

August 6, 2024

VIA EMAIL AND POSTAL SERVICE DELIVERY

Ms. Taylor Corpening
Rule Review Manager
Division of Health Service Regulation
2701 Mail Service Center
Raleigh, North Carolina 27699

Re: Proposed Changes to Medical Care Commission Rules Related to Adult Care Homes- Comments from Ridge Care Senior Living, Inc.

Dear Ms. Corpening,

On behalf of the four North Carolina Adult Care Homes Ridge Care Senior Living, Inc., operates, I write to express concern about the proposed changes to the Medical Commission Rules that were published on June 17, 2024.

Of particular concern to our organization are the changes proposed to 10A NCAC 13F .0309.

With regard to the proposed changes related to quarterly fire evacuation rehearsals, it is our opinion that:

- 1. The term "rehearsals" when used in connection with fire evacuation plans is unnecessarily vague and could be interpreted to mean that residents and staff must be fully evacuated from facilities once each quarter.
- 2. Evacuation drills will almost certainly put our residents, many of whom require staff assistance or the use of assistive medical devices to safely ambulate, at risk of physical injury when required to quickly exit the building for a drill.
- 3. For residents who suffer from cognitive impairment, unnecessary evacuation drills will almost certainly lead to fear, anxiety, and the exacerbation of behaviors that are otherwise well-managed.

We feel strongly that the language contained within this proposed rule needs further evaluation for clarity and intent. Furthermore, we contend that the current rules for evacuation preparation are wholly sufficient and require no amendment.

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With regard to the proposed changes related to emergency preparedness plans, it is our opinion that:

- 1. While the agreements required may seem necessary and appropriate in theory, in practice, they are simply not worth the paper they are printed on. As a result of Hurricane Florence in 2018, we evacuated more than 100 residents from Adult Care Home facilities in three coastal counties. Although we had long-standing transportation and sheltering agreements in place with numerous organizations and providers, *none* of them were able to actually provide the services they had previously agreed to provide. Instead of relying on agreements that could not possibly be enforced, we did what needed to be done to protect our residents and our staff based on the unique circumstances that were unfolding around us. To that end, rather than being helpful, the existence of such agreements may have been counterproductive and given our facility leadership a false sense of security that needed resources would be available when needed. The reality is, it is a fool's errand for a facility to attempt to plan every detail of every eventuality.
- 2. As outlined in the fiscal note, the financial impact of the proposed requirements on facilities has been meaningfully understated.
- 3. The staff time that will be necessary to ensure compliance with the requirements created by the changes to this rule will be onerous on all facilities, and particularly on smaller, regional providers like Ridge Care Senior Living.

Given that the current rules are sufficient as they exist today, we strongly encourage the Medical Commision to enjoin the homespun wisdom of the idiom "If it ain't broke, don't fix it," and reject these proposals.

Kind regards,

Marc A. Maready

Chief Operating Officer