



OHIO LEGISLATIVE SERVICE COMMISSION

Bill Analysis

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H.B. 732

132nd General Assembly
(As Introduced)

Reps. Pelanda and Arndt, Koehler, Gavarone, Patterson, Boggs, Lanese, Carfagna

BILL SUMMARY

- Requires the employees of long-term services and supports providers that have programs or care units for patients with dementia to complete initial and annual training related to Alzheimer's disease and other types of dementia.
 - Specifies requirements for the training, including the minimum number of hours an employee must complete and the topics that must be covered.
 - Prohibits a person from providing direct care to a patient with dementia for a provider if the person has not completed the required initial training.
 - Requires providers to give consumers written information about the provider's dementia training program, including the categories of staff instructed and the content and frequency of the instruction.
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CONTENT AND OPERATION

Overview

The bill generally requires the employees of long-term services and supports providers to complete initial and annual training specific to dementia (including Alzheimer's disease and related disorders).¹ The bill establishes the minimum number of training hours an employee must complete and specifies the topics that must be covered in the training.

¹ R.C. 173.041(A)(3) and (C).

Dementia training

If a long-term services and supports provider either (1) has a special program or special care unit for individuals with dementia or (2) advertises, markets, or otherwise promotes itself as providing services for individuals with dementia, its employees (including independent contractors) must complete certain dementia-related training. The long-term services and supports providers subject to the bill's requirements include facility-based as well as community-based providers, and include all of the following:

(1) Long-term care facilities (nursing homes and hospital wings with long-term care beds);

(2) Residential care facilities (commonly referred to as assisted living facilities);

(3) Community-based long-term care services providers (private or government providers who offer health and social services such as case management, home health care, adult day-care, respite care, personal care, and homemaker services to individuals in community settings).²

Hour requirements

The bill establishes the minimum number of dementia-related training hours the employees of a long-term services and supports provider must complete when beginning employment and annually thereafter.

Initial training

The bill's training hour requirements are different for supervisors, direct-care staff, and indirect-care staff. Staff providing direct care to patients with dementia, and the supervisors of those staff members, must complete eight hours of training within the first 120 hours of employment with the long-term services and supports provider. Supervisors must complete two of those hours within the first 40 hours of employment. Direct-care staff must complete four of those hours within the first 40 hours of employment. Staff who do not provide direct care to patients with dementia, such as housekeeping, food service, and administrative staff, must complete four hours of instruction within the first 160 hours of employment.³

² R.C. 173.041(A).

³ R.C. 173.041(A)(5) and (C)(1)(a), (2)(a), and (3)(a).



Annual training

Employees must complete two hours of training annually beginning in the first calendar year after completing the initial training. The training must be related to dementia care.⁴

Topic requirements

The dementia-related training must include all of the following topics:

- The long-term services and supports provider's mission, values, and expectations of staff;
- Person-centered training and care planning, including cultural awareness;
- Social and physical environment characteristics that trigger or exacerbate symptoms of dementia;
- Meaningful and engaging activities for individuals with dementia;
- Pain assessment;
- Medication management;
- Family dynamics;
- General information about dementia;
- How to assist an individual with dementia with daily living activities;
- Problem solving challenging behavior, including nonpharmacological intervention;
- Communication skills.⁵

Training format

The bill requires the initial and annual training to (1) be evidence-based, (2) include competency evaluations, and (3) use interactive learning techniques such as experiential exercises, case studies, and group discussions. Additionally, no more than

⁴ R.C. 173.041(C)(1)(b), (2)(b), and (3)(b).

⁵ R.C. 173.041(D).



half of the initial instruction hours can be completed by unfacilitated online or video presentations.⁶

Direct care to patients

Under the bill, a person is prohibited from providing direct care to an individual with dementia on behalf of a long-term services and supports provider if the person has not completed the first four hours of training (see "**Initial training**" above), unless the person is directly supervised by a staff member who has completed those hours. A long-term services and supports provider must make sure that a supervisor who has completed both the initial and any required annual training is available to consult with direct-care staff who have not yet completed the required initial training.⁷

Consumer information

The bill requires long-term services and supports providers to give consumers written information about the provider's dementia training program. The information can be provided electronically. It must include data about the categories of staff instructed under the program and the content and frequency of the instruction.⁸

HISTORY

ACTION	DATE
Introduced	09-19-18

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⁶ R.C. 173.041(E).

⁷ R.C. 173.041(F).

⁸ R.C. 173.041(G).

