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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS

F I N A L M I N U T E S

MEETING OF:

**STATE BOARD OF EXAMINERS OF
NURSING HOME ADMINISTRATORS**

TIME: 10:38 A.M.

Held at

PENNSYLVANIA DEPARTMENT OF STATE

2525 North 7th Street

CoPA HUB, Eaton Conference Room

Harrisburg, Pennsylvania 17110

as well as

VIA MICROSOFT TEAMS

Wednesday, November 6, 2024

State Board of Examiners of
Nursing Home Administrators
November 6, 2024

BOARD MEMBERS:

Ilene Warner-Maroon, Ph.D., RN, NHA, Chair
Matthew Eaton, Deputy Commissioner, Bureau of
Professional and Occupational Affairs, on behalf of
Arion R. Claggett, Acting Commissioner
Sara L. King, NHA, Vice Chair
David R. Hoffman, Public Member, Secretary
Ann Chronister, Department of Health
Michael P. Kelly, NHA
Francis J. King, NHA
Robert L. Wernicki, NHA
Carrie E. Wilson, Office of Attorney General, Bureau
of Consumer Protection

BUREAU PERSONNEL:

Judith Pachter Schulder, Esquire, Board Counsel
Thomas M. Davis, Esquire, Regulatory Board Counsel
Codi M. Tucker, Esquire, Senior Board Prosecutor
Kathryn Bellfy, Esquire, Board Prosecution Liaison
Trista Boyd, Esquire, Board Prosecutor
Deidre Bowers, Board Administrator
Andrew LaFratte, MPA, Deputy Policy Director,
Department of State
Michael Merten, Esquire
Thomas Leech II

ALSO PRESENT:

Julie Pattison, Administrator, Havencrest
Jennifer Graff
Betsy Jo Huff
Glenn Jackamonis
Thomas Leech II
Jacob Hill, Sargent's Court Reporting Service, Inc.

1 ***

2 State Board of Examiners of
3 Nursing Home Administrators

4 November 6, 2024

5 ***

6 [Pursuant to Section 708(a)(5) of the Sunshine Act,
7 at 10:00 a.m. the Board entered into Executive
8 Session with Judith Pachter Schulder, Esquire, Board
9 Counsel, for the purpose of conducting quasi-judicial
10 deliberations and to receive legal advice. The Board
11 returned to open session at 10:30 a.m.]

12 ***

13 The regularly scheduled meeting of the State
14 Board of Examiners of Nursing Home Administrators was
15 held on Wednesday, November 6, 2024. Ilene Warner-
16 Maron, Ph.D., RN, NHA, Chair, called the meeting to
17 order at 10:37 a.m.

18 ***

19 Roll Call of Board Members/Introduction of Attendees
20 [Deidre Bowers, Board Administrator, provided a roll
21 call of Board members and introduction of all
22 attendees. A quorum of Board members was present.]

23 ***

24 Report of Acting Commissioner

25 [Matthew Eaton, Deputy Commissioner, Bureau of

1 Professional and Occupational Affairs, on behalf of
2 Arion Claggett, Acting Commissioner, announced he was
3 presenting to the Board in his role as Designee for
4 the Medical Marijuana Advisory Board.

5 Mr. Eaton provided the Board information
6 regarding a current report being drafted by the
7 Regulatory subcommittee for the Pennsylvania Medical
8 Marijuana Advisory Board that complies with
9 requirements of section 1201 of the Medical Marijuana
10 Act. He noted the subcommittee meetings identified a
11 lack of protection for healthcare providers and
12 healthcare facilities that could be a barrier to
13 patient care.

14 Key points of the report were outlined as follows:
15 Protection to facilities to allow decision making for
16 patients that may be permitted or not to self-
17 administer or to have administered to them medical
18 marijuana products while in a healthcare facility.
19 Protection to allow facilities to set their own
20 policies and procedures, which could include
21 determining the forms of medical marijuana permitted
22 or not permitted in any forms. Protection of
23 healthcare professionals' licenses if administered
24 medical marijuana products and provided incidents to
25 patients care at a medical facility.

1 Mr. Eaton explained the focus of the additional
2 regulation is to permit healthcare providers to do
3 what is best interest for the patient considering
4 their individual risk versus benefits while in a
5 healthcare facility, as well as to ensure that the
6 institution remains in control of decision-making
7 around the individual and the individual's career.
8 Chair Warner-Marion noted that healthcare facility
9 leadership with their legal counsel must make
10 decisions related to marijuana or cannabis in regards
11 to current federal Class 1 status and the implications
12 for DEA action and CMS reimbursement.

13 Mr. Eaton reviewed the language to address these
14 key points and the focus in the report as drafted by
15 the Medical Marijuana Advisory Board. He explained
16 the reports are drafted based on information from the
17 public and its stakeholders. This report resulted
18 from information from CRNPs in a hospital setting.

19 Mr. Eaton explained the Advisory Board is reaching
20 out to advise on protection to licensees and
21 healthcare facilities as to patient care to card-
22 carrying patients at healthcare facilities who may,
23 at their discretion, allow patients to self-
24 administer or administer in their own way. The
25 Medical Marijuana Advisory Board is looking to

1 improve this report with input from board members
2 across multiple boards.

3 Mr. Wernicki commented that would be a pretty
4 heavy question to allow the individuals or patients
5 to have a card to self-administer in the general
6 population. Mr. Eaton stated the healthcare
7 facilities would be able to create their own
8 policies, whether that would be self-administering or
9 not.

10 Chair Warner-Marion stated, as long as it is
11 classified as a Schedule 1 drug and Medicare or
12 Medicaid funds are received, there would be in a
13 conflict with the federal government.

14 Mr. Eaton explained that input from law
15 enforcement personnel on the Advisory Board, as well
16 as appointees from the Attorney General's and
17 Governor's Office members of the public. There is an
18 awareness that facilities are already dealing with
19 this issue.

