatory Affairs

Ms. Barrett provided information related to the review of the Board's guidance documents to determine if they meet the requirements to serve as guidance documents or if they should be labeled as policy documents going forward.

The review these guidance documents will be conducted by the Board at its next Board meeting.

Acting Administrators-in-Training Role – Kimberly Brathwaite, ALFA

Ms. Brathwaite suggested a discussion by the Board regarding Administrators-in-Training (AITs) serving in the capacity of Acting Administrators as it relates to disciplinary cases being reviewed by the Board. She suggested that the Board review the minimum hours of oversight required by the Board's Regulations, as well as review how the Board can support them adequately during this training period. Ms. Tillman Wolf stated that she can provide statistical data at the next meeting to determine whether there are any discernible

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patterns regarding allegations, preceptors, and length of AIT training at the time of their transition into an Acting AIT role.

CONSIDERATION OF CONSENT ORDER

Ms. Pagano provided a summary of the proposed Consent Order for case numbers 220234 and 225660.

Upon a **MOTION** by Ms. Kirby, the Board of Long-Term Care Administrators convened in a closed meeting pursuant to Section §2.2-3711(A)(27) of the Code of Virginia for the purpose of deliberation to consider a settlement proposal in a pending disciplinary action regarding Jeffrey Brandal Price, ALFA.

She moved that Mr. Saunders, Ms. Tillman Wolf, Ms. Pagano, and Ms. Georgen attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Board in its consideration of this topic.

Having certified that the matters discussed in the preceding closed session met the requirements of Section §2.2-3711(A)(27) of the Code of Virginia, upon a motion by Ms. Kirby, properly seconded by Ms. Brathwaite, the Board reconvened in open session.

Upon a **MOTION** by Ms. Kirby, and duly seconded by Dr. Williams, the Board moved to reject the Consent Order with the counteroffer of a Consent Order with the terms as discussed. The motion carried unanimously (6-0).

NEXT MEETING

The next scheduled meeting date is June 18, 2024.

ADDITIONAL COMMENTS

Dr. Inker requested that Board Members participate in the probable cause review of disciplinary cases after the meeting, if able.

ADJOURNMENT

With all business concluded, the meeting adjou	rned at 12:28 p.m.	
Corie Tillman Wolf, J.D., Executive Director		
Date		

Legislative and Regulatory Report

Board of Long-Term Care Administrators Current Regulatory Actions As of June 5, 2024

At DPB/OAG

VAC	Stage	Subject Matter	Date Submitted	Office; time in office	Notes
18VAC95-20 18VAC95-30	Proposed	Regulatory reduction 2023	10/10/2023	DPB; 35 days	Regulatory eliminations and reductions to comply with Governor's directive

VIRGINIA ACTS OF ASSEMBLY -- 2024 SESSION

CHAPTER 390

An Act to amend and reenact § 54.1-2408.4 of the Code of Virginia, relating to out-of-state health care practitioners; temporary authorization to practice; assisted living facilities.

[H 511]

Approved April 4, 2024

Be it enacted by the General Assembly of Virginia:

1. That § 54.1-2408.4 of the Code of Virginia is amended and reenacted as follows:

§ 54.1-2408.4. Temporary authorization to practice.

- A. A health care practitioner licensed, certified, or registered in another state or the District of Columbia may temporarily practice for one 90-day period, provided that the following conditions are met:
- 1. The practitioner is contracted by or has received an offer of employment in the Commonwealth from a licensed hospital, a nursing home, *an assisted living facility*, a dialysis facility, the Department of Health, or a local health department;
- 2. The employer or contractor verifies that the out-of-state health care provider possesses an active and unencumbered license, certification, or registration for the profession in which he will be employed or contracted in another state or the District of Columbia;
- 3. The employer or contractor obtains a report from the National Practitioner Data Bank if the applicant is subject to reporting; and
- 4. Prior to the out-of-state health care practitioner's practicing, the employer or contractor notifies the appropriate health regulatory board that the out-of-state health care practitioner is employed or under contract and will practice under the temporary authorization. This notice shall include the out-of-state health care practitioner's out-of-state license, certification, or registration number and a statement that such practitioner meets all of the requirements set forth in this section.
- B. If the health care practitioner practicing with a temporary authorization has submitted an application for licensure, certification, or registration, the applicable health regulatory board shall expedite such applications for out-of-state health care practitioners practicing pursuant to this section. If licensure, certification, or registration remains pending after the initial 90-day temporary authorization, the authorization may be extended for an additional 60 days, provided that the employer or contractor submits notice to the applicable health regulatory board.
- C. Out-of-state health care practitioners practicing pursuant to this section shall be subject to the laws and regulations of the Commonwealth and shall be subject to disciplinary action by the applicable health regulatory board.
- D. The Department of Health Professions shall, beginning July 1, 2023, annually report to the Chairmen of the Senate Committee on Education and Health and the House Committee on Health, Welfare and Institutions the number of out-of-state health care practitioners who have utilized the temporary authorization to practice pending licensure and have not subsequently been issued full licensure.



Out-of-State Practitioner Reporting Form

Virginia Code § 54.1-2408.4, enacted by Chapter 464 of the 2022 Acts of Assembly and amended by Chapter 390 of the 2024 Acts of Assembly, permits health care practitioners licensed, certified, or registered in another state or the District of Columbia to temporarily practice in the Commonwealth for 90 days provided certain provisions are met. These individuals may only practice temporarily for 90 days after receiving an offer of employment or contract for services from: (1) a hospital licensed by the Virginia Department of Health, (2) a nursing home, (3) an assisted living facility, (4) a dialysis facility, (5) the Virginia Department of Health, or (6) a local health department.

