SECOND REGULAR SESSION

HOUSE BILL NO. 2481

100TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE MORRIS (140).

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DANA RADEMAN MILLER, Chief Clerk

AN ACT

To repeal section 192.2000, RSMo, and to enact in lieu thereof one new section relating to dementia training for certain persons employed as caregivers.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 192.2000, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 192.2000, to read as follows:

thereof, to be known as section 192.2000, to read as follows:

192.2000. 1. The "Division of Aging" is hereby transferred from the department of

- 2 social services to the department of health and senior services by a type I transfer as defined in
- 3 the Omnibus State Reorganization Act of 1974. The department shall aid and assist the elderly
- 4 and low-income disabled adults living in the state of Missouri to secure and maintain maximum
- 5 economic and personal independence and dignity. The department shall regulate adult long-term
- 6 care facilities pursuant to the laws of this state and rules and regulations of federal and state 7 agencies, to safeguard the lives and rights of residents in these facilities.
 - 2. In addition to its duties and responsibilities enumerated pursuant to other provisions of law, the department shall:
- 10 (1) Serve as advocate for the elderly by promoting a comprehensive, coordinated service 11 program through administration of Older Americans Act (OAA) programs (Title III) P.L. 89-73, 12 (42 U.S.C. Section 3001, et seq.), as amended;
 - (2) Assure that an information and referral system is developed and operated for the elderly, including information on home and community based services;
 - (3) Provide technical assistance, planning and training to local area agencies on aging;
- 16 (4) Contract with the federal government to conduct surveys of long-term care facilities 17 certified for participation in the Title XVIII program;

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

18 (5) Conduct medical review (inspections of care) activities such as utilization reviews, 19 independent professional reviews, and periodic medical reviews to determine medical and social 20 needs for the purpose of eligibility for Title XIX, and for level of care determination;

- (6) Certify long-term care facilities for participation in the Title XIX program;
- (7) Conduct a survey and review of compliance with P.L. 96-566 Sec. 505(d) for Supplemental Security Income recipients in long-term care facilities and serve as the liaison between the Social Security Administration and the department of health and senior services concerning Supplemental Security Income beneficiaries;
- (8) Review plans of proposed long-term care facilities before they are constructed to determine if they meet applicable state and federal construction standards;
- (9) Provide consultation to long-term care facilities in all areas governed by state and federal regulations;
- (10) Serve as the central state agency with primary responsibility for the planning, coordination, development, and evaluation of policy, programs, and services for elderly persons in Missouri consistent with the provisions of subsection 1 of this section and serve as the designated state unit on aging, as defined in the Older Americans Act of 1965;
- (11) Develop long-range state plans for programs, services, and activities for elderly and handicapped persons. State plans should be revised annually and should be based on area agency on aging plans, statewide priorities, and state and federal requirements;
- (12) Receive and disburse all federal and state funds allocated to the division and solicit, accept, and administer grants, including federal grants, or gifts made to the division or to the state for the benefit of elderly persons in this state;
- (13) Serve, within government and in the state at large, as an advocate for elderly persons by holding hearings and conducting studies or investigations concerning matters affecting the health, safety, and welfare of elderly persons and by assisting elderly persons to assure their rights to apply for and receive services and to be given fair hearings when such services are denied;
- (14) Conduct research and other appropriate activities to determine the needs of elderly persons in this state, including, but not limited to, their needs for social and health services, and to determine what existing services and facilities, private and public, are available to elderly persons to meet those needs;
- (15) Maintain and serve as a clearinghouse for up-to-date information and technical assistance related to the needs and interests of elderly persons and persons with Alzheimer's disease or related dementias, including information on the home and community based services program, dementia-specific training materials and dementia-specific trainers. Such dementia-specific information and technical assistance shall be maintained and provided in

consultation with agencies, organizations and/or institutions of higher learning with expertise in dementia care;

- (16) Provide area agencies on aging with assistance in applying for federal, state, and private grants and identifying new funding sources;
- (17) Determine area agencies on aging annual allocations for Title XX and Title III of the Older Americans Act expenditures;
- (18) Provide transportation services, home-delivered and congregate meals, in-home services, counseling and other services to the elderly and low-income handicapped adults as designated in the Social Services Block Grant Report, through contract with other agencies, and shall monitor such agencies to ensure that services contracted for are delivered and meet standards of quality set by the division;
- (19) Monitor the process pursuant to the federal Patient Self-determination Act, 42 U.S.C. Section 1396a (w), in long-term care facilities by which information is provided to patients concerning durable powers of attorney and living wills.
- 3. The department may withdraw designation of an area agency on aging only when it can be shown the federal or state laws or rules have not been complied with, state or federal funds are not being expended for the purposes for which they were intended, or the elderly are not receiving appropriate services within available resources, and after consultation with the director of the area agency on aging and the area agency board. Withdrawal of any particular program of services may be appealed to the director of the department of health and senior services and the governor. In the event that the division withdraws the area agency on aging designation in accordance with the Older Americans Act, the department shall administer the services to clients previously performed by the area agency on aging until a new area agency on aging is designated.
- 4. Any person hired by the department of health and senior services after August 13, 1988, to conduct or supervise inspections, surveys or investigations pursuant to chapter 198 shall complete at least one hundred hours of basic orientation regarding the inspection process and applicable rules and statutes during the first six months of employment. Any such person shall annually, on the anniversary date of employment, present to the department evidence of having completed at least twenty hours of continuing education in at least two of the following categories: communication techniques, skills development, resident care, or policy update. The department of health and senior services shall by rule describe the curriculum and structure of such continuing education.
- 5. The department may issue and promulgate rules to enforce, implement and effectuate the powers and duties established in this section and sections 198.070 and 198.090 and sections 192.2400 and 192.2475 to 192.2500. Any rule or portion of a rule, as that term is defined in

