GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2017

H HOUSE BILL 456

| Short Title: | Establish Mandatory Dementia Care Training. (Public) | |
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| Sponsors: | Representative Torbett. | |
| 1 | For a complete list of sponsors, refer to the North Carolina General Assembly web site. | |
| Referred to: | Health, if favorable, Regulatory Reform | |
| March 27, 2017 | | |
| A BILL TO BE ENTITLED AN ACT REQUIRING ADULT CARE HOMES, NURSING HOMES, AND COMBINATION HOMES THAT PROVIDE SPECIAL CARE FOR PERSONS WITH ALZHEIMER'S DISEASE OR OTHER DEMENTIAS TO PROVIDE DEMENTIA CARE TRAINING TO DIRECT CARE STAFF, ADMINISTRATIVE STAFF, AND NON-DIRECT CARE STAFF AND ESTABLISHING MINIMUM STANDARDS FOR SUCH TRAINING. The General Assembly of North Carolina enacts: SECTION 1.(a) Article 1 of Chapter 131D of the General Statutes is amended by | | |
| adding a new section to read: | | |
| | D. Adult care home staff; dementia care training requirements. Definitions. – As used in this section, the following definitions apply: | |
| | 1) Administrative staff. – Includes the senior management of an adult care | |
| | home, including the administrator and the managerial staff that directly supervise direct care staff. Direct care staff. – Any staff person of an adult care home whose work | |
| _ | involves extensive contact with facility residents, including medication aides, nurses aides, personal care assistants, home health aides, personal care aides, licensed practical nurses, registered nurses, nurse practitioners, physician assistants, social workers, activity directors, dietary staff, and | |
| <u>(</u> | physical, speech, and occupational therapy staff. Non-direct care staff. – Any staff person who has incidental contact on a recurring basis with adult care home residents, including housekeeping staff, front desk staff, maintenance staff, other administrative staff, and other | |

(c) Contents of Initial Dementia Care Training. –

initial dementia care training described in subsection (c) of this section.

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(1) The curriculum used to provide initial dementia care training to direct care staff and administrative staff shall provide instruction in at least all of the following topics:

Staff person. – Includes full-time and part-time employees of the adult care

home and independent contractors and consultants of the adult care home.

Deadline for Completing Initial Dementia Care Training. – Within 60 days from the



date of hire, each adult care home must provide, and each staff person hired shall complete, the

individuals who have such incidental contact.

- <u>a.</u> <u>Dementia, including the progression of the disease, memory loss, and psychiatric and behavioral symptoms.</u>
- <u>b.</u> <u>Strategies for providing person-centered care.</u>
- <u>c.</u> <u>Communication issues.</u>
- <u>d.</u> <u>Techniques for understanding and approaching behavioral symptoms, including alternatives to physical and chemical restraints.</u>
- e. Strategies for addressing social needs and providing meaningful activities.
- <u>f.</u> <u>Information on how to address specific aspects of care and safety, such as pain, food, fluid, and wandering.</u>
- (2) The curriculum used to provide initial dementia care training to non-direct care staff shall provide instruction in at least all of the following topics:
 - <u>a.</u> <u>Dementia, including the progression of the disease, memory loss, and psychiatric and behavioral symptoms.</u>
 - b. Communication issues.

Initial dementia care training shall be considered complete only after the staff person has taken and passed an evaluation instrument designed to test his or her competence in the topics described in this subsection.