Any practitioner licensed in a profession which utilizes a compact that Virginia and the practitioner's state of licensure are parties to should only practice in Virginia using a compact privilege for that profession.

Eligible employers and contract service recipients **must fill out** the below information and submit to the applicable Board **before the practitioner begins temporarily practicing in Virginia**.

Complete all fields be	elow:			
Facility Name:				
Address:				
Street		City	State	Zip
Facility designation:	☐Licensed hospital	□Nursing home	□Dialysis Fa	acility
	□Va. Dept. of Health	□Local health dept.	□Assisted L	iving Facility
Is this submission for	a 60-day extension of a p	oreviously reported indi	vidual? □Yes	□No
Facility POC:				
	Name	Phone Number	24 Hou	r Phone Number
E-mail:				
certification, or regist	rtify that I or my facility heration and (2) obtained a ect to reporting, for all inc	report from the Nation	nal Practitioner	
Facility POC Signature			 Date	

Practitioner's Name	License Type	State of License	License Identification Number	Estimated Start date for employment or contract services

Please submit all pages of this form to ltc@dhp.virginia.gov.

Board Discussion and Actions

Agenda Item: Petition for Rulemaking to amend 18VAC95-30-170

Included in your agenda packet:

> Petition for Rulemaking

> TownHall comments

Staff Note: There were 40 comments provided as part of this petition for rulemaking. 37 comments indicated support for this petition while 3 comments did not indicate a position or were unclear in their position.

Action Needed:

Motion to accept the petition and initiate rulemaking

OR

Motion to deny the petition (clearly state why)



9960 Mayland Drive, Suite 300 Henrico, Virginia 23233 www.dhp.virginia.gov/nha (804) 367-4595 (Tel) (804) 939-5973 (Fax) Email: ltc@dhp.virginia.gov

Petition for Rulemaking

The Code of Virginia (§ 2.2-4007) and the Public Participation Guidelines of this board require a person who wishes to petition the board to develop a new regulation or amend an existing regulation to provide certain information. Within 14 days of receiving a valid petition, the board will notify the petitioner and send a notice to the Register of Regulations identifying the petitioner, the nature of the request and the plan for responding to the petition. Following publication of the petition in the Register, a 21-day comment period will begin to allow written comment on the petition. Within 90 days after the comment period, the board will issue a written decision on the petition. If the board has not met within that 90-day period, the decision will be issued no later than 14 days after it next meets.

Please provide the information requested below. (Print or Type)		
Petitioner's full name (Last, First, Middle initial, Suffix,)		
Sandy Rosenblatt		
Street Address	Area Code and Tele	ephone Number
1453 Laburnum Street	(301) 656-8823	
City	State	Zip Code:
McLean	VA	22101
Email Address (optional)		
sandy7020@aol.com		

Respond to the following questions:

- What regulation are you petitioning the board to amend? Please state the title of the regulation and the section/sections you want the board to consider amending.
 18VAC95-30-170. Training facilities
- 2. Please summarize the substance of the change you are requesting and state the rationale or purpose for the new or amended rule. The petitioner requests the Board amend 18VAC95-30-170-B-4 to allow for an assisted living provider that owns multiple licensed ALFs within a 30-minute average one-way travel time with a combined total licensed capacity of at least 20 residents to be an eligible training facility for an ALF AIT program or for an internship. We appreciate Virginia ensuring an ALF AIT receives sufficient experiences, but we do not support excluding all smaller providers from serving as training facilities, especially if they are part of operations that manage several ALFs. ALFs with a resident capacity of less than 20 residents equate to 26% of the total number of licensed ALFs. In looking at VDSS regulations and the allowance of shared administrators for smaller facilities, this recommendation is not unprecedented. Training at multiple affiliated ALFs gives the AIT a variety of experiences without creating an undue financial and employment burden on the provider. With the decrease in available workforce and the increase in competition, it is crucial for the continued existence and operation of smaller assisted living communities to be able to train staff onsite, including administrators. With the current exclusion, small providers must send the employe offsite to a location which may not be close to their home and/or work. The impact on the smaller providers is the loss of workforce while the employee is offsite training at a larger facility, as well as a substantial fiscal impact of having to pay the larger facility for conducting the training while still paying the employee's compensation. This exclusion also denies the employee the

opportunity to get onsite training that would be specific to their employer. The smaller provider must also be aware that the larger facility

3. State the legal authority of the board to take the action requested. In general, the legal authority for the adoption of regulations by the board is found in § 54.1-2400 of the Code of Virginia. If there is other legal authority for promulgation of a regulation, please provide that Code reference.

Chapters 24 and 31 of Title 54.1

Signature:

may end up hiring the AIT resulting in another burden to fill the position again.

Date: 2 13 24

Find a Commonwealth Resource



Department of Health Professions

Board

Board of Long-Term Care Administrators

Chapter

Regulations Governing the Practice of Assisted Living Facility Administrators [18 VAC 95 - 30]

40 comments

All good comments for this forum

Show Only Flagged

Back to List of Comments

Commenter: Clauditte Graham

3/11/24 10:50 am

Please Amend 18VAC95-30-170-B-4 to Include Small Providers

As the current regulation is written, it excludes ALL small group home providers in the state from serving as AIT training facilities. That being the case, the regulation not only favors large facilities, but it also places all small group homes in the state at an unfair disadvantage.

