

MICROFILM DIVIDER

OMB/RECORDS MANAGEMENT DIVISION
SFN 2053 (2/85) 5M



ROLL NUMBER

DESCRIPTION

1488

2007 HOUSE HUMAN SERVICES

HB 1488

2007 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. HB 1488

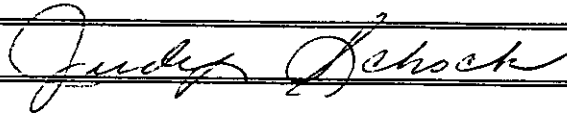
House Human Services Committee

Check here for Conference Committee

Hearing Date: January 23, 2007

Recorder Job Number: 1623

Committee Clerk Signature



Minutes:

Chairman Price: Opening the hearing on HB 1488.

Representative Gary Kreidt, District 33: This bill came forward after the interim that was studied, and in regards to survey process in basic care facilities, and also the safety survey.

Since 2005 the health department has regular surveys. They have 50% announced and 50% unannounced. With the unannounced when the health department shows up at facilities. On announced the staff is available during the survey process.

Shelly Peterson, President of the ND Long Term Care Association: See attached testimony. We have fewer deficiencies when announced.

Deb Magnuson, RN plus administrator of a Basic Care Facility in Fargo: See attached testimony.

Bruce Boyaurd, owner of a 28 bed Alzheimer basic care facility: I too am in favor of announced surveys. The staff does get nervous. We have had announced and unannounced surveys. I agree with the others that have testified.

Linda Johnson Wurtz, Associate State Director for Advocacy for AARP ND: See attached testimony.

Bruce Pritschet, Director of the Division of Health Facilities for the ND Department of Health: See attached testimony, and collected data attached to testimony.

Chairman Price: On the understaffing previous testimony said that you would take a look at past payroll records and staffing.

Mr. Pritschet: We do not review the payroll records. We look at the staffing schedules for the prior two weeks.

Chairman Price: You would pick it up than if it was understaffed?

Mr. Pritschet: It is possible that we would.

Chairman Price: You mentioned jay co, they have totally changed the way they are doing their surveys and not requiring a lot of somewhat a partnership working through paces type thing. Are you looking at doing some your changing on that?

Mr. Pritschet: Our process of survey is pretty well defined in the administrative rules. We have had no discussion of changing at this point in how we set up surveys.

Chairman Price: And on who is announced and unannounced they suggested that you can pick those that you wish that in the future may have a higher potential for deficiencies. How have you done it in the past two years?

Mr Pritschet: We have looked over the list and given input on which we felt would be okay to announce.

Chairman Price: So basically you would do unannounced on those with higher potential?

Mr. Pritschet: Based on some criteria that were set up for the pilot project. I believe that is correct.

Chairman Price: Any further opposition? If not we will close the hearing on HB 1488

2007 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. HB 1488

House Human Services Committee

Check here for Conference Committee

Hearing Date: January 23, 2007

Recorder Job Number: 1726

Committee Clerk Signature

Judy Dehock

Minutes:

Chairman Price: Take out HB 1488 for discussion. Just to be clear, if you are doing anything on life safety codes, like fire etc. they are announced surveys.

The committee discusses announced and unannounced surveys. On the health surveys with ½ announced and ½ unannounced as it has been in the past few years. The department gets to pick who is announced and who is not. Mr. Pritchard said they tend to pick those that they expect are going to be bigger violators or have more deficiencies for the unannounced surveys. We found a good mechanism the facilities are working with, and a mechanism that works well according to their outcome. Committee thinks they should keep it going. They do not need a complaint before they do an announced survey for health, for safety yes. For health portions if in compliance it may again be unannounced. They are doing inspections on the rule we asked them to do the last session, on 50, 50. Some of the committee felt we were putting things in convenience for the facility not safety. Some units like for the families to come in and the families like coming to surveys.

Representative Weisz makes a motion for a do pass, **Representative Hatlestad** seconds the motion. 9 yeas, 2 nays, and 1 absent. **Representative Hatlestad** to carry to the floor.

FISCAL NOTE
 Requested by Legislative Council
 03/29/2007

Amendment to: HB 1488

1A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2005-2007 Biennium		2007-2009 Biennium		2009-2011 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures			\$40,000			
Appropriations						

1B. **County, city, and school district fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

2005-2007 Biennium			2007-2009 Biennium			2009-2011 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

2A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

This bill relates to the survey of basic care facilities, changing the current unannounced survey process, to an announced survey process for 100 % of the Life Safety Code Surveys and 50% of the Program Surveys and an addition of a two tiered system for identification of non compliance.