- (d) Continuing Education. Adult care homes shall provide continuing dementia care education to its direct care staff, administrative staff, and non-direct care staff. The Department shall adopt rules specifying the frequency and content of this continuing dementia care education. The rules shall include a provision requiring that continuing dementia care education for direct care staff and administrative staff includes new information on best practices in the treatment and care of persons with dementia.
- (e) Approval of Dementia Care Training Programs. The Division of Health Service Regulation shall identify and designate standardized training programs, including online training programs, that meet the requirements of subsections (c) and (d) of this section and shall also establish a process for determining whether other nonstandardized training programs meet the requirements of subsections (c) and (d) of this section. The Division of Health Service Regulation shall not identify or designate a training program as having met the requirements of subsection (c) or (d) of this section unless the training program meets the following minimum criteria:
 - (1) Whether online or in-person, all training modules, presentations, materials, and evaluation instruments must reflect current standards and best practices in the care and treatment of persons with dementia.
 - (2) Programs for initial dementia care training must include an evaluation component that includes a demonstration of skill competency and knowledge in the topics identified in subsection (c) of this section and may include written or oral evaluations and care recipient and family surveys.

<u>The Division of Health Service Regulation may approve independent evaluation instruments or itself develop evaluation instruments for these programs.</u>

- (f) Portability of Initial Dementia Care Training. Upon completion of initial dementia care training, the adult care home or training program shall cause to be issued to each staff person who successfully completes the training a certificate of completion, which shall be portable between settings. Direct care staff is not required to repeat initial dementia care training as long as there is no lapse of dementia-related direct care or administrative service or employment for 24 consecutive months or more. All staff persons are responsible for maintaining their own certificates of completion for initial dementia care training.
- (g) Requirements for Dementia Care Trainers. Any person who conducts in-person dementia care training for an adult care home to satisfy the requirements of this section must meet all of the following minimum qualifications:

- (1) Have at least two years of work experience related to Alzheimer's disease or other dementias, or two years of work experience in health care, gerontology, or another related field.

- Have completed training equivalent to the requirements specified in subdivision (c)(1) of this section and successfully passed an evaluation component that includes a demonstration of skill competency and knowledge in the topics identified in subdivision (c)(1) of this section.
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- (h) Training Cost. Adult care homes shall bear the entire cost of the training required by this section. Staff persons shall not be required to bear any of the cost of initial dementia care training programs, continuing dementia care education programs, or attending these programs and shall receive their normal compensation when attending any of these required programs.
 - (i) Relationship to Other Laws. This section is designed to address gaps in current dementia care training for staff persons of adult care homes and to improve the quality of dementia care training. If other applicable State or federal laws contain more stringent training requirements, those laws shall apply. Where there is overlap between the requirements of this section and other applicable State or federal laws, the Department shall interpret this statute to avoid duplication of requirements while ensuring that the minimum requirements specified in this section are met."

SECTION 1.(b) G.S. 131D-2.11(a) reads as rewritten:

"(a) State Inspection and Monitoring. – The Department shall ensure that adult care homes required to be licensed by this Article are monitored for licensure compliance on a regular basis. All facilities licensed under this Article and adult care units in nursing homes are subject to inspections at all times by the Secretary. Except as provided in subsection (a1) of this section, the Division of Health Service Regulation shall inspect all adult care homes and adult care units in nursing homes on an annual basis.

Beginning July 1, 2012, Beginning January 1, 2018, the Division of Health Service Regulation shall include as part of its inspection of all adult care homes a review of (i) the facility's compliance with G.S. 131D-4.4A(b) and safe practices for injections and any other procedures during which bleeding typically occurs occurs and (ii) the facility's compliance with G.S. 131D-4.5D, which shall include a review of at least all of the following:

- (1) Whether the adult care home utilizes Department-approved initial dementia care training programs to meet the requirements of G.S. 131D-4.5D.
- Whether the adult care home provides appropriate continuing education opportunities that meet the requirements of G.S. 131D-4.5D.
- (3) The training evaluation instrument utilized by the adult care home to assess skill competency and knowledge in the topics described in G.S. 131D-4.5D.
- (4) <u>Proficiencies of direct care staff by direct observation and assessment.</u>
- (5) Compliance with all other requirements specified in G.S. 131D-4.5D.

In addition, the Department shall ensure that adult care homes are inspected every two years to determine compliance with physical plant and life-safety requirements."

