

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: CS/CS/HB 1507 Dementia-related Staff Training

SPONSOR(S): Health & Human Services Committee, Finance & Facilities Subcommittee, Byrd

TIED BILLS: IDEN./SIM. **BILLS:** SB 1572

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
1) Finance & Facilities Subcommittee	15 Y, 0 N, As CS	Guzzo	Lloyd
2) Health & Human Services Committee	18 Y, 0 N, As CS	Guzzo	Calamas

SUMMARY ANALYSIS

Current laws require certain employees of nursing homes, home health agencies, assisted living facilities (ALFs), and adult day care centers to complete training on Alzheimer's disease or related disorders (ADRD). Employees of ALFs, other than special care ALFs, nurse registries, homemaker and companion service providers, and adult family care homes are not currently required to complete ADRD training.

The required training applies to employees whose duties require them to have direct contact with or provide direct care to individuals with ADRD. No other employees are required to receive ADRD training other than receiving basic written information, in most instances. The required number of hours of training and the timeframes in which the training must be completed vary among the above provider types. This initial training must be completed within three months of beginning employment.

The bill requires all employees of nursing homes, home health agencies, nurse registries, homemaker and companion service providers, ALFs, adult family-care homes, and adult day care centers, to complete one hour of initial ADRD training; not just those who have direct contact with individuals with ADRD. The bill requires the training to be completed within 30 days of beginning employment, instead of within three months.

In addition to the initial training, current law requires employees of nursing homes, home health agencies, and adult day care centers who provide direct care to individuals with ADRD to complete additional ADRD training within nine months of beginning employment. Current law does not require additional training for such employees of ALFs, home health agencies, nurse registries, homemaker and companion services providers, or adult family care homes. The bill fills in the gaps of facility types not currently required to complete additional training in the first year of employment by requiring employees of ALFs, nurse registries, homemaker and companion service providers, and adult family-care homes who provide direct care to individuals with ADRD to complete the additional training.

Current law requires employees who provide direct care to individuals with ADRD in ALFs and adult day care centers that provide special care for individuals with ADRD to complete four hours of continuing education annually. However, current law does not require such employees of adult family-care homes to complete continuing education. The bill fills in another gap to make training consistent among facility types by requiring employees of adult family-care homes to comply with the same continuing education requirements as the other facility types that provide special care for individuals with ADRD – four hours annually.

The bill requires all individuals currently employed, contracted, or referred to provide services when the bill becomes effective to complete the required training by July 1, 2025. Individuals newly employed, contracted, or referred to provide services on or after the effective date of the bill must complete the training within the timeframes provided in the bill.

The bill has no fiscal impact on state or local government.

The bill provides an effective date of July 1, 2022.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Background

Alzheimer's Disease

Alzheimer's disease is a form of dementia, a general term for memory loss. It is a progressive brain disorder that damages and eventually destroys brain cells, leading to memory loss and changes in the functions of the brain. Alzheimer's disease accounts for 60 to 80 percent of dementia cases. Alzheimer's disease is a progressive disease in which dementia symptoms worsen gradually over time. In the early stages of Alzheimer's disease, memory loss is mild; in late-stages, individuals lose the ability to carry on a conversation and respond to their environment. Currently, the disease has no cure, but treatment can temporarily slow the worsening of symptoms.¹

There are an estimated 6.2 million people in the United States with Alzheimer's disease.² By 2050, the number of people age 65 and older with Alzheimer's disease in the U.S. is expected to double to a projected 12.7 million people.³

Florida has an increasing number of individuals with Alzheimer's disease. An estimated 580,000 Floridians have Alzheimer's disease.⁴ The projected number of Floridians with Alzheimer's disease is estimated to increase by 24% to 720,000 individuals by 2025.⁵

Nursing Homes

A nursing home is a facility that provides 24-hour nursing care, personal care, or custodial care to individuals who are ill or physically infirm.⁶ Nursing homes are licensed and regulated by the Agency for Health Care Administration (AHCA) under part II of ch. 400, F.S.

Nursing homes are required to provide basic written information to new employees, upon beginning employment, about interacting with individuals with ADRD.⁷ If the employee's duties require them to have direct contact with residents with ADRD, they must complete one hour of initial training on ADRD within three months of beginning employment.⁸ The initial training must address the following subject areas:

- Understanding ADRD;
- Characteristics of ADRD; and
- Communicating with residents who have ADRD.⁹

¹ Alzheimer's Association, *2021 Alzheimer's Disease Facts and Figures*, available at <https://www.alz.org/media/documents/alzheimers-facts-and-figures.pdf> (last accessed January 29, 2022).