20 Chair Warner-Marion pointed out that it would
21 violate the rights of individuals with a card in a
22 facility. Ms. Pachter Schulder questioned whether
23 there were any facilities or nursing homes in the
24 Commonwealth that have patients that self-administer
25 or have policies. She also questioned if

1 associations on a national level have drafted such
2 policies.

3 Chair Warner-Maroon commented that most facilities
4 are permitting patients to go outside to utilize
5 their medical marijuana.

6 Mr. Eaton invited the Board member to consider the
7 report and express their thoughts or concerns to the
8 subcommittee through the Commissioner's Office or
9 Deidre, Board Administrator. The plan is in November
10 to submit the draft to the rest of the board members
11 for the Medical Marijuana Advisory Board for their
12 input as well. The long-term goal would be at a
13 future board meeting submitting a final draft for a
14 vote for the Medical Marijuana Advisory Board.]

15

16 [Judith Pachter Schulder, Esquire, Board Counsel,
17 reminded everyone that the meeting was being
18 recorded, and voluntary participation constituted
19 consent to be recorded.

20 She noted prior to the beginning of the public
21 meeting, the board was in Executive Session under
22 section 7085 of the Sunshine act to discuss
23 applications and the appointments that are on the
24 agenda as well as the consent agreement.

25 Mr. Wernicke recused from the matter of Tiffany

1 DeBlasio Ferrari, and he did not participate in any
2 of those discussions.]

3 ***

4 Appointment - Jennifer Graff 39.5(b)(5)(A) Applicant
5 [Ilene Warner-Maron, Ph.D., RN, NHA, Chair, informed
6 Jennifer Graff that the Board will ask her questions
7 as to her understanding of the regulations and her
8 work as an NHA.

9 Ms. King requested Ms. Graff to explain her
10 current role and day-to-day responsibilities at her
11 facility.

12 Jennifer Graff explained her current position is
13 Assistant Administrator at Uniontown since October of
14 2023. She oversees all of the departments under the
15 Administrator making sure there are no day-to-day
16 staffing issues.

17 Ms. King questioned her chain of command and her
18 role in the recruitment and coaching of employees.
19 Ms. Graff stated the RNACs go straight to the
20 Director of Nursing. The social workers report to
21 her with regard to patient issues. She oversees the
22 dietary manager by helping with orders. She meets
23 with patients confirm their requests on their dietary
24 tickets. She oversees Admissions Director and assists
25 with referrals to the facility. The Business Office

1 Manager reports to Ms. Graff on Medicaid matters,
2 family concerns with payments, Medicaid, and
3 transportation issues. The HR manager, who handles
4 payroll and scheduling, also reports to Ms. Graff.
5 She assisted the HR manager with the implementation
6 of a new system. Ms. Graff previously was the HR
7 manager that handled the termination and hiring of
8 employees.

9 Ms. King questioned Ms. Graff as to how she
10 gained her leadership skills and expands those skills
11 to manage employees. Ms. Graff explained a new
12 company took over her facility. The staff has
13 expressed their concerns regarding different
14 situations. She coaches with the staff to
15 communicate and work together as a team. She is very
16 hands-on with the transition as it is stressful for
17 the staff.

18 Mr. Wernicki questioned Ms. Graff as to the date
19 and her role of her last survey. Ms. Graff explained
20 her last survey was in August 2024. He asked whether
21 she was involved in the plan of correction and the
22 number of tags received. Ms. Graff stated there were
23 two tags. One was for neglect, one assist instead of
24 a two assist, and the other was for a hairnet in the
25 dietary department.

1 Mr. Wernicki questioned Ms. Graff's role in
2 developing the annual budget process. Ms. Graff
3 explained her facility is a 120-bed facility, and the
4 census is low 90s. The administrators and her
5 reviewed the budget. The budget was decreased by
6 \$10,000 by the removal of positions and transitioning
7 job duties to other staff members.

8 Mr. Wernicki inquired as to the nursing care
9 hours. Ms. Graff explained she has been working with
10 Julie Pattison since October of 2022, but now she is
11 working in a different facility due to transitioning.

12 Mr. Wernicki questioned the budgeted PPD, such as
13 3.5, 3.6, 4.0 on a daily basis. Ms. Graff stated it
14 is kept to 3.4 usually by census.

15 Mr. Kelly questioned the number of beds in her
16 facility and the reason for the decrease in census.
17 Ms. Graff stated it is 120-bed facility. She
18 explained there is a new staffing issue. The new
19 hires are not staying. Mr. Kelly asked whether the
20 issue with staffing is a recent issue. Ms. Graff
21 explained the staff were leaving as a result of the
22 sale of the building. There were rumors of the new
23 company bringing in other people.

24 Mr. Kelly questioned Ms. Graff as to her most
25 challenging issue, other than staffing. She stated

1 that has been the biggest challenge. Ms. Graff
2 explained two schools have students that come to her
3 facility for clinicals. The HR manager does go to
4 schools in the area to solicit more staff.

5 Mr. Kelly asked Ms. Graff if she has ever been
6 responsible for the entire facility. She stated she
7 oversees the whole facility when the administrator is
8 out. The staff mostly come to her first. Ms. Graff
9 explained that recently it was discovered that the
10 fire system was not working properly. She has been
11 working with the corporate office and IT department
12 to troubleshoot the matter. She noted conducting the
13 Life Safety survey while the administrator was on
14 leave.

15 Ms. Wilson questioned whether Ms. Graff had an
16 opportunity to solve a significant family or resident
17 concern. If so, how was that resolved. Ms. Graff
18 stated that is a usual issue. Most of the family
19 concerns were financial. She assists with medical
20 assistance. Ms. Graff outlined her steps to address
21 a concern from a family member related to the
22 patient's apparel.

23 Ms. Wilson asked about the most common grievances
24 to her facility. Ms. Graff reiterated the concern
25 for the lack of staff due to the transition. The

1 facility is meeting the PPD every day. Families are
2 updated on the transition. Ms. Wilson questioned Ms.
3 Graff's proactiveness to address the issue. Ms.
4 Graff stated a rotation of the staff has been
5 implemented.