SECTION 1.(c) G.S. 131D-4.5D(b), as enacted by subsection (a) of this section, applies to staff persons hired on or after October 1, 2017. By December 1, 2017, adult care homes shall provide initial dementia care training that meets the requirements of G.S. 131D-4.5D(c), as enacted by this act, to staff persons hired before October 1, 2017, who are unable to demonstrate proof of having completed, within the 24-month period preceding October 1, 2017, training equivalent to the initial dementia care training described in G.S. 131D-4.5D(c), as enacted by this act.

SECTION 2.(a) Part 1 of Article 6 of Chapter 131E of the General Statutes is amended by adding a new section to read:

"§ 131E-114.5. Dementia care training requirements.

1 Definitions. – As used in this section, the following definitions apply: (a) 2 Administrative staff. – Includes the senior management of a covered facility, (1) 3 including the administrator and the managerial staff that directly supervise 4 direct care staff. 5 (2) Covered facility. – Includes nursing homes and combination homes licensed 6 under this Part that provide special care for persons with Alzheimer's disease 7 or other dementias. 8 Direct care staff. – Any staff person of a covered facility whose work (3) 9 involves extensive contact with facility residents, including medication 10 aides, nurses aides, personal care assistants, home health aides, personal care 11 aides, licensed practical nurses, registered nurses, nurse practitioners, physician assistants, social workers, activity directors, dietary staff, and 12 13 physical, speech, and occupational therapy staff. 14 Non-direct care staff. – Any staff person who has incidental contact on a <u>(4)</u> recurring basis with a covered facility's residents, including housekeeping 15 16 staff, front desk staff, maintenance staff, other administrative staff, and other 17 individuals who have such incidental contact. Staff person. – Includes full-time and part-time employees of the covered 18 <u>(5)</u> 19 facility and independent contractors and consultants of the facility. 20 Deadline for Completing Initial Dementia Care Training. – Within 60 days from the 21 date of hire, each covered facility must provide, and each staff person hired shall complete, the 22 initial dementia care training described in subsection (c) of this section. 23 Contents of Initial Dementia Care Training. – (c) 24 (1) The curriculum used to provide initial dementia care training to direct care 25 staff and administrative staff shall provide instruction in at least all of the 26 following topics: 27 Dementia, including the progression of the disease, memory loss, and a. 28 psychiatric and behavioral symptoms. Strategies for providing person-centered care. 29 <u>b.</u> 30 Communication issues. <u>c.</u> 31 Techniques for understanding and approaching behavioral d. 32 symptoms, including alternatives to physical and chemical restraints. 33 Strategies for addressing social needs and providing meaningful <u>e.</u> 34 activities. 35 <u>f.</u> Information on how to address specific aspects of care and safety, 36 such as pain, food, fluid, and wandering. 37 The curriculum used to provide initial dementia care training to non-direct (2) 38 care staff shall provide instruction in at least all of the following topics: 39 Dementia, including the progression of the disease, memory loss, and a. 40 psychiatric and behavioral symptoms. 41 Communication issues. b. 42 Initial dementia care training shall be considered complete only after the staff person has 43 taken and passed an evaluation instrument designed to test his or her competence in the topics 44 described in this subsection. 45 Continuing Education. – Covered facilities shall provide continuing dementia care education to its direct care staff, administrative staff, and non-direct care staff. The Department 46 47 shall adopt rules specifying the frequency and content of this continuing dementia care 48 education. The rules shall include a provision requiring that continuing dementia care education 49 for direct care staff and administrative staff includes new information on best practices in the

treatment and care of persons with dementia.

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(e)

- Regulation shall identify and designate standardized training programs, including online training programs, that meet the requirements of subsections (c) and (d) of this section and shall also establish a process for determining whether other nonstandardized training programs meet the requirements of subsections (c) and (d) of this section. The Division of Health Service Regulation shall not identify or designate a training program as having met the requirements of subsection (c) or (d) of this section unless the training program meets the following minimum criteria:

 (1) Whether online or in-person, all training modules, presentations, materials,
 - Whether online or in-person, all training modules, presentations, materials, and evaluation instruments must reflect current standards and best practices in the care and treatment of persons with dementia.

