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LEGISLATIVE ACTION

Senate	.	House
Comm: WD	.	
01/26/2012	.	
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The Committee on Governmental Oversight and Accountability
(Latvala) recommended the following:

Senate Amendment (with title amendment)

Delete lines 66 - 193
and insert:

(1) The task force shall consist of 18 volunteer members who reflect the cultural diversity in this state. Six members shall be appointed by the Governor, six members shall be appointed by the Speaker of the House of Representatives, and six members shall be appointed by the President of the Senate, as follows:

(a) A member of the House of Representatives.

(b) A member of the Senate.



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- 13 (c) A representative from the Alzheimer's Association.
14 (d) At least one person having Alzheimer's disease or a
15 related form of dementia.
16 (e) At least one family caregiver or former family
17 caregiver of a person having Alzheimer's disease or a related
18 form of dementia.
19 (f) A representative from the Alzheimer's Disease Advisory
20 Committee.
21 (g) A representative of law enforcement with knowledge
22 about the disappearance and recovery, self-neglect, abuse,
23 exploitation, and suicide of persons having Alzheimer's disease
24 or a related form of dementia.
25 (h) A representative who has knowledge of and experience
26 with the Baker Act and its impact on persons having Alzheimer's
27 disease or a related form of dementia.
28 (i) An expert on disaster preparedness and response for
29 persons having Alzheimer's disease or a related form of
30 dementia.
31 (j) A representative of a health care facility or hospice
32 that serves persons with Alzheimer's disease.
33 (k) A representative of the adult day care services
34 industry.
35 (l) A representative of health care practitioners
36 specializing in the treatment of persons having Alzheimer's
37 disease or a related form of dementia.
38 (m) A Florida board-certified elder law attorney.
39 (n) A representative of the area agencies on aging or aging
40 and disability resource centers.
41 (o) A person who is an Alzheimer's disease researcher.



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



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71 disease or a related form of dementia and their needs,
72 including, but not limited to:
73 a. The role of the state in providing community-based care,
74 long-term care, and family caregiver support, including respite,
75 education, and assistance to persons who are in the early stages
76 of Alzheimer's disease, who have younger-onset Alzheimer's
77 disease, or who have a related form of dementia.
78 b. The development of state policy with respect to persons
79 having Alzheimer's disease or a related form of dementia.
80 c. Surveillance of persons having Alzheimer's disease or a
81 related form of dementia for the purpose of accurately
82 estimating the number of such persons in the state at present
83 and projected population levels.
84 2. Existing services, resources, and capacity, including,
85 but not limited to:
86 a. The type, cost, and availability of dementia-specific
87 services throughout the state.
88 b. Policy requirements and effectiveness for dementia-
89 specific training for professionals providing care.
90 c. Quality care measures employed by providers of care,
91 including providers of respite, adult day care, assisted living
92 facility, skilled nursing facility, and hospice services.
93 d. The capability of public safety workers and law
94 enforcement officers to respond to persons having Alzheimer's
95 disease or a related form of dementia, including, but not
96 limited to, responding to their disappearance, search and
97 rescue, abuse, elopement, exploitation, or suicide.
98 e. The availability of home and community-based services
99 and respite care for persons having Alzheimer's disease or a



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100 related form of dementia and education and support services to
101 assist their families and caregivers.

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

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

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

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

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

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

128 (6) The task force shall submit to the Governor, the



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129 Speaker of the House of Representatives, and the President of
130 the Senate:

131 (a) An interim report of its findings 6 months after the
132 task force's formation; and

133 (b) Final date-specific recommendations in the form of an
134 Alzheimer's disease state plan no later than August 1, 2013.

135
136 The task force shall terminate on the earlier of the date the
137 recommendations are submitted or August 1, 2013.

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

140 And the title is amended as follows:

141 Delete lines 12 - 14

142 and insert:

143 travel expenses; requiring the task force to submit an
144 interim report and final recommendations in the form
145 of an Alzheimer's disease state plan to the Governor
146 and Legislature; providing for