1 AN ACT relating to minimum staffing requirements for long-term care facilities.

- 2 Be it enacted by the General Assembly of the Commonwealth of Kentucky:
- **→** SECTION 1. The General Assembly hereby finds and declares that:

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- 4 (1) Long-term care facilities have an insufficient number of direct-care staff, 5 including nurse aides, registered nurses, and licensed practical nurses;
- 6 (2) Approximately thirty-seven states have implemented staffing requirements 7 that are more stringent than the federal staffing standards;
 - (3) Currently, Kentucky follows the federal staffing standards, which require one registered nurse on duty for eight consecutive hours per day for seven days per week and one registered nurse or licensed practical nurse on duty for twenty-four hours per day for seven days a week, but Kentucky does not have staffing requirements in long-term care facilities that go beyond these requirements;
- 13 (4) Federal staffing standards do not require a minimum level of staff that are nurse aides;
 - (5) Having too few nurse aides compromises patient safety and places residents at risk for health conditions and injuries, including but not limited to bedsores, dehydration, malnutrition, and broken bones from falls;
 - (6) Kentucky can improve the safety of residents of long-term care facilities by requiring a specified staff-to-resident ratio that exceeds the federal minimum staffing standards; and
- 21 (7) It is in the best interests of the citizens of the Commonwealth for the General 22 Assembly to require long-term care facilities to maintain a specified staff-to-resident ratio 23 that exceeds the federal staffing standards and improves access to better care to patients 24 in need of long-term care services.
- 25 → SECTION 2. A NEW SECTION OF KRS CHAPTER 216 IS CREATED TO 26 READ AS FOLLOWS:
- 27 (1) For the purposes of this section, "long-term care facility" or "facility" means a

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1		long-term care facility as defined in KRS 216.510 excluding intermediate care
2		facilities for individuals with intellectual disabilities, personal care homes, family
3		care homes, and institutions for the treatment of mental illness.
4	<u>(2)</u>	For the purposes of this section, "direct-care" means duties that include caring
5		for residents as opposed to administrative duties such as office work.
6	<u>(3)</u>	The Cabinet for Health and Family Services shall implement a system that shall
7		include but not be limited to the following staff-to-resident ratios as a condition
8		of licensure or relicensure for long-term care facilities:
9		(a) On and after July 30, 2020, a long-term care facility shall maintain a ratio
10		of unlicensed nursing personnel to facility residents of no fewer than:
11		1. One (1) nurse aide to nine (9) residents at all times during the day
12		shift;
13		2. One (1) nurse aide to ten (10) residents at all times during the evening
14		shift; and
15		3. One (1) nurse aide to nineteen (19) residents at all times during the
16		night shift;
17		(b) On and after July 30, 2020, a long-term care facility shall maintain a ratio
18		of direct-care registered nurses or licensed practical nurses of no fewer
19		<u>than:</u>
20		1. One (1) nurse to twenty-one (21) residents at all times during the day
21		shift;
22		2. One (1) nurse to twenty-nine (29) residents at all times during the
23		evening shift; and
24		3. One (1) nurse to thirty-two (32) residents at all times during the night
25		shift;
26		(c) On and after July 30, 2020, long-term care facilities with seventy-five (75)
27		or more beds shall employ a registered nurse supervisor during the day and

1	evening shifts, in addition to the staff required under paragraphs (a) and (b)
2	of this subsection;
3	(d) On and after July 30, 2020, long-term care facilities with one hundred (100)
4	or more beds shall employ the following staff, in addition to the staff
5	required under paragraphs (a), (b), and (c) of this subsection:
6	1. A registered nurse supervisor during the night shift;
7	2. A full-time assistant director of nursing; and
8	3. A full-time director of education;
9	(e) All minimum staffing ratios in paragraphs (a) and (b) of this subsection
10	shall be computed on the basis of a weekly average. For the purpose of this
11	section, a week is defined as the days Sunday through Saturday; and
12	(f) Registered nurses or licensed practical nurses may be used to comply with
13	the minimum staffing requirements for nurse aides in paragraph (a) of this
14	subsection if:
15	1. The minimum staffing requirements for registered nurses or licensed
16	practical nurses in paragraph (b) of this subsection also are
17	maintained at the facility; and
18	2. The registered nurses or licensed practical nurses are performing the
19	duties of a nurse aide.
20	(4) A facility employee designated as a member of the nursing staff shall not be
21	required to provide non-nursing services, including but not limited to food
22	preparation, laundry, and maintenance services, except as necessary to maintain
23	a safe and sanitary environment. Persons providing non-nursing services shall
24	not be counted in determining the staffing ratios required by this section.
25	(5) A long-term care facility that has failed to comply with the minimum staffing
26	requirements under this section for two (2) consecutive days shall be prohibited
27	from accepting new admissions of residents until the facility has achieved the