Not only can it be difficult to find and hire an Administrator for any provider, but it has been our experience that many of the larger facilities that have been allowed to create and implement an AIT training program, are unwilling to take on anyone in their program that is not their own employee for a variety of reasons. Where does that leave the small providers in the state? The small providers are left in a place of not being able to train their employees to become Administrators, as well as not being able to get them trained elsewhere. How is that sustainable. Quite frankly, as it is written, the current regulation discriminates against small group home providers.

Around 25% of facilities in the state of Virginia are small group homes. Of those, there is a good percentage of those facilities that have more than one home and when all of their homes are combined, they total 20 beds or more.

Small group homes are becoming more prevalent and there seems to be a higher demand for them as our loved ones are aging. I suspect we will see that 25% rise over the next few years.

We request the regulation is changed in order to be inclusive not only to the large providers, but the small ones as well.

CommentID: 222266

Commenter: Sharon Woolery

3/11/24 12:12 pm

The Current 18VAC95-30-170-B-4 Regulation Discriminates Against Small Providers

The current regulation discriminates against smaller providers that own multiple licensed assisted living facilities that total at least 20 residents when combined & are in close driving distance to one another. It is extremely unfair and favors large facilities that have 20 beds or more. There are a good percentage of small providers/companies in Virginia that have several homes. If they were allowed to combine the numbers of each individual facility they own, they would in fact have a total of 20 beds or more. However, as the current regulation is written, small providers that own multiple facilities, are not allowed to do that. They are left to figure it out on their own and face many roadblocks due to this. The large facilities have been a significant advantage over the small providers with how the current regulation is written. Why has this been allowed or okay to do?

Rather than allowing for a small provider's employees to do their training in an ALF AIT program or for an internship onsite, one must send them off site to a location which if they actually find a large facility program who is willing to train them, it is a significant distance from their home or work. Not only do the small providers lose the employee while they are off training elsewhere, but it can also be quite costly for the small provider.

Not only that, but it also denies the employee the opportunity to get onsite training that would be specific to the facility they are currently employed at.

It has been our experience that many of the large providers who do have an AIT training program in place, have been very unwilling to take on anyone in the program who is not a current employee of theirs or intends on becoming an employee of theirs. They give a variety of reasons why they are unwilling to do so. Where does that leave the many small group homes in the state then?

Due to the growing demand of small group homes in the state, I do not see how this will be sustainable if the current AIT regulation is not changed to include small group homes being afforded the opportunity to create an onsite AIT training program.

CommentID: 222267

Commenter: Fannie Halton- Paragon Assisted Living

3/11/24 3:53 pm

18VAC95-30-170-B-4 Must Be Amended

Prior to 2022, a Virginia ALF AIT candidate could be precepted by a licensed ALF preceptor at any licensed ALF wherein that preceptor had appropriate permissions. Current or would-be owner/operator of residential ALFs (with 8 residents) could train for the Administrator role in an environment they would be operating in, or in one like it. Further, growing organizations of residential ALFs could train and promote individuals from within to fulfill the Administrator role. This is especially important, as the skillset required for an ALF Administrator in a residential ALF differs greatly from that required of an Administrator of a larger ALF.

Because AIT candidates may now only be precepted in larger ALFs, all new AIT candidates (if they are lucky enough to land one of these opportunities) receive training tailored exclusively to bigbusiness operations. As result, residential ALF providers are left without appropriately trained Administrator candidates, as well as an inability to provide necessary training. The regulatory change in 2022 stifled the growth and stability of the Virginia residential ALF industry, while lending an unfair advantage to the big-business/corporate owners of larger ALFs.

18VAC95-30-170-B-4 must be amended to serve the needs of all ALF providers.

CommentID: 222273

Commenter: Moyah Moody-Avalon Assisted Living

3/12/24 10:22 am

I Support This Petition

I fully support this petition. I think it would be beneficial & it is crucial for the small providers to have the same AIT training advantages and opportunities as the large providers in Virginia. There are almost 150 small group home providers in the state. I believe those 150 small providers and their voices matter. As it currently stands, the regulation places all of them in an unfair position in

comparison to the larger facilities & leaving the regulation as is, could seriously impact each & every one of those small providers negatively. Thank you so much for your time & consideration. CommentID: 222278

Commenter: Maxine Austin- Avalon House

3/12/24 2:35 pm

In Full Support of Petition

I am in full support of this petition.

Small group homes are an important option for the consumer. Not only that, in the past several years, more and more consumers have been turning to the smaller group homes to care for their loved ones. It is a growing market.

Changing the current standard to include small providers will give access to group homes that are currently being denied the option. At the very least small providers should have the choice to become an AIT Training facility. Not doing so, will leave small providers at a significant disadvantage to the larger facilities which is unfair as well as it will create an extra financial and workforce burden on them. The current standard discriminates against the small group homes.

Allowing for small providers to become an AIT Training facility will benefit them as well as those they are caring for.

CommentID: 222283

Commenter: Irvin Land Jr

3/12/24 10:28 pm

In Support of Petition

18VAC95-30-170-B-4 places an undue burden on owners/administrators of small assisted living businesses to successfully train capable individuals desiring to enter the AIT program in assisted living administration. I support this petition. Furthermore, consideration should be given to striking this specific section of the regulations governing the practice of assisted living administration, as small assisted living facilities can serve as excellent training sites for individuals desiring to work in such settings. Thank you for supporting the efforts of assisted living facility administrators and AITs throughout the Commonwealth and for amending and/or eliminating burdensome regulations such as this.