6 Ms. Wilson next asked how COVID has changed the
7 dynamics of the facility, her management objectives,
8 or the professionalism of the staff. Ms. Graff
9 stated, other than wearing a mask, she has not
10 noticed any difference any more. The staff has
11 always taken care of patients that needed help.

12 Mr. Hoffman noted the discussion on staffing
13 issues. He questioned her approach to staff
14 retention, such as initiatives. Ms. Graff stated
15 cards or gifts are given for good deeds. There is a
16 retention committee. The Employee of the Month
17 receives an acknowledgement. Birthdays and
18 anniversaries are celebrated. The retention
19 committee consists of the HR manager, a nurse and the
20 Director of Nurses. Mr. Hoffman suggested including
21 representatives of the CNAs and other staff
22 positions.

23 Mr. Hoffman questioned the facility's practice
24 to deal with repetitive tardiness or absenteeism by a
25 staff member. Ms. Graff stated it happens all of the

1 time. She stated, due to the new ownership, staff
2 are met with to review the handbook, as well as to
3 discuss attendance and hours of staffing.

4 Mr. Hoffman questioned as to any conflicts
5 between the past and new ownership that would be
6 problematic. Ms. Graff discussed addressing the
7 minute early punch in or out compared to like seven
8 minutes.

9 Mr. Hoffman questioned Ms. Graff's interaction
10 with the rehabilitation department. Ms. Graff stated
11 she meets with the director every morning to discuss
12 the patients and concerns. The rehab department,
13 under the new ownership, is now under the same
14 company. Mr. Hoffman commented that it is important
15 to address staffing needs based on the resident needs
16 versus the census.

17 Ms. Chronister questioned Ms. Graff's experience
18 entering event reports. Ms. Graff stated she has
19 entered event reports. She explained she is in
20 charge of the Co-Opi Committee, which meets monthly.
21 She drafts the minutes and assembles the information
22 for the meetings. Ms. Graff is also involved in the
23 Risk Management and infection control meetings.

24 Ms. Chronister asked for Ms. Graff's experience
25 with contracts and their basic elements. Ms. Graff

1 noted currently working on many contracts, such as
2 the transfer agreements with the facilities in the
3 area and updated hospice contracts.

4 Chair Warner-Maroon asked Ms. Graff what the
5 federal regulations say with regard to nursing staff.

6 Ms. Graff stated CNAS, 1 to 10; LPNs, 1 to 15; and
7 then RNs, 1 to 250.

8 Ms. Pachter Schulder informed Ms. Graff that the
9 Board will deliberate during Executive Session and
10 report the decision, noting she will also receive a
11 letter with the results but welcomed her to continue
12 to participate virtually for the decision after
13 Executive Session.]

14

15 [Mr. Wernicki shared an observation regarding the AIT
16 environment. Administrators are coming and going and
17 are not for prepared for the various different
18 company environments in the nursing home industry,
19 which is in flux. He discussed a decrease in the
20 county nursing homes, noting the Kanes being
21 affiliated UPMC, Allegheny Health Network, St. Clair
22 Hospital, attending physicians, in addition to the
23 Allegheny County Department of Health.

24 Mr. Wernicki outlined support within the Kane
25 system, such as the business office being connected

1 to the Allegheny County Budget Office; infection
2 control being directed by the Allegheny County
3 Department of Health and the State Department of
4 Health; risk management being affiliated with
5 Pelican, et cetera.

6 Mr. Wernicki expressed the importance to
7 understand the environment of the facility and
8 support the AIT gets from the facility when
9 interviewing applicants. He stated the Board needs
10 to consider the environments in which these AIT
11 applicants come to the Board for consideration.]

12 ***

13 Appointment - Betsy Jo Huff - NHA Reactivation
14 Applicant

15 [Ilene Warner-Maron, Ph.D., RN, NHA, Chair, informed
16 Betsy Jo Huff that the Board will ask her questions
17 about her reapplication.

18 Ms. King asked Ms. Huff to state her current
19 position and to describe her day-to-day
20 responsibilities at her current facility.

21 Ms. Huff stated she is the Executive Director and
22 works under the direct supervision of the nursing
23 home administrator, who is a temporary administrator.
24 Her day-to-day duties include overseeing the building
25 and the department heads. She ran the recent

1 Department of Health survey and did the plan of
2 correction. She is working on the 2025 budget for
3 the facility. The event reports to the state are
4 prepared by her. Ms. Huff oversees the staffing to
5 affirm the ratio and the PPD. She assists in the
6 hiring process. The HR person is new.

7 Ms. King questioned Ms. Huff as to her leadership
8 skills and management style to maintain and build the
9 skill set for the workforce and the changes inherent
10 in it. Ms. Huff stated she stays very involved with
11 the staff and the residents by conducting walkarounds
12 every day. This building is now agency free.

13 Adjustments were made as far as hours, because more
14 flexible hours are needed in order to maintain the
15 staff. 12-hour shifts have been implemented, which
16 eliminated an entire shift.

17 Mr. Wernicki questioned Ms. Huff as to the date
18 and her role of her last survey. She stated it
19 August 21, 2024. Ms. Huff stated the new director of
20 nursing did not have much experience with the survey
21 process, so she took the lead. Ms. Huff provided a
22 summary of her professional career in the industry.
23 The state surveyors were aware of her process to get
24 reactivated. Ms. Huff wrote the plan of correction
25 for the state and for Life Safety.

1 Mr. Wernicki asked whether there were any care
2 issues in the annual survey. Ms. Huff stated there
3 were five deficiencies, such as the oxygen
4 concentrators not being cleaned, residents eating in
5 the hallway, two MDSs that were incorrect, the
6 pantries on the units with undated food, and
7 paperwork from a dialysis patient did not come back.