B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

This bill will result in rule making in consultation with basic care providers related to 100% announced life safety code surveys and 50% announced health program surveys as well as development of a two tiered system of identification of non compliance.

It does take some additional staff time with paperwork and contacts to the facility to announce the surveys. This bill also directs us to study the outcome of this rule change and report back to legislative council by August 1, 2008.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

The amount needed to work with providers to go through the rule making process is \$10,000 or less.

If the department performs the study and provides the report to legislative council regarding the impact of implementation there will be no fiscal impact. If the department needs to hire an independent contractor we estimate the cost to be \$30,000.

C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

Name:	Kathy J. Albin	Agency:	Department of Health
Phone Number:	328.4542	Date Prepared:	03/29/2007

FISCAL NOTE
 Requested by Legislative Council
 01/16/2007

Bill/Resolution No.: HB 1488

1A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2005-2007 Biennium		2007-2009 Biennium		2009-2011 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures						
Appropriations						

1B. **County, city, and school district fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

2005-2007 Biennium			2007-2009 Biennium			2009-2011 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

2A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

This bill relates to the survey of basic care facilities, requiring the department to change the current unannounced survey process, to an announced survey process for 100 % of the Life Safety Code Surveys and 50% of the Program Surveys. All complaints would remain unannounced.

B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

It will take some additional staff time for paperwork and contacts to the facility to announce the surveys, and rulemaking would be required to change the current regulation for all surveys to be unannounced. However, the amount is less than \$5,000 and will be absorbed in the department's budget.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

Name:	Kathy J. Albin	Agency:	Health
Phone Number:	328.4542	Date Prepared:	01/22/2007

Date: 4/23
Roll Call Vote #: 1

2007 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. "Click here to type Bill/Resolution No."

House HUMAN SERVICES HB 1488 Committee

Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken Move As pass

Motion Made By Rep Weisz Seconded By Rep Hatlestad

Representatives			Representatives		
	Yes	No		Yes	No
Clara Sue Price – Chairman	✓		Kari L Conrad		
Vonnie Pietsch – Vice Chairman	✓		Lee Kaldor		✓
Chuck Damschen	✓		Louise Potter	✓	
Patrick R. Hatlestad	✓		Jasper Schneider		✓
Curt Hofstad	✓				
Todd Porter	✓				
Gerry Uglem	✓				
Robin Weisz	✓				

Total (Yes) 9 "Click here to type Yes Vote" No 2 "Click here to type No Vote"

Absent 1

Floor Assignment Rep Hatlestad

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE (410)
January 24, 2007 7:59 a.m.

Module No: HR-16-1099
Carrier: Hatlestad
Insert LC: . Title: .

REPORT OF STANDING COMMITTEE

HB 1488: Human Services Committee (Rep. Price, Chairman) recommends DO PASS
(9 YEAS, 2 NAYS, 1 ABSENT AND NOT VOTING). HB 1488 was placed on the
Eleventh order on the calendar.

2007 SENATE HUMAN SERVICES

HB 1488

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. HB 1488

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 3-20-07

Recorder Job Number: 5340, 5356

Committee Clerk Signature

Mary K Monson

Minutes:

Chairman Senator J. Lee opened the hearing on HB 1488 relating to state department of health surveys of basic care facilities.

Representative Gary Kreidt (District #33) introduced HB 1488 and reported that the interim budget committee on health care looked at this process which was, at that time, a pilot project with respect to announced and unannounced surveys for basic care facilities in ND. Testimony was heard and discussions took place but no recommendations came from the committee. He was asking for continuation of the 50% announced and 50% unannounced surveys for basic care facilities. The life safety surveys would continue to be unannounced.

He also proposed an additional amendment (attachment #1) to create a new section which would start up a demonstration project for voluntary surveys during construction or renovation of basic care and long term care facilities (meter 04:30). At the time of completion when the architect, engineer, administrator, and contractor are doing the walkthrough of the completion and turning the project over to the facility also have someone there from the life safety division.

At that time if they see something that doesn't meet compliance it can be brought to the attention of the facility and the architect. Then, possibly changes can be made and corrected before the situation where the facility has signed off and six months or so down the road life safety division comes in for a survey and finds numerous things out of compliance.

This amendment says that facilities can ask to have this process available. It is a cost to the department but they can assess a reasonable fee to the facility for this service.

Senator Heckaman asked what the role of the state department is now when renovations or construction is being done.

