



December 27, 2021

SC Department of Health & Environmental Control  
Office of General Counsel  
2600 Bull Street  
Columbia, South Carolina 29201

To Whom It May Concern:

I am writing on behalf of the members of the South Carolina Assisted Living Association (SCALA) regarding the notice published in the State Register on November 26, 2021 indicating review of regulations included in Regulation 61-84. As we understand it, the process allows us initial comments through December 29, 2021. We want to inform the Department that we are vitally interested and wish to be involved in every detail of this review and revision process.

At this time, we are providing feedback we received from our membership regarding suggestions for the review of Regulation 61-84. We requested members send us their suggestions for the regulations and also submit individually their suggestions to DHEC should they have any additional comments we have not included. Please find the proposed changes SCALA members provided to us by our requested deadline.

We look forward to being actively involved and look forward to assisting in this revision process. Please call me with any questions you may have at (803) 851-6308 or email to [MBailey@scassistedliving.org](mailto:MBailey@scassistedliving.org).

Sincerely,

A handwritten signature in black ink that reads "Melody R. Bailey". The signature is written in a cursive, flowing style.

Melody R. Bailey, Executive Director  
South Carolina Assisted Living Association

## Regulation 61-84 proposed Changes

### Section 503. Staff

B. The number and qualifications of staff members/direct care volunteers shall be determined by the number and condition of the residents. There shall be sufficient staff members/direct care volunteers to provide supervision, direct care and basic services for all residents. The minimum number of staff members/direct care volunteers that shall be maintained in all facilities:

B.1. In each building, there shall be at least one staff member/direct care volunteer for each eight residents or fraction thereof on duty during all periods of peak hours.

**Remove or fraction thereof – to confusing.**

B.2. In each building, during non-peak hours, there shall be at least one staff member/volunteer on duty for each thirty residents or fraction thereof. A staff member/volunteer shall be awake and dressed at all times. Staff member(s)/Volunteer(s) shall be able to appropriately respond to residents needs during non-peak hours. **Remove or fraction thereof – to confusing.**

### Section 504. Inservice Training

A.3. Management/care of persons with contagious and/or communicable disease, e.g., hepatitis, tuberculosis, HIV infection. **Add Flu, COVID, and C-Diff to this list.**

### Section 1101. Resident Physical Examination and TB Screening.

A. A physical examination shall be completed for residents within thirty (30) days prior to admission and at least annually thereafter. Physical examinations conducted within thirty (30) days prior to admission by physicians licensed in states other than South Carolina are permitted for new admissions under the condition that residents obtain an attending physician licensed in South Carolina within thirty (30) days of admission to the facility and undergo a second (2<sup>nd</sup>) physical examination by that physician within thirty (30) days of admission to the facility. The physical examination shall be updated to include new medical information if the resident's condition has changed since the last physical examination was completed. The physical examination shall address: **Change the verbiage from physician to physician or other authorized health care provider – so that NP's and PA's can also complete this paperwork.**

## SHELTER IN PLACE REQUEST for Community Residential Care Facilities

R.61-17 (Standards For Licensing Nursing Homes) has a sub-section under SECTION 1500-EMERGENCY PROCEDURES AND DISASTER PREPAREDNESS that allows nursing homes (in certain coastal counties) to request a "shelter in place" exemption to certain mandatory evacuation orders. R.61-84 (Standards For Licensing Community Residential Care Facilities) does not contain a similar sub-section, that allows any CRCF to sheltering in place. Most modern assisted living facilities meet or exceed the construction standards of many modern nursing homes. These CRCF's have generators, plenty of storage, and meet the engineering requirements to withstand the same winds as most coastal nursing homes. Since the CRCF would have to meet the same requirements as current nursing homes (Critical Data Sheet, Engineer's report, etc.) please consider adding a "shelter in place" caveat to 61-84 like we have in 61-17. An example is below;

### SECTION 1400—EMERGENCY PROCEDURES/DISASTER PREPAREDNESS

#### 1401. Disaster Preparedness (II)

##### Add new subsection (C.)

C. Only those licensed community residential care facilities located in the coastal counties of Beaufort, Charleston, Colleton, Horry, Jasper, or Georgetown may request exemption from an evacuation order.

1. Facilities in the above counties may elect to seek an exemption from having to evacuate the facility in the event the Governor issues a Mandatory Evacuation Order for an impending hurricane. Facilities located in Beaufort, Charleston, Colleton, Horry, Jasper, or Georgetown counties may request an exemption from an emergency evacuation order if the facility has previously submitted the following to the Department:

a. A Critical Data Sheet, updated annually, that certifies emergency power supply is available for a minimum of seventy-two (72) hours, a seventy-two (72) hour supply of food, water, and medical supplies is on site, and adequate staff will be available and on duty to provide continual care.

b. A copy of the engineer's report concerning the wind load the facility should withstand;  
and

c. A current approved evacuation plan prior to the declared emergency.

2. Once the prerequisites are met and an emergency has been declared, the facility shall draw down the census of the facility and then contact the Department to request an exemption from the evacuation order.

3. A facility shall comply with the mandatory evacuation order unless an exception from the evacuation of the facility for a specific storm has been received from the Department.



## SECTION 1700: INFECTION CONTROL AND ENVIRONMENT

### RESIDENT PHYSICAL EXAMINATION AND TUBERCULOSIS SCREENING (I)

(SC went down 16.7 percent and has a 1.3 rate of TB (67 cases), this should not require a two-step PPD on hire or new admits, suggest screening or one step, or based on TB risk assessment, with some changes to the requirements.)

1703. Staff Tuberculosis Screening- a two-step process should not be required with the rate of TB, and should be based on risk assessment, for example if risk assessment identifies low, then no PPD just screen or one step PPD is required, this should be for both residents and employees, as well as SNF, AL and Hospice.

1704. Resident Tuberculosis Screening (I) - a two-step process should not be required with the rate of TB, and should be based on risk assessment, for example if risk assessment identifies low, then no PPD just screen or one step PPD is required, this should be for both residents and employees, as well as SNF, AL and Hospice.

We also suggest to include an emergency admission process for residents needing emergency admission, outside of those on APS caseload, if APS is allowed for emergency then an established protocol should be in place for SNF, AL and Hospice.