8 Mr. Wernicki questioned Ms. Huff's role in
9 developing the annual budget process. Ms. Huff
10 discussed working on creating the budget. The
11 corporate office and the facility have to come to an
12 agreement on the budget as far as the breakeven for
13 census, case mix, and expenses in each department.
14 The annual budget is approximately \$100,000 per
15 month. The census and cases mixed is up. Daily
16 nursing care hours are 3.2 to 3.5.

17 Ms. Pachter Schulder requested Ms. Huff
18 distinguish her role as the Executive Director versus
19 being a nursing home administrator. Ms. Huff
20 explained that the current nursing home administrator
21 gives her a range to do many duties that she would be
22 doing as a nursing home administrator. She cannot do
23 anything independently without running it by her or
24 sign any documents as the administrator.

25 Ms. Pachter Schulder questioned whether her role

1 as an Executive Director was more like an AIT. Ms.
2 Huff agreed her role was similar to being in an AIT
3 capacity. She explained she worked as a nursing home
4 administrator for 26 years, leaving this facility in
5 2018. She went to work for agency as a nursing
6 supervisor. From 2021 to 2024, I worked at the same
7 building through agency as their daylight supervisor.
8 Then she came back to this building in July of 2024
9 in the capacity as the Executive Director.

10 As the daylight supervisor, she oversaw the staff.
11 On the weekends, she was in charge of the whole
12 building and staff or the DON. She assisted with the
13 QAs and working through their plan of corrections.
14 She hired and trained staff. She was involved in
15 reviewing admissions and QAPI to raise their five-
16 star rating. The facility was a one star and went to
17 a five star with a deficiency free survey in 2023.

18 Mr. Kelly questioned the number of beds in the
19 facility, the current census, and the year the
20 facility was licensed as a nursing home. Ms. Huff
21 stated it has 103 beds. Its current census is 99.
22 The facility was licensed in 2001.

23 Mr. Kelly asked Ms. Huff to describe the most
24 challenging issue she has faced. She stated the
25 agency situation, which the facility is agency free

1 now, and education with the staff. He inquired as to
2 her involvement with becoming agency free. Ms. Huff
3 stated she initiated a campaign to recruit and retain
4 employees by educating and making more flexible hours
5 in order to obtain the staff needed.

6 Mr. King questioned whether Ms. Huff was ever
7 completely responsible for the operation building for
8 an extended period of time without the administrator
9 present. Ms. Huff stated on the days the
10 administrator reports to the corporate building she
11 is by herself. The administrator is available by
12 phone or email. There were never any times that
13 significant issues presented that she was responsible
14 to handle. Ms. Huff was the NHA at this facility
15 from 2001 to 2018.

16 Ms. Wilson questioned whether Ms. Huff had the
17 opportunity to solve a significant family or resident
18 concern. If so, how was that resolved. Ms. Huff
19 stated there are always resident complaints that
20 center around food and missing items.

21 Ms. Wilson asked about the most common grievances to
22 her facility. Ms. Huff stated most of grievances
23 relate to the food or missing items, which usually
24 end up being found. Occasionally there are
25 grievances about staff members being rude or not

1 reactive to their needs. Food preferences are
2 addressed with different choices and preferences.
3 The grievances are not so big that they cannot be
4 accommodated.

5 Ms. Wilson next asked how COVID has changed the
6 dynamics of the facility or the professionalism of
7 the staff. Ms. Huff stated infection control is much
8 better in the facility since COVID There was one
9 outbreak since she returned to this facility, and it
10 was handled very quickly and able to be contained to
11 just one unit.

12 Mr. Hoffman asked Ms. Huff why she left her role
13 as NHA after 17 years at the building to join an
14 agency nursing company. Ms. Huff explained she got
15 to a point where she did not enjoy it anymore. He
16 questioned what was different at the facility since
17 her return. She stated there are issues in the
18 industry. In a nursing supervisor role, she could
19 only do so much to make a difference. As an NHA, she
20 felt she could make more of a difference in areas
21 that changes needed to be made, especially after
22 seeing difference places that were crappy.

23 Mr. Hoffman questioned the individual in the role
24 of ethics and compliance officer in your building.
25 Ms. Huff stated that is a corporate person, Kevin

1 Williams. He asked if there was a liaison in
2 compliance at the facility that interacts with the
3 corporate compliance officer. She stated that is the
4 ADON. There are compliance and risk meetings in the
5 building, which the corporate compliance officer
6 interacts through TEAMS.

7 Mr. Hoffman questioned the facility's practice to
8 deal with repetitive tardiness or absenteeism by a
9 staff member. Ms. Huff stated there would be a
10 discussion with the staff member to verify and remedy
11 the issue. The staff member would also be advised
12 that if the issue continues, they would follow the
13 disciplinary path.

14 Ms. Chronister asked Ms. Huff to identify the
15 committees she participates in at the facility. Ms.
16 Huff stated QAPI, Infection Control D, Corporate
17 Compliance, and Quality Measures are some. She
18 chairs the Safety Committee, which has recently been
19 revamped. The department heads and staff from the
20 front-line attend. Staff participate and address
21 issues while doing walkthroughs. Certification is
22 obtained through HANDS. Our incidents and near
23 misses are analyzed to develop prevention steps. MDS
24 sheets are reviewed for update and compliance. She
25 is investigating updating their Sharps Certification.

1 Chair Warner-Maroon asked Ms. Huff how she kept
2 updated on the federal regulations since she left
3 this facility. She personally kept updated on the
4 regulations in stay on top of regulations on the
5 nursing end.

6 Ms. Pachter Schulder informed Ms. Huff that the
7 Board will deliberate during Executive Session and
8 report the decision, noting she will also receive a
9 letter with the results but welcomed her to continue
10 to participate virtually for the decision after
11 Executive Session.]

12 ***

13 Appointment - Glenn Jackamonis - NHA Reactivation
14 Applicant

15 [Ilene Warner-Maroon, Ph.D., RN, NHA, Chair, asked Mr.
16 Jackamonis to provide an explanation as to why his
17 licensed lapsed and now requesting reactivation.

