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SENATE BILL DRS15075-MG-106 (03/18)

Short Title: Establish Mandatory Dementia Care Training. (Public)

Sponsors: Senator Woodard (Primary Sponsor).

Referred to:

1 A BILL TO BE ENTITLED
2 AN ACT REQUIRING ADULT CARE HOMES, NURSING HOMES, AND
3 COMBINATION HOMES THAT PROVIDE SPECIAL CARE FOR PERSONS WITH
4 ALZHEIMER'S DISEASE OR OTHER DEMENTIAS TO PROVIDE DEMENTIA CARE
5 TRAINING TO DIRECT CARE STAFF, ADMINISTRATIVE STAFF, AND
6 NON-DIRECT CARE STAFF AND ESTABLISHING MINIMUM STANDARDS FOR
7 SUCH TRAINING.

8 The General Assembly of North Carolina enacts:

9 SECTION 1.(a) Article 1 of Chapter 131D of the General Statutes is amended by
10 adding a new section to read:

11 "**§ 131D-4.5D. Adult care home staff; dementia care training requirements.**

12 (a) Definitions. – As used in this section, the following definitions apply:

13 (1) Administrative staff. – Includes the senior management of an adult care
14 home, including the administrator and the managerial staff that directly
15 supervise direct care staff.

16 (2) Direct care staff. – Any staff person of an adult care home whose work
17 involves extensive contact with facility residents, including medication
18 aides, nurses aides, personal care assistants, home health aides, personal care
19 aides, licensed practical nurses, registered nurses, nurse practitioners,
20 physician assistants, social workers, activity directors, dietary staff, and
21 physical, speech, and occupational therapy staff.

22 (3) Non-direct care staff. – Any staff person who has incidental contact on a
23 recurring basis with adult care home residents, including housekeeping staff,
24 front desk staff, maintenance staff, other administrative staff, and other
25 individuals who have such incidental contact.

26 (4) Staff person. – Includes full-time and part-time employees of the adult care
27 home and independent contractors and consultants of the adult care home.

28 (b) Deadline for Completing Initial Dementia Care Training. – Within 60 days from the
29 date of hire, each adult care home must provide, and each staff person hired shall complete, the
30 initial dementia care training described in subsection (c) of this section.

31 (c) Contents of Initial Dementia Care Training. –

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

35 a. Dementia, including the progression of the disease, memory loss, and
36 psychiatric and behavioral symptoms.



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- b. Strategies for providing person-centered care.
- c. Communication issues.
- d. Techniques for understanding and approaching behavioral symptoms, including alternatives to physical and chemical restraints.
- e. Strategies for addressing social needs and providing meaningful activities.
- f. Information on how to address specific aspects of care and safety, such as pain, food, fluid, and wandering.

(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:

- a. Dementia, including the progression of the disease, memory loss, and psychiatric and behavioral symptoms.
- 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.

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

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

4 (2) Have completed training equivalent to the requirements specified in
5 subdivision (c)(1) of this section and successfully passed an evaluation
6 component that includes a demonstration of skill competency and
7 knowledge in the topics identified in subdivision (c)(1) of this section.

8 (h) Training Cost. – Adult care homes shall bear the entire cost of the training required
9 by this section. Staff persons shall not be required to bear any of the cost of initial dementia
10 care training programs, continuing dementia care education programs, or attending these
11 programs and shall receive their normal compensation when attending any of these required
12 programs.

13 (i) Relationship to Other Laws. – This section is designed to address gaps in current
14 dementia care training for staff persons of adult care homes and to improve the quality of
15 dementia care training. If other applicable State or federal laws contain more stringent training
16 requirements, those laws shall apply. Where there is overlap between the requirements of this
17 section and other applicable State or federal laws, the Department shall interpret this statute to
18 avoid duplication of requirements while ensuring that the minimum requirements specified in
19 this section are met."

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

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

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

32 (1) Whether the adult care home utilizes Department-approved initial dementia
33 care training programs to meet the requirements of G.S. 131D-4.5D.

34 (2) Whether the adult care home provides appropriate continuing education
35 opportunities that meet the requirements of G.S. 131D-4.5D.

36 (3) The training evaluation instrument utilized by the adult care home to assess
37 skill competency and knowledge in the topics described in G.S. 131D-4.5D.

38 (4) Proficiencies of direct care staff by direct observation and assessment.

39 (5) Compliance with all other requirements specified in G.S. 131D-4.5D.

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

42 **SECTION 1.(c)** G.S. 131E-114.5(b), as enacted by subsection (a) of this section,
43 applies to staff persons hired on or after October 1, 2017. By December 1, 2017, adult care
44 homes shall provide to staff persons hired before October 1, 2017, who are unable to
45 demonstrate proof of having completed, within the 24-month period preceding October 1,
46 2017, training equivalent to the initial dementia care training described in G.S. 131E-114.5(c),
47 as enacted by this act, initial dementia care training that meets the requirements of
48 G.S. 131E-114.5(c), as enacted by this act.