CommentID: 222291

Commenter: Warren Williams- Avalon Assisted Living

3/13/24 1:13 pm

In Support of Petition

I have been waiting for 4 months now to begin my AIT program. The ONLY obstacle in my way is that none of the 11 facilities the company I work for operates has a capacity or is licensed for 20 residents or more individually. The total capacity for each of our homes is 8 residents, but with 11 homes collectively we offer services to 88 residents.

All of our homes are within 15 minutes of one another. A few of them are in the same neighborhood and one can walk less than two minutes from one of our facilities to get to another.

I have reached out to many of the larger facilities in the surrounding area to facilitate my AIT program. I have been told over and over again I cannot do my training there due to HIPPA, and other privacy concerns since I am not an employee of these larger facilities. This has led to

restricted access to my training and has hindered it from starting. If a trainee was allowed to undergo training in their own facility, there would be no privacy concerns as well as all resources would be made available to them.

Why is it perceived that an ALF with 20 or more residents in one building would prove to be a better training ground than a facility with 88 residents as we have collectively, albeit in 11 different buildings? Why is it perceived better than a facility with 20 residents collectively in 3 different buildings? It does not make sense and I find it unnecessarily prejudice toward small providers.

Having the opportunity to train in small facilities may prove advantageous as it would allow for greater interaction with those staff and residents.

I believe the most important factor that will determine the quality of the training is the competency of the preceptor no matter where the training is completed. Afterall, there is an exam to pass after the training is completed.

CommentID: 222302

Commenter: Kayla Bryce

3/14/24 11:11 am

Support

I find regulation 18 VAC 95-30-170-B-4 biased in favor of large facilities who are licensed for 20 residents or more. I ask the board to consider to strike this from the regulations.

I see no reason why a facility licensed for 20 residents or more, would make a better AIT facility than a small one. In both cases, they are caring for the same types of residents and following the Virginia Department of Social Services Regulations.

If small providers are unable to serve as a training facility, and many of the large facilities are not willing to train those who are not their own employee, the question becomes how are small providers going to get their employees trained to become Administrators so they may be in compliance with the Virginia State regulations?

Thank you so much for your time and consideration. It is appreciated.

CommentID: 222306

Commenter: Judy Hackler, Virginia Assisted Living Association (VALA)

3/15/24 7:06 pm

Support smaller ALFs serving as training facilities

The Virginia Assisted Living Association (VALA) recognizes the severe shortage that exists of licensed preceptors and available training facilities for individuals to become an assisted living facilities (ALF) administrator in training (AIT). We appreciate Virginia ensuring an ALF AIT receives sufficient training and experiences, but we do not support excluding all smaller providers from serving as training facilities, especially if they are part of operations that manage several ALFs. ALFs with a resident capacity of less than 20 residents equate to 27% of the total number of licensed ALFs. 18VAC95-30-170-B-4 creates an undue burden and discriminates against smaller assisted living providers significantly restricting business operations and training opportunities. This regulation can also restrict available housing options for seniors if the smaller ALFs are not able to recruit or train administrators to oversee the operation, then the ALF will be forced to close due to its inability to comply with regulations.

In looking at VDSS regulations and the allowance of shared administrators for smaller facilities, the recommendation of the petitioner is not unprecedented. Training at multiple affiliated ALFs gives the AIT a variety of experiences without creating an undue financial and employment burden on the provider.

With the decrease in available workforce and the increase in employment competition, it is crucial for the continued existence and operation of smaller assisted living communities to be able to train staff onsite, including administrators. The regulation creates an unfair advantage of larger assisted living facilities to recruit, train, and retain staff. The current regulation also denies employees of smaller ALFs the opportunity to get onsite training that would be specific to their employer. With the current exclusion, small providers must send the employee offsite to a location which may not be close to their home and/or work. The impact on the smaller providers is the loss of workforce while the employee is offsite training at a larger facility, as well as a substantial fiscal impact of having to pay the larger facility for conducting the training while still paying the employee's compensation. The smaller provider must also be aware of the risk in the larger facility hiring the AIT resulting in another burden to fill the position again.

Thank you for considering these concerns. We welcome the opportunity to continue to work with the Board of Long-Term Care Administrators to amend the regulations to best serve the industry including the residents, the employees, and the operators. Please let us know if you have any questions about these comments.

CommentID: 222315

Commenter: S. Benjamin

3/18/24 3:14 pm

In Support of Petition

I ask the Board of Long-Term Care Administrators consider amending the regulation 18-VAC95-30-170-B-4 to include small providers in the State of Virginia. I believe not doing so, will create a shortage of Administrators which will in turn impact the smaller providers in the state. I believe it is crucial the amendment be made.

Thank you for your consideration and work.

CommentID: 222322

Commenter: Gloria Oni

3/18/24 6:50 pm

In Support of Using smaller homes

In full support of using small ALF with 16-20 homes combined for AIT training.

CommentID: 222324

Commenter: Greenbrier assisted living

3/18/24 9:13 pm

supporting this amendment

Smaller facilities inspected and expected to follow the same exact standards provided by DSS, no reason they should be excluded to render training services when there is a need for it.

