

## HOUSE OF REPRESENTATIVES STAFF ANALYSIS

**BILL #:** HB 1527

Florida Alzheimer's Training Act

**SPONSOR(S):** Gibson

**TIED BILLS:**

**IDEN./SIM. BILLS:** CS/SB 1116

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REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) Elder Affairs & Long Term Care (Sub)	9 Y, 0 N	Meyer	Liem
2) Future of Florida's Families			
3) Appropriations			
4)			
5)			

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### SUMMARY ANALYSIS

The bill provided training requirements for three groups of personnel in home health agencies, adult day care centers, and hospices: all staff; all staff who provide direct care; and all staff who provide direct care for a person with Alzheimer's disease.

For health care providers licensed pursuant to 456.001, F.S., any hours of training taken to meet requirements of the licensure board shall be counted toward the required four hours. Any training that is approved by the licensing board shall be deemed to be approved by the Department of Elder Affairs. Other training curriculums must be approved by DOEA and the department is granted rule making authority.

The bill takes effect July 1, 2003. No fiscal impact is projected by the state agencies on their budgets.

This document does not reflect the intent or official position of the bill sponsor or House of Representatives.

**STORAGE NAME:** h1527a.fff.doc

**DATE:** March 26, 2003

## FULL ANALYSIS

### I. SUBSTANTIVE ANALYSIS

#### A. DOES THE BILL:

- |                                      |                              |                             |                              |
|--------------------------------------|------------------------------|-----------------------------|------------------------------|
| 1. Reduce government?                | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| 2. Lower taxes?                      | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| 3. Expand individual freedom?        | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| 4. Increase personal responsibility? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| 5. Empower families?                 | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |

For any principle that received a "no" above, please explain:

#### B. EFFECT OF PROPOSED CHANGES:

The requirements for each licensed entity are summarized as follows:

##### *Home Health Agency:*

Basic written information to all staff at employment; and,  
All direct care staff must have an additional 4 hours within 9 months

The training must include: an overview of dementia, basic skills in communicating with persons with dementia; management of problem behaviors; information about promoting the client's independence; skills in working with families and caregivers.

DOEA must approve the training. A certificate must be issued that allows the employee to be exempt from repeated training, if he or she changes jobs.

##### *Adult Day Care Center:*

Basic written information to all staff at employment;  
New direct care staff must have an additional 1 hour with 3 months; and,  
All direct care staff who will care for a person with Alzheimer's must have an additional 3 hours within 9 months

The training must include: an overview of dementias and instructions in basic communicating with persons who have dementia.

DOEA must approve the training. A certificate must be issued that allows the employee to be exempt from repeated training, if he or she changes jobs

##### *Hospice:*

Basic written information to all staff at employment;  
Staff who will work with Alzheimer's patients must have additional 1 hour of training within 3 months; and,  
Staff who will provide basic care to Alzheimer's patients must have an additional 3 hours of training within 9 months.

The training must include: an overview of dementias and instructions in basic communicating with persons who have dementia.

Any employee who is a licensed health care provider may count a course sanctioned by their licensing board toward the required hours of training. Any course approved by a health care licensing board is deemed to be approved by the department.

The bill provides Legislative intent regarding the urgent health problem that Alzheimer's disease is for the state and encourages state university, college, or postsecondary school that prepared students for health professions to include basic training about Alzheimer's disease in its curriculum.

### **Background on Alzheimer's disease**

Alzheimer's disease (AD) is a degenerative neurological disorder. Over time, the affected person experiences progressive dementia, brain atrophy, and cognitive impairment. It is incurable and irreversible. AD is the most common form of dementia and is the fourth leading cause of death in the United States among adults. More than 4 million people in the U.S. suffer with AD. In Florida in 1995, there were an estimated 202,000 cases.

AD progresses steadily, but unpredictably. Deterioration of the brain takes place in three stages over a period from three to twenty years. Ultimately, the person forgets how to swallow, eat, dress, walk, or recognize danger and react appropriately. In the last stages of the disease, the caregivers become totally responsible for meeting all of the person's needs and assuring his or her safety.

#### **C. SECTION DIRECTORY:**

Section 1 provides that the bill may be known as "The Alzheimer's Training Act."

Section 2 amends section 400.4785, F.S., to require Alzheimer's related training for staff of home health agencies.

Section 3 amends section 400.5571, F.S., to require Alzheimer's related training for staff of adult day care centers.

Section 4 amends section 400.6045, F.S., to require Alzheimer's related training for staff of hospices.

Section 5 encourages each state university, college, or postsecondary school that prepared students for health professions to include Alzheimer's disease training in their curriculum.

Section 6 provides that the act take effect July 1, 2003.

## **II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT**

#### **A. FISCAL IMPACT ON STATE GOVERNMENT:**

##### **1. Revenues:**

None.

##### **2. Expenditures:**

The Agency for Health Care Administration will have one more requirement to consider when monitoring these providers.

**B. FISCAL IMPACT ON LOCAL GOVERNMENTS:**

1. Revenues:

None.

2. Expenditures:

No new expenditures are projected.

**C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:**

This bill will require owners of home health agencies, adult day care centers, and hospices to incur costs in ensuring that their employees are trained as required. To the extent that these providers pass these costs on to their private-pay customers, there will be some impact on the cost of these services.

**D. FISCAL COMMENTS:**

**III. COMMENTS**

**A. CONSTITUTIONAL ISSUES:**

1. Applicability of Municipality/County Mandates Provision:

None.

2. Other:

**B. RULE-MAKING AUTHORITY:**

The Department of Elder Affairs is granted rule-making authority to approve the training curriculums.

**C. DRAFTING ISSUES OR OTHER COMMENTS:**

**IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES**

No amendments in Elder Affairs & Long Term Care Subcommittee.