

MAINE STATE LEGISLATURE

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2 Date: 3-31-11

(Filing No. S-24)

3 HEALTH AND HUMAN SERVICES

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5 STATE OF MAINE

6 SENATE

7 125TH LEGISLATURE

8 FIRST REGULAR SESSION

9 COMMITTEE AMENDMENT "A" to S.P. 39, L.D. 65, "Resolve, To Require
10 Dementia Care Training in Long-term Care Facilities, Adult Day Care Programs, Certain
11 Residential Care Facilities and Supported Living Arrangements"

12 Amend the resolve by striking out the title and substituting the following:

13 **'Resolve, To Establish a Working Group of Stakeholders To Review the Current**
14 **and Future Dementia Training Needs of Long-term Care Providers'**

15 Amend the resolve by striking out everything after the title and before the summary
16 and inserting the following:

17 **'Emergency preamble. Whereas,** acts and resolves of the Legislature do not
18 become effective until 90 days after adjournment unless enacted as emergencies; and

19 **Whereas,** there are currently 30,000 individuals in Maine with Alzheimer's disease
20 or a related dementia and the number will grow to over 45,000 by 2025; and

21 **Whereas,** due to the nature of Alzheimer's disease and related dementias many of
22 these individuals will require long-term care at some point during their illnesses; and

23 **Whereas,** it is necessary to ensure a well-trained and capable long-term care
24 workforce as soon as possible; and

25 **Whereas,** in the judgment of the Legislature, these facts create an emergency within
26 the meaning of the Constitution of Maine and require the following legislation as
27 immediately necessary for the preservation of the public peace, health and safety; now,
28 therefore, be it

29 **Sec. 1. Working group to review dementia training needs of long-term**
30 **care providers. Resolved:** That the Department of Health and Human Services shall
31 establish within existing resources a working group of stakeholders to review the current
32 and future dementia training needs of long-term care providers. The working group must
33 include a representative from the department's Office of Elder and Adult Services, a
34 representative of the department's Office of Adult Mental Health Services, a

R.O.S.

1 representative of individuals with dementia, a representative of the long-term care
2 ombudsman program created under the Maine Revised Statutes, Title 22, section 5106, a
3 representative of long-term care facilities, a representative of assisted living facilities, a
4 representative of providers of home health care and other interested parties. The working
5 group shall assess the current and future training needs of providers of long-term care and
6 shall make recommendations to the Commissioner of Health and Human Services. The
7 commissioner shall report on the work and recommendations of the working group to the
8 Joint Standing Committee on Health and Human Services by November 30, 2011.

9 **Emergency clause.** In view of the emergency cited in the preamble, this
10 legislation takes effect when approved.'

11 **SUMMARY**

12 This amendment replaces the resolve and adds an emergency preamble and
13 emergency clause to the resolve. It directs the Department of Health and Human Services
14 to establish within existing resources a working group of stakeholders to review the
15 current and future dementia training needs of long-term care providers. It directs the
16 working group to make recommendations to the Commissioner of Health and Human
17 Services. It directs the commissioner to report to the Joint Standing Committee on Health
18 and Human Services by November 30, 2011.

19 **FISCAL NOTE REQUIRED**

20 (See attached)



Approved: 03/21/11 *MRC*

125th MAINE LEGISLATURE

LD 65

LR 448(02)

**Resolve, To Require Dementia Care Training in Long-term Care Facilities, Adult Day Care Programs,
Certain Residential Care Facilities and Supported Living Arrangements**

Fiscal Note for Bill as Amended by Committee Amendment "A" S-24

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - General Fund

Fiscal Detail and Notes

The additional costs to the Department of Health and Human Services are expected to be minor and can be absorbed utilizing existing budgeted resources.