Rep. Kreidt explained that the plans for construction or renovation have to be submitted to the division of life safety with the department. They are reviewed and if there are problems those changes are made at that time. Once into the process, if there are changes, those orders must be submitted to the department and must meet their approval.

Senator J. Lee stated that the problem has been that plans have been submitted and either no change was made or made and approved. After the project is completed and the final inspection is done then the facility is being told there is a problem and the facility has to make the changes.

It comes down to a communication issue.

Shelly Peterson (President, NDLTTC Association) testified in support of HB 1488 and submitted written testimony (attachment #2). They are in support also of the proposed amendment from Rep. Kreidt. One of the areas of greatest frustration is during renovation and construction. Facilities work hard to be in compliance and they think they are in compliance. When they seal up the building and occupy it, then later have a

life safety inspection and find out that they need to make changes, it is very costly and frustrating.

Senator J. Lee asked her for a comparison of inspections or surveys for basic care facilities and long term facilities.

Ms. Peterson said the survey process for skilled nursing facilities is dictated by the federal government. It is a much regulated process and under the Social Security Act it is required that they all be unannounced for nursing facilities (meter 25:50).

Basic care is totally regulated by the legislature. The health portion surveys occur once every two years—that's the goal (meter 26:37).

Senator J. Lee also asked Ms. Peterson to explain the difference between basic care and long term care or skilled care and assisted living.

(Meter 27:24) Ms. Peterson explained the three residential settings with services.

Senator Erbele asked what things are looked at in life safety inspections.

Ms. Peterson replied they look at the health needs of the residents. They look to see if there is sufficient staff should there be a fire. They look at such things as smoke penetration, fire walls, ductwork, fire drills, etc.

Senator Heckaman asked if those things are addressed in the general inspection for the annual licensing.

Ms. Peterson said that the health survey is different than the life safety survey. The life safety survey checks compliance with life safety regulations. The health portion looks at the needs of the residents and if their health care needs are being met (meter 32:30).

Generally a basic care survey is done by one individual spending one to two days in the facility. The life safety inspections could be a three or four hour in section.

Senator Heckaman asked about the recommended frequency of the survey.

Ms. Peterson answered that they would recommend the frequency remain the same as it is—once every two years.

Senator Dever asked if the definition of the time frame involved with an announced survey is defined somewhere.

Ms. Peterson thought it might be in an administrative rule. They can slide them if there isn't sufficient staff to get out and survey.

Senator Dever referred to the amendment and asked how many renovation/construction projects are typically around the state within a years time.

(Meter 34:30) Ms. Peterson guessed there would probably be about a dozen.

Senator Dever struggled with the concept because the health department already has responsibility for preliminary approval of life safety issues and change orders throughout the process.

Ms. Peterson said that sounds really good but it doesn't quite work that way. (Meter 36:19) She went on to give examples of problems that arise and examples of how this pilot project would be beneficial.

Senator Heckaman asked why the health department can't do the surveys now.

Ms. Peterson said the health department has indicated that they do not have sufficient staff.

Deb Magnuson (Administrator of a Basic Care Facility in Fargo) See attached testimony #3 in support of HB 1488.

Senator Erbele asked what items are specific to look at in the health surveys.

Ms. Magnuson said the health survey piece looks specifically at resident health and care issues. Safety looks more at the building and the facility safety.

Senator Dever asked what she meant by a concern that announced surveys will present a hazard to the seniors of ND.

Ms. Magnuson said she was speaking about testimony she heard in the House. The testimony against talked about this being dangerous to seniors. She didn't see how that would be.

There was fear that somehow the facilities would have time to hide something.

There was no further testimony in favor of HB 1488.

Bruce Pritschet (Director, Division of Health Facilities, ND DOH) testified in opposition to HB 1488. See attached testimony #4.

Senator J. Lee asked if there were any consistencies in the citations that were found in the announced and unannounced—any data that there was more of one kind than another deficiency noted between the two surveys.

(Meter 57:45) Mr. Pritschet reported that for unannounced surveys there were 27 citations from the governing body. He explained what some of those might be. The assessment and care plan process was cited 18 different tags.

From the announced surveys governing body was cited in one facility. The fire safety was cited in three facilities. The education program was cited in two facilities. Resident care and care plans were cited in three facilities for the announced and six in the unannounced. Pharmacy was cited in two facilities on the announced and more on the unannounced. Dietary was cited at a two to one ratio. The same areas appear in both but are cited more frequently in unannounced and some areas are absent from the announced.

Dietary infractions were discussed with examples given.

The surveys of the facilities were done in the order they were due for survey. If they started with an unannounced survey the next one would be announced. They went back and forth in that manner.