1		required staffing for a period of six (6) consecutive days. The Cabinet for Health
2		and Family Services may establish exceptions for absences due to weather
3		emergencies or other similar events beyond the control of the facility. A resident
4		of a long-term care facility who returns after an absence from the facility for the
5		purpose of receiving medical care at a separate location or after a leave of
6		absence is not considered a new admission.
7	<u>(6)</u>	The staffing ratios required under this section shall be the minimum direct care-
8		nursing staff requirements and shall be adjusted upward to meet the care needs
9		of the residents. Any modification of staffing ratios based on acuity of care shall
10		be recorded by the facility for each day and each shift. A report shall be made
11		each quarter of the state fiscal year to the Office of Inspector General within the
12		Cabinet for Health and Family Services on direct-care staffing based on the
13		acuteness of the residents. These records shall be open for inspection upon
14		<u>request.</u>
15	<u>(7)</u>	The Cabinet for Health and Family Services shall promulgate administrative
16		regulations to provide the Office of Inspector General within the Cabinet for
17		Health and Family Services the authority to enforce compliance with this section.
18	<u>(8)</u>	A long-term care facility that violates this section shall be subject to a civil fine of
19		no more than one thousand dollars (\$1,000) for each day that a staffing
20		requirement is not maintained.
21		→SECTION 3. A NEW SECTION OF KRS CHAPTER 216 IS CREATED TO
22	REA	AD AS FOLLOWS:
23	<u>(1)</u>	The Cabinet for Health and Family Services shall create a seventeen (17)
24		member Long-Term Care Minimum Staffing Committee to review staffing
25		requirements in long-term care facilities on an annual basis. Membership shall
26		consist of the following:
27		(a) The commissioner of the Department for Medicaid Services or a designee;

1		(b) The commissioner of the Department for Aging and Independent Living or
2		<u>a designee;</u>
3		(c) The inspector general within the Cabinet for Health and Family services or
4		<u>a designee;</u>
5		(d) The executive director of the Alzheimer's Association Kentucky chapter or a
6		designee;
7		(e) A nursing home administrator as designated by the board of directors of the
8		Kentucky Association of Health Care Facilities;
9		(f) The president of the Kentucky Hospital Association or a designee;
10		(g) Three (3) district long-term care ombudsmen representing diverse areas of
11		the state;
12		(h) A person designated by the Kentucky chapter of AARP;
13		(i) A hospice administrator as designated by the Kentucky Association of
14		Hospice and Palliative Care;
15		(j) A nurse who is currently employed by a long-term care facility, as
16		designated by the Kentucky Nurses Association;
17		(k) A nursing home administrator as designated by the board of directors of
18		Leading Age Kentucky or a designee;
19		(l) Three (3) members of nursing home families, as designated by the state
20		long-term care ombudsman, from diverse areas of the state, who shall not
21		be selected from a nursing home that is represented by a member of the
22		committee; and
23		(m) The president of Kentuckians for Nursing Home Reform.
24	<u>(2)</u>	A quorum of the committee shall be nine (9) or more members.
25	<u>(3)</u>	The Cabinet for Health and Family Services shall provide sufficient staff for the
26		committee.
27	<u>(4)</u>	The chair of the committee shall be chosen from the members identified in

1		paragraphs (d) to (m) of subsection (1) of this section. The committee shall meet
2		upon call of the chair or upon call of nine (9) members of the committee.
3	<u>(5)</u>	On or before December 1, 2021, and every December 1 thereafter, the committee
1		shall report to the Interim Joint Committee on Health and Welfare and Family
5		Services the results of its annual review of staffing requirements, including any
5		recommended changes to the requirements.