18 Mr. Jackamonis stated he just celebrated his 50th
19 year in long-term care. My background started with
20 dietary and then moved into administration in a
21 regional role. He was an administrator in one
22 facility, but shortly thereafter, he was diagnosed
23 with a stage four cancer and given six months to
24 live. That ended his career at that point. He
25 battled cancer for several years thereafter and ended

1 up with two more different cancers.

2 Mr. Jackamonis reported that he just hit the 10-
3 year mark and doing well. He has been working for
4 the Pennsylvania Department of Aging as an ombudsman
5 for roughly 10 years, five years as a volunteer and
6 the last three years as a staff. He oversees 16
7 facilities in Pennsylvania, Montgomery County. He
8 knows regulations in order to follow up on
9 complaints.

10 Ms. Pachter Schulder questioned Mr. Jackamonis as
11 to which category he was seeking in terms of
12 continued competence. She asked him if he had been
13 employed within the last five years as a supervisory
14 or consultant capacity for a nursing home or worked
15 in another state for two of the last five years or
16 teaching. Mr. Jackamonis stated he would do the
17 exam. He is familiar with the regulations and has
18 completed continued education, the required 48 hours,
19 as well as reviewed the study guide. He uses the
20 study guide as a tool in investigating complaints.]

21

22 [The Board recessed from 12:00 p.m. until 12:05 p.m.
23 due to technical difficulties.]

24

25 [Ms. Pachter Schulder informed Mr. Jackamonis that the

1 Board will deliberate during Executive Session and
2 report the decision, noting he will also receive a
3 letter with the results but welcomed him to continue
4 to participate virtually for the decision after
5 Executive Session.]

6 ***

7 Report of the Prosecutorial Division

8 [Trista M. Boyd, Esquire, Board Prosecutor, presented
9 the Consent Agreement for Case No. 21-62-009468.]

10 ***

11 [Robert L. Wernicki, NHA, exited the meeting at 12:13
12 p.m. for recusal purposes.]

13 ***

14 Appointment - Tiffany DeBlasio-Ferrieri - 39.5(b)(A)
15 Applicant

16 [Ilene Warner-Maron, Ph.D., RN, NHA, Chair, informed
17 Tiffany DeBlasio-Ferrieri that the Board would be
18 asking her specific questions about your experience
19 as an AIT and your perceived role as the NHA.

20 Ms. King requested Ms. DeBlasio-Ferrieri describe
21 her current position and her day-to-day
22 responsibilities at her current facility. Ms.
23 DeBlasio-Ferrieri stated she has been the
24 Administrative Assistant at the Kane Community Living
25 Center Scott Facility for a little over two years.

1 She assumes the responsibility in the absence of the
2 administrator from the assigned departments. She
3 explained she would hand any dietary, social services
4 or housekeepers' issues. She would confirm enough
5 staff was present for the day. Ms. DeBlasio-Ferrieri
6 stated the supervisors report to her from all
7 departments daily

8 Ms. King requested Ms. DeBlasio-Ferrieri explain
9 how the meetings with the departments are conducted
10 and how she manages the departments. Ms. DeBlasio-
11 Ferrieri stated the department heads report to her
12 with any issues. Meetings are held with the
13 department heads, the administrator and herself to
14 resolve any issues.

15 Ms. King questioned her skill set with proactively
16 managing the staff. Ms. DeBlasio-Ferrieri stated she
17 meets with the staff only on issues.

18 Ms. King asked Ms. DeBlasio-Ferrieri for her role
19 in completing the facility's last Department of
20 Health survey. Ms. DeBlasio-Ferrieri explained she
21 was part of the entrance and exit conference with the
22 Department of Health. She gathered information on
23 accidents, incidents and grievances nursing
24 schedules, and facility policies.

25 Ms. King asked how many deficiencies were noted,

1 and the scope and severity of the deficiencies. Ms.
2 DeBlasio-Ferrieri stated the facility had two tags
3 that related to accidents and abuse, and the other
4 was on the in-services. Ms. King questioned her role
5 in drafting the plan of correction with regard to the
6 deficiencies. Ms. DeBlasio-Ferrieri offered new
7 ideas to the editing team. She stated the editing
8 team included the department managers that were
9 involved in the actual deficiencies. Ms. King
10 inquired as to her involvement in QAPI and the plan
11 implementation. Ms. DeBlasio-Ferrieri stated there
12 are quarterly meeting with QAPI attended by the
13 medical director, the attending physicians, all
14 department head, and admissions individual. There
15 was directed in-services and re-education with all
16 staff.

17 Ms. King questioned Ms. DeBlasio-Ferrieri as to
18 her role with setting the annual budget. Ms.
19 DeBlasio-Ferrieri stated the facility's budget is
20 from the County Council based on the prior year.
21 Ms. King asked the actual PPD of the facility. Ms.
22 DeBlasio-Ferrieri stated it is 4.0. She was
23 questioned as to what factors are considered with
24 staffing. Ms. DeBlasio-Ferrieri stated the number of
25 LPNs, RNs, and CNAs based by acuity and census.

1 There are fluctuations with scheduling.

2 Mr. Kelly questioned her most challenging issue
3 she has faced in her role as AIT in that facility.
4 Ms. DeBlasio-Ferrieri explained the challenges with
5 the nursing staff. 40 percent of the staff is
6 agency. Ms. Kelly asked her to provide proactive
7 interventions to circumvent the issue of staffing.
8 Ms. DeBlasio-Ferrieri discussed publicizing the great
9 benefits being offered as a county employee.

10 Mr. King questioned whether Ms. DeBlasio-Ferrieri
11 has assumed responsibility for the management of the
12 facility for the whole operation in lieu of the
13 administrator not being present. She stated she has
14 for a day or longer when the administrator is on
15 vacation. Mr. Wilson asked if any significant issues
16 arose that she had to personally handle. She
17 explained the issues were mostly staffing issues.

18 Mr. King asked if she ever interacted with the
19 residents' families. Ms. DeBlasio-Ferrieri stated
20 she is usually the first person called.