Darleen Bartz (Department of Health) helped put the project together and offered more in-depth information on how the selection of facilities took place (meter 65:45). They took size into consideration and tried to balance the announced and unannounced surveys.

The time line of the announced and unannounced surveys was discussed. Obtaining the information up front was faster in the announced surveys. The survey process itself wasn't shortened.

The hearing on HB 1488 was recessed.

JOB #5356

Chairman Senator J. Lee brought the hearing on HB 1488 back to order and recognized Mr. Pritschett to continue answering questions.

Senator Erbele asked about the procedure of getting deficiencies corrected. He also asked if there is a follow up to go back to make sure it was corrected or if they wait until the next survey.

Mr. Pritschett said there is a revisit process for the basic cares (meter 01:51).

Senator J. Lee said that in long term care there are some deficiencies that result in freezing the ability to admit new residents. She asked if anything like that happens for basic care.

Mr. Pritschett said there is not. In licensing, there is the ability to give a provisional license or revoke the license.

Senator J. Lee asked if most facilities are generally cooperative about getting the deficiencies corrected.

Mr. Pritschett said that most are cooperative. There always seems to be those that are more difficult to work with to get the deficiencies corrected.

There was discussion that there are some issues that can't be addressed in a short period of time. The life safety code citations take longer all the time versus the health program citations.

(Meter 05:26) Off hour surveys were addressed. The long term care program requires 10% of the surveys to be done at alternative start times which would be on a holiday, weekend day, before 7 am or after 7 pm. Basic care does not have that requirement for off hour surveys except for complaints.

The makeup of the survey teams was also discussed (meter 07:00). They need to have specific training.

(Meter 10:00) When talking about announced and unannounced surveys part of the departments concern is that a true picture is not given during the announced surveys. Further discussion followed on staffing and scheduling records.

Senator J. Lee asked how ND basic care survey rules compare to other states since it is not federally established.

Mr. Pritschett said he didn't know of any other state that has that category.

(Meter 14:50) Discussion continued on the differences between a basic care and an assisted living survey. Assisted living is by the department of human services and is more of a contractual situation. Basic care in ND is more like assisted care in other states.

(Meter 18:40) (Attachment #4a) Mr. Pritschett addressed the amendment proposed by Representative Kreidt. The estimated cost for a FTE for the biennium would be about \$148,625. They have an agreement with the centers for Medicare and Medicaid services to do the certification and recertification of facilities. That agreement doesn't allow them to consult. The consultant would have to be separated from the survey team. Senator Dever asked how extensive the survey is for certification before occupancy. Mr. Pritschett said it is a very thorough life safety code survey.

Senator Dever wanted to know how that is different than what they are looking for here. Mr. Pritschett replied that it has to do with the conflict of interest (meter 27:18).

Further discussion followed on maintenance and construction visits and differences in requirements compared to city building codes.

Senator J. Lee asked why there is construction review for basic care and not for assisted living. Discussion followed on that and evacuation standards.

Senator Dever asked how big of a problem this amendment seeks to address.

Ms. Bartz said there are ongoing concerns with construction. If they had personnel to designate one person as this staff person they would not be opposed to moving forth with it. The biggest issue is that they would need additional staff and the funding to have the staff on board to do the work.

Senator Dever asked how long after a project is finished before there is an inspector from the health department to go through the facility.

Ms. Bartz said that if it is a new facility someone would have to be out there to look at it from a licensure perspective prior to certifying it and in that case they would have a construction person out there. For remodeling, it would probably occur after the project was completed and probably when they do the routine survey.

Discussion followed on quality assurance and building codes.

Ms. Bartz said that, in reality, if you are monitoring and supervising and providing oversight for a construction project, you need to be there all the time to make sure things are done correctly. The problem with keeping construction on track and eliminating deficiencies wouldn't be solved by having one person check once or twice on the construction sight. There would be some impact but everything would not be caught.

Senator J. Lee asked how it could be done.

Ms. Bartz said some of the recommendations their committee came up with were: there should be a quality assurance piece written into the contract that facilities make with the people doing the construction for them, and; if they are not meeting the quality or something comes up later, somebody has to be accountable because they should know that information. It should be between the provider and whoever they are contracting with. Another concern is that the people who are building inspectors are not expected to meet any certain level of qualifications.