² Rajan KB, Weuve J, Barnes LL, McAninch EA, Wilson RS, Evans DA, *Population Estimate of People with Clinical AD and Mild Cognitive Impairment in the United States (2020-2060)*. *Alzheimers Dement.* 2021 Dec;17(12):1966-1975. doi: 10.1002/alz.12362. Epub 2021 May 27. PMID: 34043283.

³ Id.

⁴ Florida Department of Elder Affairs, *2021 Alzheimer's Disease Advisory Committee Annual Report*, available at https://elderaffairs.org/wp-content/uploads/ADAC-Report-2021_FINAL.pdf (last accessed January 29, 2022).

⁵ Id.

⁶ S. 400.021(7), F.S.

⁷ S. 400.1755(1), F.S.

⁸ S. 400.1755(2), F.S.

⁹ Rule 58A-4.001(1)(a), F.A.C.

Those employees who provide direct care to residents with ADRD must complete an additional three hours of training within nine months of beginning employment. The additional training must address the following subject areas:

- Behavior management;
- Assistance with activities of daily living;
- Activities for residents;
- Stress management for care givers;
- Family issues;
- Resident environment; and
- Ethical issues.¹⁰

Home Health Agencies

A home health agency provides one or more of the following home health services: nursing care; therapy; home health aide services; dietetics and nutrition; or medical supplies.¹¹ Home health agencies are licensed and regulated by AHCA under part III of ch. 400, F.S.

Home health agencies are required to provide basic written information to new employees, upon beginning employment, about interacting with individuals with ADRD.¹² Those employees who provide direct care to residents with ADRD must complete two hours of training on ADRD within nine months of beginning employment.¹³ The training must include:

- An overview of dementia;
- A demonstration of basic skills in communicating with individuals with dementia;
- Information on managing problem behaviors;
- Information about promoting the client's independence in activities of daily living; and
- Skills for working with families and caregivers.¹⁴

Assisted Living Facilities (ALFs)

An ALF is a residential establishment, or part of a residential establishment, that provides housing, meals, and one or more personal services for a period exceeding 24 hours to one or more adults who are not relatives of the owner or administrator.¹⁵ ALFs are licensed and regulated by AHCA under part I of ch. 429, F.S. An ALF that advertises that it provides special care for individuals with ADRD is required to meet certain staffing and ADRD training requirements that are not required of other ALFs.¹⁶

All ALF employees are required to attend a preservice orientation provided by the facility prior to interacting with residents. The preservice orientation must be at least two hours and must cover certain topics, including resident's rights and the services offered by the facility.¹⁷

ADRD training is only required for employees of ALFs that provide special care for residents with ADRD.¹⁸ ALFs that provide special care for residents with ADRD are required to provide basic written

¹⁰ Rule 58A-4.001(1)(b), F.A.C.

¹¹ S. 400.462(12) and (14), F.S.

¹² S. 400.4785(1)(a), F.S.

¹³ S. 400.4785(1)(b), F.S.

¹⁴ Id.

¹⁵ S. 429.02(5), F.S.

¹⁶ S. 429.177, F.S., and s. 429.178(1), F.S.

¹⁷ S. 429.52(1), F.S., and rule 59A-36.011(2), F.S.

¹⁸ S. 429.178(1), F.S., requires an ALF that advertises that it provides special care for persons with ADRD to meet certain standards of operation that are not required of other ALFs. This is not a separate licensure category. The additional standards of operation include: have an awake staff member on duty 24 hours a day, if the facility has 17 or more residents; if the facility has fewer than 17 residents, the facility may have mechanisms in place to monitor residents instead of having an awake staff member on duty 24 hours a day; offer activities specifically designed for persons who are cognitively impaired; have a physical environment that provides for the safety and welfare of the residents; and employ staff who have completed the required training and continuing education.

information to new employees about interacting with individuals with ADRD within 3 months of beginning employment.¹⁹

An employee who has regular contact with residents who have ADRD but does not provide direct care to such residents is required to complete four hours of initial ADRD training within three months of beginning employment.²⁰ The initial training must address the following subject areas:

- Understanding ADRD;
- Characteristics of ADRD;
- Communicating with residents who have ADRD;
- Family issues;
- Resident environment; and
- Ethical issues.²¹