21 Ms. Wilson questioned Ms. DeBlasio-Ferrieri's
22 experience solving a significant family or resident's
23 concern. Ms. DeBlasio-Ferrieri reiterated she is the
24 first person of contact with residents. She noted
25 the grievances are referred to the social worker.

1 Ms. Chronister asked what were the common grievances
2 at the facility. Ms. DeBlasio-Ferrieri stated there
3 are not many grievances.

4 Ms. Wilson questioned the change in the dynamics
5 at the facility and the professionalism of the staff
6 since Covid. Ms. DeBlasio-Ferrieri's stated the
7 census used to be about 220, but is now 200. There
8 was an issue with the staff not wearing their name
9 badges. Reminders were distributed regarding
10 following the rules by wearing the correct uniform or
11 be reprimanded.

12 Mr. Hoffman asked Ms. DeBlasio-Ferrieri to outline
13 the deficiency related to an allegation of abuse.
14 Ms. DeBlasio-Ferrieri stated an agency aide rolled a
15 resident and the resident fell out of bed incurring a
16 fracture. She worked with the editing team in the
17 meetings on the matter.

18 Mr. Hoffman asked Ms. DeBlasio-Ferrieri her
19 understanding of the role and responsibilities of a
20 licensed nursing home administrator. Ms. DeBlasio-
21 Ferrieri stated it would be to oversee the whole
22 facility and taking on all of the responsibilities
23 every day to protect the residents and staff.

24 Mr. Hoffman questioned Ms. DeBlasio-Ferrieri as to
25 her role with the rehabilitation department. Ms.

1 DeBlasio-Ferrieri stated there are nurses' meetings
2 every morning at 8:30 a.m. where day-to-day issues
3 with residents and the care needed and given are
4 discussed. Advanced Therapy is the name of the rehab
5 center. The different issues with each resident on
6 each unit in therapy are discussed. Education on the
7 equipment being used, such as wheelchair and walkers,
8 is reviewed.

9 Mr. Hoffman questioned Ms. DeBlasio-Ferrieri's
10 involvement with the admissions process for new
11 admissions of residents to ensure their safety. Ms.
12 DeBlasio-Ferrieri stated she receives emails on the
13 specifics of new admission residents.

14 Mr. Hoffman questioned whether Ms. DeBlasio-
15 Ferrieri is involved in the process of coordination
16 amongst MDs, therapy, nursing, and evaluating the
17 residents. Ms. DeBlasio-Ferrieri stated she is not
18 involved all of the time.

19 Mr. Hoffman questioned Ms. DeBlasio-Ferrieri's
20 approach to deal with repetitive tardiness or
21 absenteeism by a staff member. Ms. DeBlasio-Ferrieri
22 explained there is a system of attendance every
23 quarter. For any employee absent more than five
24 times a quarter, the progressive disciplinary action
25 is initiated.

1 Ms. Chronister asked Ms. DeBlasio-Ferrieri is she
2 reported into the event report system. Ms. DeBlasio-
3 Ferrieri stated she has not. Ms. Chronister asked
4 Ms. DeBlasio-Ferrieri to identify the committees she
5 participates in at the facility. She stated QAPI,
6 Safety, and Infection Control. There are
7 quarterly or yearly meetings with the risk manager
8 and the department heads.

9 Chair Warner-Maron noted questions asked of Ms.
10 DeBlasio-Ferrieri regarding staffing and acuity.
11 She asked her whether a resident with advanced
12 dementia, who has behavioral issues and needs to be
13 cued over and over again, is more acute or less acute
14 than somebody who is in bed with a tracheostomy. Ms.
15 DeBlasio-Ferrieri stated more acute, because the
16 dementia patient would need more care.

17 Chair Warner-Maron questioned Ms. DeBlasio-
18 Ferrieri regarding the language in the federal
19 regulations regarding the staffing of nurses in a
20 nursing home. Ms. DeBlasio-Ferrieri could not
21 answer.

22 Ms. Pachter Schulder ask who would normally be
23 responsible for that compliance in her facility. Ms.
24 DeBlasio-Ferrieri stated it would be the compliance
25 officer.

1 Chair Warner-Maron questioned Ms. DeBlasio-
2 Ferrieri whether she had taken the 120-hour course,
3 which she replied she had and did not recall the
4 nursing staffing regulation being discussed.

5 Ms. Pachter Schulder informed Ms. DeBlasio-
6 Ferrieri that the Board will deliberate during
7 Executive Session and report the decision, noting she
8 will also receive a letter with the results but
9 welcomed her to continue to participate virtually for
10 the decision after Executive Session.]

11 ***

12 [Robert L. Wernicki, NHA, reentered the meeting at
13 12:36 p.m.]

14 ***

15 Report of Board Counsel

16 [Judith Pachter Schulder, Esquire, Board Counsel,
17 revisited discussion from the Board's previous
18 meeting about send the regulation out for pre-draft
19 input regarding a mandatory course. She noted the
20 nominal number of stakeholders on the Board's
21 stakeholder's list and presented the listing of
22 organizations on the list for the Board's review.

23 Chair Warner-Maron remarked that PADANA, Pennsylvania
24 Association of Directors of Nursing; PANAC,
25 Pennsylvania Association of Nurse Assessment

1 Coordinators; and PAMDA, Pennsylvania Medical
2 Directors Association were not listed. Mr. Hoffman
3 noted that Penn State was also not included. Chair
4 Warner-Marion stated the contacts for the Center for
5 Advocacy Rights and PCOM were not correct, and she
6 would provide a name for PCOM. Mr. King suggested
7 the Pennsylvania Health Care Association be added to
8 the list. Ms. Pachter Schulder requested the Board
9 members to provide any additional organizations to be
10 added to the list to her.

