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LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
01/12/2012	.	
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The Committee on Children, Families, and Elder Affairs (Latvala) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause and insert:

Section 1. The Purple Ribbon Task Force.—The Purple Ribbon Task Force is established within the Department of Elderly Affairs.

(1) The task force shall consist of 18 volunteer members, of whom six shall be appointed by the Governor, six shall be appointed by the Speaker of the House of Representatives, and six shall be appointed by the President of the Senate, as follows:



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13 (a) A member of the House of Representatives.

14 (b) A member of the Senate.

15 (c) A representative from the Alzheimer's Association.

16 (d) At least one person having Alzheimer's disease or a
17 related form of dementia.

18 (e) At least one family caregiver or former family
19 caregiver of a person having Alzheimer's disease or a related
20 form of dementia.

21 (f) A representative from the Alzheimer's Disease Advisory
22 Committee.

23 (g) A representative of law enforcement with knowledge
24 about the disappearance and recovery, self-neglect, abuse,
25 exploitation, and suicide of persons having Alzheimer's disease
26 or a related form of dementia.

27 (h) A representative who has knowledge of and experience
28 with the Baker Act and its impact on persons having Alzheimer's
29 disease or a related form of dementia.

30 (i) An expert on disaster preparedness and response for
31 persons having Alzheimer's disease or a related form of
32 dementia.

33 (j) A representative of a health care facility or hospice
34 that serves persons with Alzheimer's disease.

35 (k) A representative of the adult day care services
36 industry.

37 (l) A representative of health care practitioners
38 specializing in the treatment of persons having Alzheimer's
39 disease or a related form of dementia.

40 (m) A Florida board-certified elder law attorney.

41 (n) A representative of the area agencies on aging or aging



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- 42 and disability resource centers.
- 43 (o) A person who is an Alzheimer's disease researcher.
- 44 (p) A representative from a memory disorder clinic.
- 45 (q) A representative of the assisted living facility
46 industry.
- 47 (r) A representative of the skilled nursing facility
48 industry.
- 49 (2) Initial appointments to the task force shall be made by
50 July 1, 2012. A vacancy on the task force shall be filled for
51 the unexpired portion of the term in the same manner as the
52 original appointment.
- 53 (3) Members shall serve on the task force without
54 compensation and may not receive reimbursement for per diem or
55 travel expenses.
- 56 (4) The Department of Elderly Affairs shall convene the
57 task force and provide necessary administrative support.
- 58 (5) The task force shall:
- 59 (a) Assess the current and future impact of Alzheimer's
60 disease and related forms of dementia on the state.
- 61 (b) Examine the existing industries, services, and
62 resources addressing the needs of persons having Alzheimer's
63 disease or a related form of dementia and their family
64 caregivers.
- 65 (c) Examine the needs of persons of all cultural
66 backgrounds having Alzheimer's disease or a related form of
67 dementia and how their lives are affected by the disease from
68 younger-onset, through mid-stage, to late-stage.
- 69 (d) Develop a strategy to mobilize a state response to this
70 public health crisis.



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71 (e) Provide information regarding:

72 1. State trends with respect to persons having Alzheimer's
73 disease or a related form of dementia and their needs,
74 including, but not limited to:

75 a. The role of the state in providing community-based care,
76 long-term care, and family caregiver support, including respite,
77 education, and assistance to persons who are in the early stages
78 of Alzheimer's disease, who have younger-onset Alzheimer's
79 disease, or who have a related form of dementia.

80 b. The development of state policy with respect to persons
81 having Alzheimer's disease or a related form of dementia.

82 c. Surveillance of persons having Alzheimer's disease or a
83 related form of dementia for the purpose of accurately
84 estimating the number of such persons in the state at present
85 and projected population levels.

86 2. Existing services, resources, and capacity, including,
87 but not limited to:

88 a. The type, cost, and availability of dementia-specific
89 services throughout the state.

90 b. Policy requirements and effectiveness for dementia-
91 specific training for professionals providing care.

92 c. Quality care measures employed by providers of care,
93 including providers of respite, adult day care, assisted living
94 facility, skilled nursing facility, and hospice services.

95 d. The capability of public safety workers and law
96 enforcement officers to respond to persons having Alzheimer's
97 disease or a related form of dementia, including, but not
98 limited to, responding to their disappearance, search and
99 rescue, abuse, elopement, exploitation, or suicide.



