



**Senate Bill 897 – Maryland Department of Health- Residential Services Agencies- Training Requirements** Senate Finance Committee, March 5, 2020

**House Bill 1168 – Maryland Department of Health- Residential Services Agencies- Training Requirements** House & Government Operations Committee, March 5, 2020

## **POSITION: ONE AMENDMENT SUPPORT**

**Elizabeth Cooney Care Network** supports **ONLY ONE AMENDMENT** to provide appropriate training for seniors with cognitive dementia or Alzheimer's under the Residential Services Agency licensure regulated under the Office of Health Care Quality.

**Current proposed bill language is extreme and does not take into account the day to day reality and economic impact on the Residential Services Agencies.**

### **Onerous and Narrow Training**

Reality, Maryland has declared a caregiver shortage in 2019. There is more need than caregivers available. Bill would take our front line caregivers in our homes away EVERY Year for Six Hours for SOLELY dementia training. Online access is not available for all of our workers across the state with limited to no internet access. Even more challenging, removing our caregivers from their patients and searching for their replacements **causing uncompensated triple expenses** – paying for the 1) narrowly defined trainer AND 2) staff hours during the training AND the 3) replacement caregiver.

### **Massive Challenge In-Person Training**

Massive challenge to coordinate all of our staff who are moving every hour of every day all over the state to be in one place for in-person training. Bill is written inclusive of non-healthcare staff who do not see or touch a patient. Over reaching and onerous.

### **Uncompensated Costs mean Higher Costs to Patients**

Additional Costs per hour for each worker per six hours a year while training causing additional overtime costs. Estimated \$ 60,000.00 per year for just this training alone. Patients should not have to bear the broad mandatory and inflexible training costs.

### **Non-Reimbursed Rates Public Payors-**

Medicaid and Veterans Administration, Senior Care, IHAS and other tax payer funded home care programs **DO NOT compensate for ANY trainings or the worker's wage.** Long Term care Insurance only covers flat fees per day which means the patient suffers for the costs of trainings with less care.

### **Caregiver Shortage**

Serious caregiver shortage to cover the workforce when in 6 hour annual training. Who replaces the main caregiver when they are in a yearly mandatory training? Not enough caregivers to cover the current need for care.

### **Lifespan Age Segment- BABY to 100**

Residential Services Agencies care for all LIFESPAN ages from new born babies to 100 years old. Proposed bill requires our pediatric and adult staff to receive mandatory six hours of Alzheimer's and dementia training. WHY? Again, removing skilled workforce for inappropriate trainings. **Why are we not allowing the agency demographic to guide the trainings?**

### **Economic Recession**

Higher costs, patients are going without care due to economy. Our elderly are economically fragile and should not bear this expense. During the last recession, Agencies collapsed under costs of operations. It is already expensive and highly regulated under current regulations to operate. We **lost 80%** of our home care industry. Who will care for our patients without us? We are again in tumultuous economic times. All added expenditures and requirements put our small business at risk. We care and keep our communities healthy and stable.

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## **Please support and vote in favor ~ ONLY ONE AMENDMENT:**

19-4A-03.1

(A) EACH RESIDENTIAL SERVICE AGENCY SHALL ENSURE THAT INDIVIDUALS WHO ARE REFERRED BY THE RESIDENTIAL SERVICE AGENCY TO PROVIDE HOME CARE SERVICES TO CLIENTS WHO HAVE ALZHEIMER'S DISEASE OR DEMENTIA RECEIVE APPROPRIATE TRAINING ON ALZHEIMER'S DISEASE AND DEMENTIA TO CARE FOR THE CLIENT.

(B) THE TRAINING SHALL INCLUDE, AT A MINIMUM, THE FOLLOWING AREAS OF INSTRUCTION:

- (1) AN OVERVIEW OF ALZHEIMER'S DISEASE AND DEMENTIA;
- (2) PERSON-CENTERED CARE;
- (3) AN UNDERSTANDING OF THE ASSESSMENT AND CARE PLANNING PROCESS;
- (4) ACTIVITIES OF DAILY LIVING; AND
- (5) ALZHEIMER'S DISEASE AND DEMENTIA BEHAVIORS AND COMMUNICATION.

(C) THE TRAINING PROVIDED IN SUBSECTION (B) OF THIS SECTION MAY BE COMPLETED THROUGH AN ONLINE COURSE OR IN-PERSON TRAINING, INCLUDING TRAINING PROVIDED BY A DELEGATING OR SUPERVISORY NURSE WITH RESPONSIBILITY FOR TRAINING OR DEVELOPING THE CLIENT'S PLAN OF CARE AND ASSIGNING APPROPRIATE PERSONNEL.

(D) THE RESIDENTIAL SERVICE AGENCY SHALL RETAIN RECORDS OF THE TYPE OF TRAINING PROVIDED IN THE PERSONNEL FILE ON THE INDIVIDUAL REFERRED TO PROVIDE HOME CARE SERVICES TO THE AGENCY'S CLIENT.

(E) THIS SECTION DOES NOT APPLY TO PROVIDERS OF HOME MEDICAL EQUIPMENT SERVICES.

SECTION 2. AND BE IT FURTHER ENACTED, THAT an individual referred by a residential service agency to provide home care services to a client as of October 1, 2020 who has otherwise not received training equivalent to the training described in this Act, shall receive the training on or before July 1, 2021.