A direct caregiver who is employed by an ALF that provides special care for residents with ADRD is required to complete four hours of additional training within nine months of beginning employment.²² The additional training must address the following subject areas:

- Behavior management;
- Assistance with activities of daily living;
- Activities for residents;
- Stress management for caregivers; and
- Medical information.²³

They are also required to complete four hours of continuing education on ADRD every year.²⁴

Adult Family-Care Homes

An adult family-care home is a private home, under which a person who owns or rents the home provides room, board, and personal care in a family-like living arrangement, on a 24-hour basis, for no more than five disabled adults or frail elders who are not relatives of the homeowner.²⁵ Adult family-care homes are licensed and regulated by AHCA under part II of ch. 429, F.S.

An adult family-care home that claims to provide special care for individuals with ADRD is required to disclose in its advertisements, or in a separate document, those services that distinguish the care as being especially applicable to, or suitable for, such persons.²⁶

Employees of adult family-care homes are not currently required to complete any ADRD training.

Adult Day Care Centers

Adult day care centers provide therapeutic services and activities for adults in a non-institutional setting.²⁷ Participants may utilize a variety of services offered during any part of a day totaling less than 24-hours. Basic services provided by adult day care centers include leisure activities, self-care training, nutritional services, and respite care.²⁸

¹⁹ S. 429.178(2)(c), F.S.

²⁰ S. 429.178(2)(a), F.S.

²¹ Rule 59A-36.011(10)(a), F.A.C.

²² S. 429.178(2)(b), F.S.

²³ Rule 59A-36.011(10)(c), F.A.C.

²⁴ S. 429.178(3), F.S.

²⁵ S. 429.65(2), F.S.

²⁶ S. 429.83, F.S.

²⁷ S. 429.901(3), F.S.

²⁸ *Id.*

Adult day care centers are required to provide basic written information to new employees, upon beginning employment, about interacting with individuals with ADRD.²⁹ If the employee's duties require them to have direct contact with residents with ADRD, they must complete one hour of initial training on ADRD within three months of beginning employment.³⁰ The initial training must address the following subject areas:

- Understanding ADRD;
- Characteristics of ADRD; and
- Communicating with participants who have ADRD.³¹

Those employees who provide direct care to residents with ADRD must also complete an additional three hours of training on ADRD within nine months of beginning employment.³² The additional training must address the following subject areas:

- Behavior management;
- Assistance with activities of daily living to promote the participant's independence;
- Stress management for the caregiver;
- Family issues;
- Participant environment; and
- Ethical issues.³³

An adult day care center may hold a license designated by AHCA as a specialized Alzheimer's services adult day care center if it meets certain requirements.³⁴ Employees of specialized Alzheimer's services adult day care centers, who have direct contact with, or provide direct care to, individuals with ADRD are required to receive four hours of ADRD training within three months of beginning employment.³⁵ Employees of specialized Alzheimer's services adult day care centers who provide direct care to participants with ADRD are required to receive an additional four hours of training within six months of beginning employment.³⁶ The curriculum for the additional four hours of training must address the following subject areas:

- Understanding brain disease;
- Normal brain functions and normal aging;
- Understanding treatable and irreversible dementia;
- Mental status tests;
- Communication and the effects of damage to brain cells;
- Influences on behavior and brain deterioration;
- Interventions;
- Physical causes and pain indications;
- Common ADRD medications and side effects;
- Malnutrition and dehydration;
- Activities of daily living;
- Validation therapy;
- Safety; and
- Caregiver stress management.

²⁹ S. 429.917(1)(a), F.S.

³⁰ S. 429.917(1)(b), F.S.

³¹ Rule 59A-16.110(1)(a), F.A.C.

³² S. 429.917(1)(c), F.S.

³³ Rule 59A-16.110(1)(b), F.A.C.

³⁴ S. 429.918(4), F.S.

³⁵ Rule 59A-16.111(2), F.A.C.

³⁶ Rule 59A-16.111(3), F.A.C.