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100 e. The availability of home and community-based services
101 and respite care for persons having Alzheimer's disease or a
102 related form of dementia and education and support services to
103 assist their families and caregivers.

104 f. An inventory of long-term care facilities and community-
105 based services serving persons having Alzheimer's disease or a
106 related form of dementia.

107 g. The adequacy and appropriateness of geriatric-
108 psychiatric units for persons having behavior disorders
109 associated with Alzheimer's disease or a related form of
110 dementia.

111 h. Residential assisted living options for persons having
112 Alzheimer's disease or a related form of dementia.

113 i. The level of preparedness of service providers before,
114 during, and after a catastrophic emergency involving a person
115 having Alzheimer's disease or a related form of dementia and
116 their caregivers and families.

117 3. Needed state policies or responses, including, but not
118 limited to, directions for the provision of clear and
119 coordinated care, services, and support to persons having
120 Alzheimer's disease or a related form of dementia and their
121 caregivers and families and strategies to address any identified
122 gaps in the provision of services.

123 (f) Hold public meetings and employ technological means to
124 gather feedback on the recommendations submitted by persons
125 having Alzheimer's disease or a related form of dementia, their
126 caregivers and families, and the general public. Meetings of the
127 task force may be held in person without compensation or
128 reimbursement for travel expenses, by teleconference, or by



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129 other electronic means.

130 (6) The task force shall submit a report of its findings
131 and date-specific recommendations in the form of an Alzheimer's
132 disease state plan to the Governor, the Speaker of the House of
133 Representatives, and the President of the Senate no later than
134 August 1, 2013. The task force shall terminate on the earlier of
135 the date the report is submitted or August 1, 2013.

136 Section 2. This act shall take effect upon becoming a law.

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138 ===== T I T L E A M E N D M E N T =====

139 And the title is amended as follows:

140 Delete everything before the enacting clause
141 and insert:

142 A bill to be entitled
143 An act relating to Alzheimer's disease; establishing
144 the Purple Ribbon Task Force within the Department of
145 Elderly Affairs; providing for membership; providing
146 that members shall serve without compensation or
147 reimbursement for per diem or travel expenses;
148 requiring the department to provide administrative
149 support; providing duties of the task force;
150 authorizing the task force to hold meetings by
151 teleconference or other electronic means, or in person
152 without compensation or reimbursement for per diem or
153 travel expenses; requiring the task force to submit a
154 report in the form of an Alzheimer's disease state
155 plan to the Governor and Legislature; providing for
156 termination of the task force; providing an effective
157 date.



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WHEREAS, Alzheimer's disease is a slow, progressive disorder of the brain that results in loss of memory and other cognitive functions and eventually death, and

WHEREAS, because Alzheimer's disease is accompanied by memory loss, poor judgment, changes in personality and behavior, and a tendency to wander or become lost, a person with this disease is at an increased risk for accidental injury, abuse, neglect, and exploitation, and

WHEREAS, approximately one in eight Americans 65 years of age or older and almost half of Americans 85 years of age or older develop Alzheimer's disease or a related form of dementia, and

WHEREAS, there are 459,806 probable cases of Alzheimer's disease in this state in 2011, which population is expected to triple by the year 2050, and

WHEREAS, Alzheimer's disease takes an enormous toll on family members, with an estimated one in four family members providing caregiving support for individuals with the disease, and

WHEREAS, caregivers for persons having Alzheimer's disease witness the deteriorating effects of the disease and often suffer more emotional stress, depression, and health problems than caregivers of people having other illnesses, which can negatively affect such caregivers' employment, income, and financial security, and

WHEREAS, younger-onset Alzheimer's disease is a form of Alzheimer's disease that strikes a person who is younger than 65 years of age when symptoms first appear, but younger-onset



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187 Alzheimer's disease can strike persons as early as 30, 40, or 50
188 years of age, with new data showing that there may be as many as
189 500,000 Americans under the age of 65 who have dementia or
190 cognitive impairment at a level of severity consistent with
191 dementia, and

192 WHEREAS, the state needs to assess the current and future
193 impact of Alzheimer's disease on Floridians and the state's
194 health care system, programs, resources, and services to ensure
195 the continued development and implementation of a more
196 inclusive, integrated, comprehensive, coordinated, and current
197 strategy to address the needs of the growing number of
198 Floridians having Alzheimer's disease or a related form of
199 dementia and the corresponding needs of their caregivers, NOW,
200 THEREFORE,