CommentID: 222325

Commenter: Susan Williams

3/19/24 10:27 am

I support petition as written

I support petition as written. I currently work for a small, assisted living. I expressed interest to the owner that I would like to become an Administrator. The owner is a preceptor. My employer is unable to train me due to the current regulation in place. They have called around to local large, assisted living facilities which are AIT training facilities. They have been told time and again they cannot or will not train me due to privacy concerns. That being the case, I have not submitted an application to become an Administrator as of yet as we have not found a place who is willing to train me. I like where I work. I do not want to work at a large facility. We feel frozen. Here I am wanting to become an Administrator. I cannot be trained where I work, and we have been turned away elsewhere due to this unfair regulation. Thank you to the Board for considering the petition and your hard work.

CommentID: 222326

Commenter: Heather Warr

3/19/24 6:15 pm

AIT training facilities

I support this petition
CommentID: 222328

Commenter: Karen McPhail

3/21/24 8:09 am

Please Amend 18VAC95-30-170-B-4 To include small providers

Please Amend 18VAC95-30-170-B-4 to Include Small Providers

As the current regulation is written, it excludes ALL small personal care home providers in the state from serving as AIT training facilities. That being the case, the regulation not only favors large facilities, but places all small group homes in the state of VA at an unfair disadvantage.

Around 25% of facilities in the state of Virginia are small group homes. Of those, there is a good percentage of those facilities that have more than one home and when all of their homes are combined, they total 20 beds or more.

Small group homes are becoming more prevalent and there seems to be a higher demand for these settings as they provide individualized and often more cost effective care in a smaller and easier to navigate setting.

We request the regulation is changed in order to be inclusive and not disadvantage small providers.

CommentID: 222329

Commenter: Evermore Senior Living

3/23/24 7:10 pm

In Support of Petition

I fully support this petition. Many of the larger facilities are unwilling to train anyone not employed by their facility. This stifles our ability to train our employees to become administrators. I have

called locations in hopes of finding a training program and it is impossible. Small residential assisted living homes are becoming more popular and a viable option for our aging population, and there must be a path for training our employees without relying on the larger facilities. Please consider this petition to help us continue to grow our businesses. QO CommentID: 222345

Commenter: Lori Larson, Larmax Homes

3/24/24 9:49 am

Small Facilities are a Unique and Valuable Training Environment For Administrators in Training

To prevent the imposition of an unfair and discriminatory burden on small providers of memory care and assisted living as well as the clients they serve, 18VA95-30-170-B-4 must be amended allow administrators-in-training to be educated in smaller facilities. Eligible training facilities should include a provider with multiple locations within a 30-minute average one-way distance, collectively accommodating no fewer than 20 residents, as eligible training facilities for an ALF AIT program or internship. There are a number of important reasons to change this rule.

For two decades, Larmax has operated over nine homes, each housing eight residents, catering to individuals who thrive in a smaller, more intimate setting. Such smaller facilities offer a crucial alternative to larger ones. While some individuals may adapt well to the atmosphere of a 100-person facility, others require more personalized care and may feel overwhelmed in a crowded environment. Residents and their families often depend on the willingness of smaller homes to address complex needs associated with conditions like memory loss and Parkinson's disease, which disproportionately affect the elderly. Many of our residents transition to Larmax after experiencing inadequacies in larger facilities, where their needs couldn't be met without relocating to specialized units or hiring additional private caregivers. In a world already lacking in residential options for the elderly with escalating care requirements, small homes play a vital role. Mandating that all administrators undergo training exclusively in large facilities, which have an environment quite different from small homes, would likely severely limit elderly Virginians' access to such accommodations and would result in administrators not prepared to meet the unique, personalized environments of these homes.

Administrators of small homes have distinct training requirements compared to those in larger facilities. In a smaller setting, administrators are directly involved daily in care provision, engagement, medical management, staffing, and other essential tasks. Training focused on tasks irrelevant to small homes, such as running a large laundry operation, is wasteful; an understanding of basic laundry procedures suffices for managing the needs of eight residents. What small home administrators truly need is training in staffing dynamics, leadership responsibilities, family communication, disease management, behavior intervention, and utilization of community resources. Denying small homes the ability to provide tailored training for their administrators is both illogical from a business perspective and counterproductive to the Commonwealth of Virginia's goal of offering diverse and high-quality options for families as their loved ones age. All administrator candidates must pass the same licensing exam, ensuring a baseline of competency. Beyond that, akin to medical residencies which are tailored to specific specialties, administrator training should align with the unique demands of their chosen work environment.

Additionally, learning in a small environment may be better for the trainee. In a small facility, learning experiences can be more personalized, with more individual attention to the specific needs and goals of the trainee and more opportunity for closer mentorship with access to immediate feedback. The trainee will be exposed to more diverse opportunities as there are fewer staff members and fewer silos of work. People working in a smaller environment handle more roles and the AIT will, therefore, likely get more practical experience. Trainees can also benefit from the close-knit working environment, where they can learn in real time from professionals in a collaborative atmosphere. Trainees can also witness and participate in the development and implementation of creative solutions to meet residents' needs as they occur, encouraging critical thinking and problem solving. They can also engage with families on a more personal level,

helping them develop empathy, cultural competence, and communication skills. To take away these opportunities, which only exist in a more intimate residential environment would leave the industry without administrators with a unique understanding of this important segment of the assisted living market, which would, long term, impact quality of the remaining facilities and likely the number of small homes built in the future.