11 Ms. Pachter Schulder stated the requested blast
12 was sent to licensees, and no comments were
13 received.]

14 ***

15 Report of Board Chairperson

16 [Ilene Warner-Marion, Ph.D., RN, NHA, Chair, noted
17 they had the ratification of two temporary permit
18 applications, Randall Morris and Gregory Toot.]

19 MS. PACHTER SCHULDER:

20 Is there a motion to ratify the
21 granting of a Temporary Permit
22 Application to Randall Morris and a
23 Temporary Permit Extension to Gregory
24 Toot?

25 MR. HOFFMAN:

1 So moved.

2 MR. WERNICKI:

3 Second.

4 MS. BOWERS:

5 Warner-Maron, aye; Sara King, aye;
6 Hoffman, aye; Chronister, aye; Kelly,
7 aye; Francis King, aye; Wernicki, aye;
8 Wilson, aye.

9 [The motion carried unanimously.]

10 ***

11 Approval of minutes of the August 14, 2024 meeting

12 CHAIR WARNER-MARON:

13 We will move on to the approval of
14 minutes from August 14, 2024.

15 Were there any clarifications,
16 corrections to minutes as they are
17 stated? If not, can we have a motion
18 for the approval of the meeting minutes
19 from last time?

20 MR. HOFFMAN:

21 So moved.

22 MR. WERNICKI:

23 Second.

24 MS. BOWERS:

25 Warner-Maron, aye; Sara King, aye;

1 Hoffman, aye; Chronister, abstain;
2 Kelly, aye; Francis King, aye;
3 Wernicki, aye; Wilson, aye.

4 [The motion carried. Ann Chronister abstained from
5 voting on the motion.]

6 ***

7 Report of Board Administrator - No Report

8 ***

9 Report of Committees - AIT Review Committee

10 [Robert L. Wernicki, NHA, reported the AIT Review
11 Committee approved the following 15 applications:
12 Daniel Salamanca, Mackeeme Chance, Ashley Zacherl,
13 Brian Zemke, Donna Daniels-Walters, Eric Swiech,
14 Nicole Zdunowski, Sara Kelly, Ticora Marable, Ciera
15 Bobbitt, Aliegh Kradel, Hannal Neal, Keely McMorrow,
16 and Amber Heller.]

17 ***

18 Report of Committees - Examination Committee

19 [The Board discussed obtaining verification of credit
20 scores and degrees.

21 Deidre Bowers noted the following were approved
22 for AIT: Godwin Manilal, Aharon Weitzner, Thomas
23 Reckner, Kevin Lofton, George Aufschlag, Yesroel
24 Eichenblatt, William Etchells, Diana Ramos, Chaim
25 Gaerman, Celeste Foltz, Therese Boyle, and Sadie

1 Thompson.]

2

3 [Ilene Warner-Maron, Ph.D., RN, NHA, Chair, stated
4 the following were approved by endorsement:

5 Katherine Conant, Jennifer Terriaco, Lisa Corley,
6 Randal Morris, and Kimball Allowitz.

7 The following were approved by exam, completing
8 the AIT program: Julian Whitfield, Sally Miller,
9 Alyssa Opiary, Michael Nalbone, and Rhonda Hauser.]

10

11 [Ilene Warner-Maron, Ph.D., RN, NHA, Chair, noted
12 information from the Continuing Education Committee.

13 The following were approved: Rehabilitation and
14 Specialized Services Fiscal Management; Government and
15 Third Party; Dietary Department and Resident
16 Nutrition; Exploring the Interplay Amongst Chronic
17 Disease, Chronic Wounds, and Social Determinant of
18 Health; Hospice 101; FAQs Regarding End of Life; Guide
19 for Assisting the Seriously Ill Consumer: 7 Steps to
20 Get Affairs in Order; Ethical Issues for Elder Care
21 Professionals; 2024 Hero LTC Rise Continuing Education
22 Infection Prevention and Control/Emergency
23 Preparedness in LTC; 21st Annual William J. Neff
24 Senior Symposium on Prevention of Crimes Against Older
25 Adults; Medicare Observation Status of Improvement

1 Standards in Skilled Nursing Facilities: What
2 Advocates and Consumers Need to Know About Planning
3 for Loved Ones with Special Needs; A Primer on Older
4 Adult Protective Services in Pennsylvania and PA's
5 Power of Attorney; Anatomy of an Elder Care Crisis;
6 Current Options in Health Care; Bucks County Agency on
7 Aging.]

8

9 Discussion Items - HSE Qualification Standard
10 [Ilene Warner-Maron, Ph.D., RN, NHA, Chair, noted a
11 proposal by NAB to include the personal care
12 regulations and the nursing home regulations. The
13 proposal will be discussed at the Board's next
14 meeting. Mr. Wernicki stated the issue related to
15 the number of training hours.]

16

17 FYI Items

18 [Ilene Warner-Maron, Ph.D., RN, NHA, Chair, noted
19 CMS's new staffing regulations. An email blast was
20 sent on the matter to the licensees to which no
21 comments were received.

22 NAB exam is being changed. Ms. Pachter Schulder
23 suggested placing information on the Board's website
24 announcing the ability to take the examination
25 between December 15, 2024, and January 2, 2025.]

1

2 [Pursuant to Section 708(a)(5) of the Sunshine Act,
3 at 1:01 a.m. the Board entered into Executive Session
4 with Judith Pachter Schulder, Esquire, Board Counsel,
5 to conduct quasi-judicial deliberations on the
6 matters on the agenda. The Board returned to open
7 session at 1:31 p.m.]

8

9 MOTIONS

10 MS. PACHTER SCHULDER:

11 During Executive Session, the Board
12 engaged in quasi-judicial deliberations
13 on the matters on the agenda, the
14 consent agreements as well as the
15 appointments.

16 The Board members who recuse
17 themselves will be identified in the
18 particular motions.

19 Is there a motion to deny as
20 written the Consent Agreement in item
21 number 21-62-009468?

22 MR. HOFFMAN:

23 So moved.

24 MR. WERNICKI:

25 Second.

1 MS. BOWERS:

2 Warner-Maroon, aye; Sara King, aye;
3 Hoffman, aye; Chronister, aye; Kelly,
4 aye; Francis King, aye; Wernicki, aye;
5 Wilson, aye.