HB 2481 4

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90 section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if 92 applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the 93 powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective 94 date or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of 95 rulemaking authority and any rule proposed or adopted after August 28, 2001, shall be invalid 96 and void.

- 6. Home and community based services is a program, operated and coordinated by the department of health and senior services, which informs individuals of the variety of care options available to them when they may need long-term care.
- 7. (1) The division shall maintain minimum dementia-specific training requirements for employees involved in the delivery of care to persons with Alzheimer's disease or related dementias who are employed by skilled nursing facilities, intermediate care facilities, residential care facilities, agencies providing in-home care services authorized by the division of aging, home health and hospice agencies licensed under chapter 197, adult day-care programs, independent contractors providing direct care to persons with Alzheimer's disease or related dementias and the division of aging. Such training shall be incorporated into new employee orientation and ongoing in-service curricula for all employees involved in the care of persons with dementia. [The department of health and senior services shall maintain minimum dementia-specific training requirements for employees involved in the delivery of care to persons with Alzheimer's disease or related dementias who are employed by home health and hospice agencies licensed by chapter 197. Such training shall be incorporated into the home health and hospice agency's new employee orientation and ongoing in-service curricula for all employees involved in the care of persons with dementia. The dementia training need not require additional hours of orientation or ongoing in-service. Training shall include at a minimum, the following: (1) For employees providing direct care to persons with Alzheimer's disease or related
- dementias, the training shall include an overview of Alzheimer's disease and related dementias, communicating with persons with dementia, behavior management, promoting independence in activities of daily living, and understanding and dealing with family issues;
- (2) For other employees who do not provide direct care for, but may have daily contact with, persons with Alzheimer's disease or related dementias, the training shall include an overview of dementias and communicating with persons with dementia.
- (2) The department shall coordinate with the Alzheimer's Association to develop minimum training requirements for employees listed under subdivision (1) of this section, which shall include initial training for new employees and continuing training for new employees and current employees.

126 **(3)** The initial training required for new employees shall include, but not be limited to, discussion of the following:

- (a) Alzheimer's disease and dementia;
- 129 **(b)** Person-centered care;
- 130 (c) Assessment and care planning;
- 131 (d) Activities of daily living; and
- (e) Dementia-related behaviors and communication.
- 133 (4) In addition to the subjects listed under subdivision (3) of this subsection, the 134 initial training required for administrative employees shall include, but not be limited to, 135 discussion of the following:
 - (a) Medical management information education and support;
- 137 **(b) Staffing**;

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- (c) Supportive and therapeutic environments; and
- 139 (d) Transitions and coordination of services.
- 140 (5) The department shall identify and approve standardized training programs, 141 including online training programs, that meet the requirements of this subsection.
 - (6) Any entity providing initial training to new employees shall issue a certificate of completion to employees who satisfactorily complete the training required under subdivisions (3) or (4) of this subsection.
 - (7) The department shall develop additional continuing training requirements for new employees and existing employees, which shall include discussion of current best practices in the treatment and care of persons with dementia. The department shall determine when, and how often, such continuing training will be required.
- 149 **(8)** Persons conducting the training required under this subsection shall be 150 required to have the following qualifications:
 - (a) At least two years of work experience related to Alzheimer's disease or other dementia in health care, gerontology, or another related field; and
- 153 (b) Completion of the training required under subdivisions (3) and (4) of this subsection.
- 155 (9) The department, in cooperation with the department of social services, shall 156 exercise oversight of the training programs required under this subsection. The 157 department shall:
- 158 (a) Ensure that the facility or program provides continuing education 159 opportunities;
- 160 **(b)** Ensure that the facility or program uses designed online training programs or facility-based training that meets the dementia training requirements of this subsection;

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- 162 (c) Periodically review the training provided to employees under this section, using 163 competency-based measures to evaluate knowledge gained;
 - (d) Observe and assess the proficiencies of employees who have received the training required under this subsection; and
 - (e) Ensure compliance with the provisions of this subsection.
- 167 **(10)** As used in this subsection, the term "employee" includes persons hired as independent contractors. The training requirements of this subsection shall not be construed as superceding any other laws or rules regarding dementia-specific training.