CommentID: 222346

Commenter: Josiah Hunter

3/27/24 11:29 am

Small Business is the backbone of our society, Small care facilities are optimal for Elderly

Current state regulation imposes a restrictive framework on Administrator in Training (AIT) programs, unfairly disadvantaging small providers by not allowing facilities with fewer than 20 beds to become training facilities for administrators. This not only limits their ability to train and grow staff from within but also places an unnecessary financial and logistical burden on their operations, hindering their mission to provide exceptional care to one of our most vulnerable populations, the elderly.

As a resident of Virginia I am in support of the amendment to regulation 18VAC95-30-170-B-4, advocating for fair training opportunities for small assisted living facilities.

Josiah Hunter

CommentID: 222384

Commenter: Steve Gurney - Positive Aging Community

3/27/24 11:36 am

Updating Administrator in Training (AIT) Program

As a professional serving older adults, families and professionals in Northern Virginia and the entire mid-atlantic for the last 35 years I would urge you to allow communities with fewer than 20 residents to become training facilities for administrators in Virginia.

These communities provide an important option and choice for older adults and their families. By restricting training you are not only minimizing the options/choices for career development in a segment that desperately needs as many qualified team members as possible.

In my opinion however, the biggest problem is that you are taking a position of endorsing a care model based on an arbitrary size of a community. These communities provide the same services and support as communities with 20 or more residents, Virginia consumers need to explore every option to find a home of their preference. While you may not think that the training policy does not impact consumer choice, it is sending a message to the community at large that there is a significant difference in the eyes of the State of Virginia.

Again, I would urge you to allow communities with fewer than 20 residents to become training facilities for administrators in Virginia.

CommentID: 222385

Commenter: Nancy Hansbrough

3/27/24 12:14 pm

Support for 18VAC95-30-170-B-4

As one with a mother in assisted living, I have seen how important it is to have training facilities in order to provide high quality care at facilities and by administrators and staff. This regulation should not restrict how/where training can be provided. The more training facilities available, the

better the whole health care system will be. Please don't put residents at risk b/c of a limitation of training facilities.

CommentID: 222393

Commenter: Peggy Breda, A Family Tie

3/27/24 1:11 pm

amendment to regulation 18VAC95-30-170-B-4,

Training is vital for these much needed small assisted living communities. These businesses not only support the growing older population but provide a unique and affordable option to many seniors in need of care. These businesses need to be able to grow and educate their teams to be strong and more supportive to their clientele. Limiting their access to training options will reduce the opportunities to provide continuing education to their team; thus reducing the quality of care providing to this growing segment of senior care. A segment, I might ad, that is much needed in our community.

Putting additional financial burdens on these communities will only increase the cost of care to the senior population who are in need of such services. But will continue to increase the rising cost of care in our community. These communities are a vital part of the aging senior care community and provide a huge role to families in need. Costs are already high for many.

Thank you for considering the appeal to this amendment. I know there is a way to work together resolve this issue. I highly support the growth of small assisted living communities to grow and support their teams.

Thank you for your consideration.

Peggy Breda, Owner

A Family Tie

CommentID: 222394

Commenter: Mary Forde

3/27/24 10:38 pm

In support of amending regulation 18VAC95-30-170-B-4

My late mother lived in Tysons Woods, a small assisted living facility in Vienna VA for almost 8 years. The care she received was absolutely remarkable - largely due to the incredible staff employed at Tysons Woods, and trained by Andy Cocito, the owner of Tysons Woods. Without the amendment, the type of care that Andy and her staff provide to the residents would be negatively impacted. And the cost to residents would likely go up as well. Small assisted living facilities provide vitally important services to families who are trying their best to find good quality care for their loved ones. Please do not make things harder for them.

CommentID: 222419

Commenter: Carrie Jackson - Spring Oak Senior Living

3/30/24 1:33 pm

I Support This Petition

I support this petition, As an AIT Preceptor for the state of Virginia. The smaller ALF communities are great for AIT's to start out learning and completing their AIT programs. It really does in my opinion sets the AIT up for success in their careers. Anything to make our new and upcoming administrators successful and our geriatric population safer, happy, and the families in trusting that

new administrators to understand, follow state regulations and knowing how to handle situations properly is very important.

CommentID: 222446

Commenter: Christine Vincent

3/30/24 5:53 pm

Appeal against the Current Administrator AIT Training Facility Standard

I am in full support of providing **fair training opportunities** for small assisted living facilities. My late father spent 9 months bedridden and cared for impeccably and lovingly at Tysons Woods in Vienna, VA. Andy Cocito and her staff are incomparable and her facility(ies) fill a need to so many families have. I fully support this petition and believe it is imperative that all assisted living facilities, regardless of size, have the opportunity to train and retain skilled administrators. This regulation unfairly disadvantages smaller providers like Tysons Woods. I am beyond thankful and grateful that Tysons Woods was an option for my father and for us. I implore you to please amend18VAC95-30-170(B)!!

CommentID: 222447

Commenter: Colleen Duewel, LionHeart Eldercare

4/1/24 12:59 pm

Support for ammendment to regulatio 18VAC95-30-170-B-4

As an aging life care professional, I urge the amendment of regulations pertaining to Administrator-in-Training (AIT) programs within assisted living communities with fewer than 20 beds. I believe that the current restrictions hinder the development of qualified administrators and limit the quality of care provided to vulnerable individuals.

Assisted living communities serve as essential hubs for individuals who require varying levels of assistance with daily activities, yet the current regulatory framework places undue limitations on smaller-scale facilities. The restriction on AIT programs for communities under 20 beds presents a significant barrier to the training and professional growth of aspiring administrators. Moreover, it restricts the potential for smaller communities to maintain high standards of care and management.