6 [The motion carried unanimously.]

7 ***

8 MS. PACHTER SCHULDER:

9 Is there a motion to table the
10 Application of Jennifer Graff for a
11 Nursing Home Administrator's license
12 until such time as she comes back to the
13 Board and presents information with
14 regard to specific challenges in the
15 facility, other than those involving
16 staffing, demonstrates her problem
17 solving capabilities within the facility
18 that are not financially related and
19 identification of staffing and federal
20 regulations and other staffing
21 requirements, as well as indicates
22 specific QAPI interventions that she has
23 been involved in, and finally, quality of
24 care issues?

25 MR. HOFFMAN:

1 So moved.

2 MR. WERNICKI:

3 Second.

4 MS. BOWERS:

5 Warner-Maroon, aye; Sara King, aye;
6 Hoffman, aye; Chronister, aye; Kelly,
7 aye; Francis King, aye; Wernicki, aye;
8 Wilson, aye.

9 [The motion carried unanimously.]

10 ***

11 MS. PACHTER SCHULDER:

12 Is there a motion to approve the
13 Application of Betsy Jo Huff for
14 reactivation under section 39.11 of the
15 regulations?

16 MR. HOFFMAN:

17 So moved.

18 MR. WERNICKI:

19 Second.

20 MS. BOWERS:

21 Warner-Maroon, aye; Sara King, aye;
22 Hoffman, aye; Chronister, aye; Kelly,
23 aye; Francis King, aye; Wernicki, aye;
24 Wilson, aye.

25 [The motion carried unanimously.]

1 ***

2 MS. PACHTER SCHULDER:

3 Is there a motion to grant the
4 Reactivation Application of Glenn
5 Jackamonis subject to his taking and
6 passing the licensure examination to
7 demonstrate his competence pursuant to
8 section 39.11 of the regulations?

9 MR. HOFFMAN:

10 So moved.

11 MR. WERNICKI:

12 Second.

13 MS. BOWERS:

14 Warner-Maroon, aye; Sara King, aye;
15 Hoffman, aye; Chronister, aye; Kelly,
16 aye; Francis King, aye; Wernicki, aye;
17 Wilson, aye.

18 [The motion carried unanimously.]

19 ***

20 MS. PACHTER SCHULDER:

21 Finally, in for the matter in which Mr.
22 Wernicki is recused, and that's the
23 application of Tiffany De Blasio Ferrari
24 under Section 39.5 of the Regulations, is
25 there a motion to table her Application

1 and have her come back to the Board, at
2 which time she must demonstrate to the
3 Board her experience with plans of
4 correction, her specific autonomy and
5 leadership role that she has taken, the
6 instances of more direct engagement in
7 the nursing home administrator capacity
8 rather than in an administrative
9 assistant capacity, a demonstration of
10 root cause analysis, information with
11 regard to her understanding of
12 regulations and staffing involved in the
13 nursing areas, and also her demonstration
14 that she has, in fact, filed an event
15 report and developed a plan of
16 correction?

17 MR. HOFFMAN:

18 So moved.

19 MS. WILSON:

20 Second.

21 MS. BOWERS:

22 Warner-Marion, aye; Sara King, aye;
23 Hoffman, aye; Chronister, aye; Kelly,
24 aye; Francis King, aye; Wernicki,
25 recuse; Wilson, aye.

1 [The motion carried. Richard L. Wernicki, NHA,
2 recused himself from deliberations and voting on the
3 motion.]

4 ***

5 Upcoming Meeting Dates

6 [Ilene Warner-Maron, Ph.D., RN, NHA, Chair, noted the
7 next meeting will be February 5th, 2025. The other
8 dates are listed May 7th, August 6th, and November
9 5th, 2025.]

10 ***

11 Adjournment

12 MR. HOFFMAN:

13 Motion to adjourn.

14 MR. WERNICCKI:

15 So moved.

16 CHAIR WARNER-MARON:

17 Thanks everyone.

18 ***

19 [There being no further business, the State Board of
20 Examiners of Nursing Home Administrators Meeting
21 adjourned at 1:38 p.m.]

22 ***

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CERTIFICATE

I hereby certify that the foregoing summary minutes of the State Board of Examiners of Nursing Home Administrators, was reduced to writing by me or under my supervision, and that the minutes accurately summarize the substance of the State Board of Examiners of Nursing Home Administrators meeting.



Jacob Hill,
Minute Clerk
Sargent's Court Reporting
Service, Inc.

STATE BOARD OF EXAMINERS OF
NURSING HOME ADMINISTRATORS
REFERENCE INDEX

November 6, 2024

	TIME	AGENDA
1		
2		
3		
4		
5		
6		
7		
8		
9	10:00	Executive Session
10	10:30	Return to Open Session
11		
12	10:37	Official Call to Order
13		
14	10:38	Roll Call
15		
16	10:38	Introduction of Attendees
17		
18	10:39	Report of Acting Commissioner
19		
20	10:50	Appointment - Jennifer Graff -
21		39.5(b)(5)(A) Applicant
22		
23	11:25	Appointment - Betsy Jo Huff -
24		NHA Reactivation Applicant
25		
26	11:55	Appointment - Glenn Jackamonis -
27		NHA Reactivation Applicant
28		
29	12:00	Recess
30	12:05	Return to Open Session
31		
32	12:08	Report of Prosecutorial Division
33		
34	12:14	Appointment - Tiffany DeBlasio-Ferrieri
35		- 39.5(b)(5)(A) Applicant
36		
37	12:40	Report of Board Counsel
38		
39	12:42	Report of Board Chairperson
40		
41	12:42	Approval of Minutes
42		
43	12:43	Report of Committees
44		
45	1:01	Executive Session
46	1:31	Return to Open Session
47		
48	1:31	Motions
49		
50	1:38	Adjournment