Employees of specialized Alzheimer's services adult day care centers who provide direct care to participants with ADRD are also required to receive 4-hours of continuing education annually in topics related to ADRD.³⁷

Nurse Registries and Companion and Homemaker Services

A nurse registry is an agency licensed to secure employment for registered nurses, licensed practical nurses, certified nursing assistants, home health aides, companions, and homemakers, who are compensated by fees as independent contractors to provide services in a patient's home or with health care facilities or other entities.³⁸ Nurse registries are governed by part II of chapter 408, F.S., and the nurse registry rules in Chapter 59A-18, F.A.C. A nurse registry must be licensed by AHCA to offer contracts in Florida.³⁹ Current law does not require contracted personnel of nurse registries to complete training on ADRD.

Companions spend time with and care for elderly, handicapped, or convalescent individuals, prepare and serve meals to such individuals, and accompany such individuals on trips and outings. Companions are prohibited from providing hands-on personal care to a client.⁴⁰

Homemakers perform household chores that include housekeeping, meal planning and preparation, shopping assistance, and routine household activities for elderly, handicapped, or convalescent individuals. Homemakers are prohibited from providing hands-on personal care to a client.⁴¹

ADRD Training Providers and Curricula

The Department of Elder Affairs (DOEA) or its designee is responsible for approving ADRD training providers and curricula for employees of nursing homes, home health agencies, ALFs, and adult day care centers.⁴² The University of South Florida (USF) administers the Program through a contract with DOEA.⁴³

To be approved as a training provider, an applicant must provide proof of certain educational and experience requirements, including:

- A Master's degree from an accredited college in health care, human services, or gerontology; or
- A Bachelor's degree from an accredited college, or licensure as a registered nurse; and
- One year of experience as an educator of caregivers for individuals with ADRD; or
- Completion of a specialized training program relating to ADRD, and a minimum of two years of practical experience in a program providing direct care to individuals with ADRD; or
- Three years of practical experience in a program providing direct care to individuals with ADRD.⁴⁴

Upon successful completion of training, the trainer is required to issue the trainee a certificate of completion.⁴⁵ Each facility is required to keep copies of training certificates in each employee's personnel file, which are reviewed by AHCA during facility inspections.⁴⁶

Training curricula is certified for a period of three years and must be resubmitted for approval.⁴⁷ Approval of training curricula is based on how well it addresses the required subject areas.⁴⁸

³⁷ Rule 59A-16.111(5), F.A.C.

³⁸ S. 400.462(21), F.S.

³⁹ S. 400.506(1), F.S.

⁴⁰ S. 400.462(7), F.S.

⁴¹ S. 400.462(18), F.S.

⁴² S. 400.1755(5), F.S., s. 400.4785(1)(f), F.S., s. 429.178(5), F.S., and s. 429.917(1)(g), F.S.

⁴³ University of South Florida College of Behavioral & Community Sciences, *USF's Training Academy on Aging*, available at <http://www.trainingonaging.usf.edu/products/faq.cfm> (last accessed January 29, 2022).

⁴⁴ Rule 58A-5.0194(1)(a), F.A.C.

⁴⁵ Rule 58A-5.0194(3), F.A.C.

⁴⁶ Agency for Health Care Administration, 2022 Legislative Bill Analysis – HB 1507, January 20, 2022.

STORAGE NAME: h1507c.HHS

DATE: 2/24/2022

The table below depicts the number of approved trainers and training curricula by facility/provider type.⁴⁹

Facility/Provider Type	Approved Training Providers	Approved Training Curricula
Nursing Home	1,865	24
ALF	800	66
Home Health Agency	750	22
Adult Day Care Center	133	17
Total	3,548	129

Effect of the Bill

The bill makes the following changes (indicated by red font) to the ADRD training requirements for employees of nursing homes, home health agencies, nurse registries, ALFs, and adult day care centers to increase uniformity of training requirements across the long-term care industry.

		Initial Training, All "Employees"			
		Basic Written Info		Hour(s) of Initial Training	
		Current	Effect of the Bill	Current	Effect of the Bill
Nursing Homes		Basic written info upon beginning employment	Basic written info upon beginning employment	None.	1 hr w/in 1 st 30 days
Home Health Agencies		Basic written info upon beginning employment	Basic written info upon beginning employment	None.	1 hr w/in 1 st 30 days
Nurse Registry Companion or Homemaker Service		None.	Basic written info upon beginning employment		1 hr w/in 1 st 30 days
ALFs	Generally	None.	Basic written info upon beginning employment	None.	1 hr w/in 1 st 30 days
	Special Care	Basic written info w/in 1 st 3 months	Basic written info upon beginning employment	None.	1 hr w/in 1 st 30 days
Adult Family-Care Home	Generally	None.	Basic written info upon beginning employment	None.	1 hr w/in 1 st 30 days
	Special Care	None.	Basic written info upon beginning employment	None.	1 hr w/in 1 st 30 days
Adult Day Care Centers	Generally	Basic written info upon beginning employment	Basic written info upon beginning employment	None.	1 hr w/in 1 st 30 days
	Special Care	Basic written info upon beginning employment	Basic written info upon beginning employment	None.	1 hr w/in 1 st 30 days