Linda Johnson Wurtz (Associate State Director for Advocacy, AARP, ND) testified in opposition to HB 1488. (Attachment #5)

Jim Jacobson (Director, Protective Services Unit for the ND P&A Project) testified in opposition to HB 1488. (Attachment #6) He added information that he was a program director for ICFMR's for eight years and they went through survey process after survey process. There are two ways in which to approach surveys and survey results. One is to look at it like it is paper compliance and that leads to a lot of discussions about deficiencies. The other is to recognize that those standards are there to define the quality of services that should be provided. He and his staff decided the only way to

appropriately serve the people they work with was for every record to be available to everybody who worked in the facility including policy and procedures (meter 59:21). In the work he does, investigate allegations of abuse and neglect, he never looks at a facility with a high number of reports as a bad facility nor does he look at a facility with a low number of reports as a good facility. There are only two things that data tells. One, the facility with the high number of reports is being diligent to comply with state law on mandatory reporting. Two, the facility that has a low number of reports has a low number of reports. It doesn't tell if they have quality services and it doesn't give the investigator an opportunity to do anything to access those services.

Senator J. Lee asked how he could have all the records available to everybody with HIPAA requirements.

Mr. Jacobson replied that when he says available to everyone he means everyone who is required to provide services in that facility (meter 60:35).

Further discussion took place on records being available for surveyors 24-7. Paper compliance is secondary only to high quality of care.

Darleen Bartz (Department of Health) was recognized by Senator J. Lee for more comments. In basic care, there needs to be nursing services provided to meet the needs of the resident. That does not mean the needs to nursing services are needed eight hours a day or seven days a week. That can take place by contract with a home health agency or other mechanisms. The basic care facility does need to provide at least a minimum of one staff person to assist the residents 24 hours/day which is different from eight hours of nursing care.

Whoever is on staff and caring for the residents should have access to the documents they would need to provide care and services for the residents.

In all the years she has been in the department, they have only gone on one investigation at night. They were investigating a complaint that took place at night (meter 69:22).

Senator J. Lee asked if she saw any purpose to announced surveys or if she thought they should all be unannounced.

Ms. Bartz felt they should be unannounced especially in the health portion.

Senator Warner referred to the amendment and asked if their standards are objective enough to be studied, and if there could be seminars on the specifics of nursing home design.

Ms. Bartz said that is a true concern because there is a difference between surveys.

There is a difference between construction and maintenance. Just because there has been a construction visit it will in no way guarantee that there won't be an issue when they come out and survey later. In reality, if the architect and the people who should be doing that quality assurance are doing their job, there shouldn't be a need for the department to be doing it (meter 72:44).

Senator Dever asked if they did the same number of surveys prior to doing this study July 1, 2005 involving announced basic care surveys.

Ms. Bartz replied that in 1989 the DHS transferred the responsibility for licensure of basic care to the DOH. What weren't transferred were the funds. With the new administration, some funding is in place to do surveys. The licensure fee they collected was only enough to cover one or two complaint investigations during the year, but didn't cover the cost of inspections.

It's only within the last three to four years that they have actually had funds to allow basic care surveys of any kind. With that it has allowed them to become more regular and able to fit them in (meter 75:40). Further discussion followed.

Marilyn Goldade (Director of Nursing, Haaland Home, Rugby, ND) testified in a neutral manner. She has participated in both announced and unannounced surveys. Her first survey was unannounced and the surveyors were in the facility four and a half days. The second survey four years later was announced and the surveyors were able to leave in 26 hours. She preferred the announced. Then she spoke specifically to the illusion of potential harm that the seniors are put in with the announced survey.

(Meter 79:28) She talked about deficiencies that her facility received and compared to them the general public. As a provider of care to seniors and a taxpayer, she is looking at where the common sense and collaborative effort comes in.

Shelly Peterson (ND LTC Association) was recognized by Senator J. Lee for comments. Before 2005 there were very few basic care surveys. The announced survey process brought regular surveys. They are supportive of the survey process and they want it to work. Inspections are necessary and help them to operate to their best efficiency. The survey agency gets to pick who gets which survey. If they have any concern about any facility, they can go there unannounced. All complaint surveys would be unannounced. There are quality standards in place. (Meter 85:19) She addressed the suggestion that there are unstaffed facilities and emphasized that there has never been a basic care facility unstaffed.

Senator J. Lee asked for comments on the process for responding to citations for those less process driven complaints.

Darleen Bartz (DOH) said they offer an appeals process for basic care and they encourage their surveyors to use reasonable common sense.

Discussion followed on addressing some deficiencies in a simpler fashion.

(Meter 90:45) The amendment was again addressed and the DOH talked about some types of things they can do as training and getting information out to the facilities to help them. It is important to have communication between the DOH and the association on how to make sure the construction process goes better.

The hearing on HB 1488 was closed.