I acknowledge the importance of regulations in ensuring the safety and well-being of residents within assisted living facilities. However, I contend that the current regulation unnecessarily stifles innovation and diversity within the industry. Smaller communities often foster a more intimate and personalized approach to care, and by enabling AIT programs within these settings, we can ensure that administrators receive tailored training that aligns with the unique needs of such environments.

Revision would yield several benefits:

- Enhanced Quality of Care: Trained administrators are crucial for maintaining high standards of care. Allowing AIT programs in smaller communities ensures that administrators receive comprehensive training that reflects the specific needs and dynamics of such settings.
- **Professional Development:** Aspiring administrators within smaller communities deserve the opportunity for professional growth and advancement. AIT programs offer invaluable hands-on experience and mentorship, paving the way for competent leadership in the field of assisted living.
- Support for Small-Scale Facilities: Smaller assisted living communities play a vital role in meeting the diverse needs of residents. By facilitating AIT programs, we empower these facilities to attract and retain qualified administrators, thereby sustaining the quality of care provided to residents.

• **Promotion of Innovation:** Diversity in the assisted living sector fosters innovation and creativity in care delivery. Allowing AIT programs in communities of all sizes encourages a more diverse landscape of administrators, ultimately benefiting residents through access to a wider range of expertise and approaches.

In conclusion, I urge you to reevaluate the existing regulation and consider amending it. This amendment aligns with the collective goal of promoting excellence in care and ensuring that all individuals, regardless of the size of the community they reside in, have access to well-trained and competent administrators.

Thank you for your consideration.

CommentID: 222457

Commenter: Eileen Spinella

4/1/24 1:00 pm

I support this petition.

Small residential assisted living communities are vital to the care and well-being of seniors all throughout the state of Virginia.

CommentID: 222458

Commenter: Erica Sadiq, Goodwin Living

4/1/24 2:33 pm

I support this petition.

I support this petition.

CommentID: 222461

Commenter: Jessica Peters, Insight Memory Care Center

4/1/24 2:46 pm

Please consider updating this standard to include small ALF providers!

Having worked in conjunction with small ALF providers, the experience that AIT students can gain from spending time in their group homes is very impactful. The small environment, in many ways, expands a student's experience beyond what they may come across in a standard community. The support that an AIT student can provide to communities also makes a big difference and our small ALF providers should not be excluded from this.

CommentID: 222462

Commenter: Vienna Manor Assisted Living

4/2/24 2:23 am

In support of this petition action

Small group homes are held to the exact same standards by DSS as the larger homes. AIT training is already difficult for those looking for opportunities to train. Environments in a smaller home setting often lend themselves to a hands on learning experience in every aspect of the business. It is a disservice to both future administrators and small group home owners to not allow AIT training in these environments. The current standard put an unfair burden on larger facilities for training and leaves the smaller facilities entirely out of the picture.

The population in need of assisted living homes of all kinds is growing and often the smaller homes are becoming increasingly popular as an option for consumers. Allowing smaller providers to be

AIT training facilities provides added benefit to the residents and keeps the standards fair across providers.

CommentID: 222472

Commenter: Andrea Rehm de Cocito

4/2/24 11:32 am

In support of this petition

I write to you not just as the owner and administrator of three small assisted living homes but as someone who has nurtured and grown this vital service from a single house in 2004 to the thriving community it is today. This growth was not merely in capacity but in the depth of understanding and commitment to the unique needs of our residents. My concerns regarding the Administrator in Training (AIT) Program in Virginia stem from a place of deep industry knowledge and a firsthand understanding of the challenges faced by small providers.

The regulatory framework that restricts facilities with fewer than 20 beds from becoming training facilities for Administrators in Training unfairly disadvantages smaller providers like us. This regulation disregards the operational nuances and the tailored care that small assisted living homes provide. Our model is built on close-knit community care, something that cannot be replicated in larger facilities, nor can it be taught through their training programs.

The requirement for offsite training in larger settings not only overlooks the essential skills necessary for managing smaller facilities but also imposes significant financial and logistical burdens on us. Furthermore, this law indirectly discriminates against minority and women-owned businesses, a demographic that significantly represents small assisted living facility owners. The implications of this are twofold: it hinders our operational effectiveness and diminishes the diversity that is crucial to the fabric of our industry.

In solidarity with Sandy Rosenblatt of Avalon House and other small providers, I advocate for the amendment of 18VAC95-30-170-B-4. This amendment would allow providers owning multiple licensed ALFs within a reasonable travel distance, with a combined total capacity of at least 20 residents, to qualify as eligible training facilities. Such a change is essential for providing a training ground that reflects the realities of small facility management, ultimately benefiting the broader assisted living community.

From starting with a single home in 2004 to reaching where we are today, my journey reflects a commitment to providing personalized, compassionate care. This proposed amendment aligns with our collective goal of fostering a diverse, inclusive, and equitable assisted living landscape in Virginia. Changing these requirements will give small assisted livings the chance to thrive, removing unnecessary burdens and leveling the playing field for small businesses. Your support for this amendment will not only aid in rectifying the current disparity but also ensure that the training of future administrators is comprehensive, inclusive, and reflective of the varied needs of our communities.

Your support for this amendment will not only aid in rectifying the current disparity but also ensure that the training of future administrators is comprehensive, inclusive, and reflective of the varied needs of our communities.

Thank you for considering our appeal. Together, we can work towards a regulatory framework that truly supports the growth and sustainability of all assisted living facilities, regardless of their size.