		Direct Care Workers					
		Initial Hour(s) of Training ⁵⁰		Additional Training During First Year		Continuing	
		Current	Effect of the Bill	Current	Effect of the Bill	Current	Effect of the Bill
Nursing Homes		1 hr. w/in 1 st 3 months	1 hr w/in 1 st 30 days	3 hrs. w/in 1 st 9 months	3 hrs. w/in 1 st 7 months	None.	No change.
Home Health Agencies		None.	1 hr w/in 1 st 30 days	2 hrs. w/in 1 st 9 months	2 hrs. w/in 1 st 7 months	None.	No change.
Nurse Registry Companion or Homemaker Service		None.	1 hr w/in 1 st 30 days	None.	2 hrs. w/in 1 st 7 months	None.	No change.
ALFs	Generally	None.	1 hr w/in 1 st 30 days	None.	3 hrs. w/in 1 st 7 months	None.	No change.

⁴⁷ Rule 58A-5.0194((1)(b), F.A.C.

⁴⁸ Id.

⁴⁹ University of South Florida's Training Academy on Aging, Find Approved Applications, available at <https://usfweb.usf.edu/trainingonAging/default.aspx>, (last accessed January 29, 2022).

⁵⁰ Current law only provides an initial hour based training requirement for the direct care workers of certain provider types. The proposed initial hourly training requirement applicable to all "employees" is repeated here since all "direct care workers" will have to complete this training. This initial training requirement is not in addition to the initial hour based training that is currently applicable.

	Special Care	4 hrs. w/in 1 st 3 months	1 hr w/in 1 st 30 days	4 hrs. w/in 1 st 9 months	3 hrs. w/in 1 st 3 months plus 4 hrs. w/in 1 st 6 months	4 hrs., annually	No change.
Adult Family-Care Home	Generally	None.	1 hr w/in 1 st 30 days	None.	3 hrs. w/in 1 st 7 months	None.	No change.
	Special Care	None.	1 hr w/in 1 st 30 days	None.	3 hrs. w/in 1 st 3 months plus 4 hrs. w/in 1 st 6 months	None.	4 hrs., annually
Adult Day Care Centers	Generally	1 hr. w/in 1 st 3 months	1 hr w/in 1 st 30 days	3 hrs. w/in 1 st 9 months	3 hrs. w/in 1 st 7 months	None.	No change.
	Special Care	4 hrs. w/in 1 st 3 months	1 hr w/in 1 st 30 days	4 hrs. w/in 1 st 6 months	3 hrs. w/in 1 st 3 months plus 4 hrs. w/in 1 st 6 months	4 hrs., annually, <u>per rule</u>	4 hrs., annually, <u>per statute</u>

The bill requires all individuals currently employed, contracted, or referred to provide services when the bill becomes effective to complete the required training by July 1, 2023. Individuals newly employed, contracted, or referred to provide services on or after the effective date of the bill must complete the training within the timeframes provided in the bill.

The bill also allows the initial 1-hour training to count towards the 2-hour preservice orientation required to be completed by ALF employees.

ADRD Training Providers and Curricula

Current law authorizes DOEA or its designee to approve the initial 1-hour training curricula, the additional training (post-initial training) curricula, and the continuing education curricula for nursing homes, ALFs, adult family-care homes, home health agencies, and adult day care centers. The bill adds the authority for DOEA or its designee to approve such training curricula for nurse registries and homemaker and companion services.

The bill revises the training curricula approval process for the initial 1-hour training, the post-initial training, and the continuing education. For the initial 1-hour training requirement, the bill requires DOEA or its designee to provide the training online to all covered providers and their employees at no cost.

For the post-initial training and continuing education, the bill authorizes DOEA to develop training curriculum guidelines and allows training providers who meet certain qualifications to offer training without prior approval, including:

- An individual who is approved by a board of the Department of Health (DOH) to provide training and is registered with the DOH electronic continuing education tracking system; and
- An individual with a Master's or Doctorate degree in health care, social services, or gerontology from an accredited college or university.