Approval of Dementia Care Training Programs. – The Division of Health Service

(2) Programs for initial dementia care training must include an evaluation component that includes a demonstration of skill competency and knowledge in the topics identified in subsection (c) of this section and may include written or oral evaluations and care recipient and family surveys.

<u>The Division of Health Service Regulation may approve independent evaluation instruments or itself develop evaluation instruments for these programs.</u>

- (f) Portability of Initial Dementia Care Training. Upon completion of initial dementia care training, the covered facility or training program shall cause to be issued to each staff person who successfully completes the training a certificate of completion, which shall be portable between settings. Direct care staff is not required to repeat initial dementia care training as long as there is no lapse of dementia-related direct care or administrative service or employment for 24 consecutive months or more. All staff persons are responsible for maintaining their own certificates of completion for initial dementia care training.
- (g) Requirements for Dementia Care Trainers. Any person who conducts in-person dementia care training for a covered facility to satisfy the requirements of this section must meet all of the following minimum qualifications:
 - (1) Have at least two years of work experience related to Alzheimer's disease or other dementias, or two years of work experience in health care, gerontology, or another related field.
 - (2) Have completed training equivalent to the requirements specified in subdivision (c)(1) of this section and successfully passed an evaluation component that includes a demonstration of skill competency and knowledge in the topics identified in subdivision (c)(1) of this section.
- (h) Training Cost. Covered facilities shall bear the entire cost of the training required by this section. Staff persons shall not be required to bear any of the cost of initial dementia care training programs, continuing dementia care education programs, or attending these programs and shall receive their normal compensation when attending any of these required programs.
- (i) Relationship to Other Laws. This section is designed to address gaps in current dementia care training for staff persons of covered facilities and to improve the quality of dementia care training. If other applicable State or federal laws contain more stringent training requirements, those laws shall apply. Where there is overlap between the requirements of this section and other applicable State or federal laws, the Department shall interpret this statute to avoid duplication of requirements while ensuring that the minimum requirements specified in this section are met."

SECTION 2.(b) G.S. 131E-105(a) reads as rewritten:

"(a) The Department shall inspect any nursing home and any adult care home operated as a part of a nursing home in accordance with rules adopted by the Commission. <u>Beginning January 1, 2018</u>, the Department shall include as part of its inspection of all nursing homes and

G.S. 131E-114.5(c), as enacted by this act.

| 1 | adult care homes operated as part of a nursing home a review of the facility's compliance with |
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| 2 | G.S. 131E-114.5, which shall include a review of at least all of the following: |
| 3 | (1) Whether the facility utilizes Department-approved initial dementia care |
| 4 | training programs to meet the requirements of G.S. 131E-114.5. |
| 5 | (2) Whether the facility provides appropriate continuing education opportunities |
| 6 | that meet the requirements of G.S. 131E-114.5. |
| 7 | (3) The training evaluation instrument utilized by the facility to assess skill |
| 8 | competency and knowledge in the topics described in G.S. 131E-114.5(c). |
| 9 | (4) <u>Proficiencies of direct care staff by direct observation and assessment.</u> |
| 10 | (5) Compliance with all other requirements specified in G.S. 131E-114.5. |
| 11 | SECTION 2.(c) G.S. 131E-114.5(b), as enacted by subsection (a) of this section, |
| 12 | applies to staff persons hired on or after October 1, 2017. By December 1, 2017, covered |
| 13 | facilities shall provide initial dementia care training that meets the requirements of |
| 14 | G.S. 131E-114.5(c), as enacted by this act, to staff persons hired before October 1, 2017, who |
| 15 | are unable to demonstrate proof of having completed, within the 24-month period preceding |
| 16 | October 1, 2017, training equivalent to the initial dementia care training described in |
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SECTION 3. This act becomes effective October 1, 2017.

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