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

51 "**§ 131E-114.5. Dementia care training requirements.**

1 (a) Definitions. – As used in this section, the following definitions apply:

2 (1) Administrative staff. – Includes the senior management of a covered facility,
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 (3) Direct care staff. – Any staff person of a covered facility whose work
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,
12 physician assistants, social workers, activity directors, dietary staff, and
13 physical, speech, and occupational therapy staff.

14 (4) Non-direct care staff. – Any staff person who has incidental contact on a
15 recurring basis with a covered facility's residents, including housekeeping
16 staff, front desk staff, maintenance staff, other administrative staff, and other
17 individuals who have such incidental contact.

18 (5) Staff person. – Includes full-time and part-time employees of the covered
19 facility and independent contractors and consultants of the facility.

20 (b) 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 (c) Contents of Initial Dementia Care Training. –

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 a. Dementia, including the progression of the disease, memory loss, and
28 psychiatric and behavioral symptoms.

29 b. Strategies for providing person-centered care.

30 c. Communication issues.

31 d. Techniques for understanding and approaching behavioral
32 symptoms, including alternatives to physical and chemical restraints.

33 e. Strategies for addressing social needs and providing meaningful
34 activities.

35 f. Information on how to address specific aspects of care and safety,
36 such as pain, food, fluid, and wandering.

37 (2) The curriculum used to provide initial dementia care training to non-direct
38 care staff shall provide instruction in at least all of the following topics:

39 a. Dementia, including the progression of the disease, memory loss, and
40 psychiatric and behavioral symptoms.

41 b. Communication issues.

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 (d) Continuing Education. – Covered facilities shall provide continuing dementia care
46 education to its direct care staff, administrative staff, and non-direct care staff. The Department
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
50 treatment and care of persons with dementia.

1 (e) Approval of Dementia Care Training Programs. – The Division of Health Service
2 Regulation shall identify and designate standardized training programs, including online
3 training programs, that meet the requirements of subsections (c) and (d) of this section and shall
4 also establish a process for determining whether other nonstandardized training programs meet
5 the requirements of subsections (c) and (d) of this section. The Division of Health Service
6 Regulation shall not identify or designate a training program as having met the requirements of
7 subsection (c) or (d) of this section unless the training program meets the following minimum
8 criteria:

- 9 (1) Whether online or in-person, all training modules, presentations, materials,
10 and evaluation instruments must reflect current standards and best practices
11 in the care and treatment of persons with dementia.
12 (2) Programs for initial dementia care training must include an evaluation
13 component that includes a demonstration of skill competency and
14 knowledge in the topics identified in subsection (c) of this section and may
15 include written or oral evaluations and care recipient and family surveys.

16 The Division of Health Service Regulation may approve independent evaluation
17 instruments or itself develop evaluation instruments for these programs.

18 (f) Portability of Initial Dementia Care Training. – Upon completion of initial dementia
19 care training, the covered facility or training program shall cause to be issued to each staff
20 person who successfully completes the training a certificate of completion, which shall be
21 portable between settings. Direct care staff is not required to repeat initial dementia care
22 training as long as there is no lapse of dementia-related direct care or administrative service or
23 employment for 24 consecutive months or more. All staff persons are responsible for
24 maintaining their own certificates of completion for initial dementia care training.

25 (g) Requirements for Dementia Care Trainers. – Any person who conducts in-person
26 dementia care training for a covered facility to satisfy the requirements of this section must
27 meet all of the following minimum qualifications:

- 28 (1) Have at least two years of work experience related to Alzheimer's disease or
29 other dementias, or two years of work experience in health care,
30 gerontology, or another related field.
31 (2) Have completed training equivalent to the requirements specified in
32 subdivision (c)(1) of this section and successfully passed an evaluation
33 component that includes a demonstration of skill competency and
34 knowledge in the topics identified in subdivision (c)(1) of this section.

35 (h) Training Cost. – Covered facilities shall bear the entire cost of the training required
36 by this section. Staff persons shall not be required to bear any of the cost of initial dementia
37 care training programs, continuing dementia care education programs, or attending these
38 programs and shall receive their normal compensation when attending any of these required
39 programs.

40 (i) Relationship to Other Laws. – This section is designed to address gaps in current
41 dementia care training for staff persons of covered facilities and to improve the quality of
42 dementia care training. If other applicable State or federal laws contain more stringent training
43 requirements, those laws shall apply. Where there is overlap between the requirements of this
44 section and other applicable State or federal laws, the Department shall interpret this statute to
45 avoid duplication of requirements while ensuring that the minimum requirements specified in
46 this section are met."

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

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

1 adult care homes operated as part of a nursing home a review of the facility's compliance with
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) Proficiencies of direct care staff by direct observation and assessment.

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 to staff persons hired before October 1, 2017, who are unable to
14 demonstrate proof of having completed, within the 24-month period preceding October 1,
15 2017, training equivalent to the initial dementia care training described in G.S. 131E-114.5(c),
16 as enacted by this act, initial dementia care training that meets the requirements of
17 G.S. 131E-114.5(c), as enacted by this act.

18 **SECTION 3.** This act becomes effective October 1, 2017.