The individuals above must also meet one of the following experience requirements:

- At least one year of teaching experience as an educator for caregivers of persons with ADRD; or
- At least one year of practical experience in a program providing care to persons with ADRD; or
- Completion of a specialized ADRD training program from an accredited health care, human services, or gerontology education provider.

The bill authorizes DOEA to adopt rules to establish requirements for the approval of other qualified training providers, and to conduct samplings of training curricula as necessary to monitor for compliance with curriculum guidelines.

Training Records

Under the bill, employees are not required to repeat any of the training requirements in the bill upon a change of employment to a different covered provider. To facilitate this, the bill addresses employee access to their own training records.

For the initial training, the bill requires trainers to provide a record of an employee's completion of training to the covered provider. The bill requires the covered provider to maintain a record of the employee's completion of the training, and upon written request by the employee, provide a copy of the record of completion to the employee.

For post-initial training and continuing education, the bill requires trainers to provide a record of an employee's completion of training and continuing education, but it does not specify who the record must be provided to (covered provider or employee). Further, the bill does not require a covered provider to maintain the record of completion or provide a copy of the record of completion like it does for records of completion of initial training.

Implementation

The bill requires all employees hired before July 1, 2022, to complete the training requirements of the bill by July 1, 2025. Individuals newly employed, contracted, or referred to provide services on or after the effective date of the bill must complete the training within the timeframes provided in the bill.

The bill provides an effective date of July 1, 2022.

B. SECTION DIRECTORY:

Section 1: Designates the bill as the "Florida Alzheimer's Disease and Dementia Education and Training Act."

Section 2: Creates s. 430.5025, F.S., relating to education and training to foster awareness of Alzheimer's disease and related forms of dementia.

Section 3: Amends s. 400.1755, F.S., relating to care for persons with Alzheimer's disease or related disorders.

Section 4: Amends s. 400.4785, F.S., relating to patients with Alzheimer's disease or other related disorders; staff training requirements; certain disclosures.

Section 5: Creates s. 400.510, F.S., relating to patients with Alzheimer's disease or other related disorders; staff training requirements.

Section 6: Amends s. 429.178, F.S., relating to special care for persons with Alzheimer's disease or other related disorders.

Section 7: Amends s. 429.52, F.S., relating to staff training and educational requirements.

Section 8: Amends s. 429.83, F.S., relating to residents with Alzheimer's disease or other related disorders; certain disclosures.

Section 9: Amends s. 429.917, F.S., relating to patients with Alzheimer's disease or other related disorders; staff training requirements; certain disclosures.

Section 10: Amends s. 429.918, F.S., relating to licensure designation as a specialized Alzheimer's services adult day care center.

Section 11: Requires individuals employed, contracted, or referred to provide services before the effective date of the bill to complete the required training in the bill by July 1, 2025.

Section 12: Provides an effective date of July 1, 2022.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:
None.

2. Expenditures:
None.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:
None.

2. Expenditures:
None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

The bill is likely to have a negative fiscal impact on health care facilities and providers as a result of the increased training requirements of the bill. The level of fiscal impact is indeterminate.

D. FISCAL COMMENTS:
None.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable. The bill does not appear to affect county or municipal governments.

2. Other:
None.

B. RULE-MAKING AUTHORITY:

The bill provides sufficient rule-making authority to DOEA to implement the provisions of the bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES

On February 3, 2022, the Finance & Facilities Subcommittee adopted an amendment and reported the bill favorably as a committee substitute. The amendment:

- Required only employees who have regular contact and interact with patients on a daily basis to comply with the initial 1-hour of training requirement;
- Increased the amount of time allowed for a newly hired direct care worker to complete the training from four months to seven months;
- Removed a requirement for DOEA to approve continuing education providers and curriculums;
- Streamlined the approval process for trainers that meet certain education and experience standards; and
- Allowed the 1-hour of initial training to count towards the 2-hour preservice orientation for ALF employees.

On February 23, 2022, the Health & Human Services Committee adopted two amendments and reported the bill favorably as a committee substitute. The amendments:

- Required covered providers to provide employees a copy of the completion of training certificate upon written request by the employee; and
- Changed the implementation date to require all employees hired before July 1, 2022, to complete the training requirements of the bill by July 1, 2025.

This analysis is drafted to the committee substitute as passed by the Health & Human Services Committee.