Sincerely,

Andrea Rehm de Cocito

CommentID: 222475

Commenter: Katy Irene St Marie

4/3/24 11:23 am

I support this petition!

Please approve this request.

CommentID: 222478

Commenter: Sandy O'Bannon

4/3/24 11:39 am

Support

I support this petition.

CommentID: 222479

Commenter: Heather Suri, Pathways in Aging

4/3/24 11:42 am

I support this amendment!

As the CEO and founder of an Aging Life Care Management practice, I can attest to the fact that our community relies on residential licensed assisted living communities to meet the unique needs of their residents. Creating additional barriers to training administrators that allow these critical care settings to run safely is a huge mistake, especially in light of a national caregiver shortage. We need MORE options for congregate care settings, not less. And without enough opportunities to train future administrators, choices for older adults will be very limited. I support the amendment to allow AITs to train in residential settings and limit their training opportunities solely to buildings who have 20 or more residents under one roof.

CommentID: 222480

Commenter: Herbert Burgart

4/3/24 2:22 pm

I am in support for the amendment to regulation 18VAC95-30-170-B-4.

With the inevitable increase in our aging population over the coming years, we need to be offering more and more opportunities for education, not limiting them. Eliminating the AIT programs from smaller assisted living and group homes is unfair while they are held to the same standards as larger facilities and homes. These smaller facilities are a vital part of the aging/senior community and it would be doing a great disservice to limit their ability to train the next generation of administrators. With the constantly growing diversity of our clients and patients, up and coming administrators should be able to learn and grow in all environments.

CommentID: 222482

Commenter: Diane Hendel, NP-C, Arlington Eldercare, LLC

4/4/24 7:54 am

Training for Group Homes

Quality care standards by group homes often exceed assisted living standards, because of the unique individualized care offered. Group homes should be encouraged to train their staff on site to

ensure that their high standards are maintained.

CommentID: 222483

Commenter: Anonymous

4/4/24 2:34 pm

I support.

I support.

CommentID: 222485

Commenter: Allen Wong

4/4/24 8:39 pm

I support

Allen Wong, Adminstrator/Preceptor of Beverly Assisted Living, 3 homes in Virginia.

The population we serve is in need of more administrators for long-term care. As a licensed preceptor, it is vital that I am able to train and grow the next generation of devoted, caring long-term administrators. Please allow me to precept the people whose hearts are big enough to want to become administrators as our state needs them.

Regards,

CommentID: 222486

Commenter: Georgia Weiss, President & Winsome Hartley, Vice President-Avalon House

4/8/24 3:52 pm

Full Support of Petition

As a leading provider of compassionate care and support for seniors in our community, we are writing to express our deep concerns regarding the current state of the Administrator in Training (AIT) program in Virginia and to and to support the petition.

The existing regulatory framework places undue burdens on smaller assisted living facilities like ours, stifling innovation and hindering our ability to provide the best possible care for our residents. The requirement that facilities must have a minimum of 20 beds to qualify as training facilities overlooks the unique needs and operational dynamics of smaller providers. This one-size-fits-all approach fails to recognize the invaluable contributions that smaller facilities make to our community.

Furthermore, the current program fails to adequately prepare future administrators for the realities of managing assisted living facilities of all sizes. The emphasis on offsite training in larger settings neglects the essential skills and specialized knowledge required to effectively lead smaller facilities. This not only undermines the quality of care provided but also perpetuates a cycle of inequality within the industry.

We urge you to amend 18VAC95-30-170-B-4 to allow for an assisted living provider that owns multiple licensed ALFs within a 30-minute average one-way travel time with a combined total licensed capacity of at least 20 residents to be an eligible training facility for an ALF AIT program or for an internship.

CommentID: 222499

Commenter: Junana

4/9/24 4:13 pm

Support of Petition

I support the proposed amendment to regulation 18VAC95-30-170-B-4 I fully support the proposed amendment to regulation 18VAC95-30-170-B-4.

Small assisted living facilities play a vital role in our communities, often providing personalized and intimate care settings for residents. However, their size should not hinder their ability to access essential training and educational resources. By leveling the playing field and offering equitable training opportunities, we can empower staff in small communities to enhance their skills, improve resident care, and maintain compliance with industry standards.

Fair training opportunities are not only beneficial for staff members but also for the residents they serve. Well-trained caregivers are better equipped to address the diverse needs of residents, promote their health and well-being, and ensure a safe and nurturing environment.

CommentID: 222503

Commenter: Marco Ferrario

4/10/24 11:05 am

Reconsideration of AIT Program Regulations

As the owner of a small assisted living facility, I am directly impacted by the recent changes in the AIT program regulations, which now prevent me from being trained by my business partner, a licensed administrator. This regulation change not only hampers my professional development but also places our small facility at a significant operational disadvantage.

Small assisted living facilities, like ours, thrive on a model of personalized care and community that differs fundamentally from larger institutions. The current regulatory framework, by disallowing small facility owners and administrators from receiving on-site, relevant training, undermines our ability to maintain and enhance the quality of care we provide.

I urge you to reconsider these regulations, allowing for a more inclusive training model that recognizes the unique challenges and contributions of small facilities. Such an adjustment is essential for ensuring that all assisted living facilities, regardless of size, have the opportunity to thrive and serve their communities effectively.

Thank you for considering this appeal. I am hopeful for a regulatory environment that supports the diverse needs of the assisted living sector.

Thank you!

CommentID: 222506