Chapter 480

(Senate Bill 204)

AN ACT concerning

Health Care Facilities – Assisted Living Programs – Requirements for Alzheimer’s Special Care Units and Memory Care and Alzheimer’s Disease Unit Regulations

FOR the purpose of requiring that the Maryland Department of Health adopt certain regulations that establish specific standards governing memory care and establish certain training and staffing requirements for Alzheimer’s disease special care units in assisted living programs, including certain training requirements, certain staffing pattern requirements, certain activity requirements, certain admissions and discharge criteria, and certain other procedures, and that require compliance by assisted living programs with the standards; defining certain terms; requiring the Department to convene certain stakeholders to make revisions to certain regulations and adopt certain regulations on or before a certain date; and generally relating to assisted living programs.

BY repealing and reenacting, with amendments,

Article – Health – General
Section 19–1805(a)(8) and (9)
Annotated Code of Maryland (2019 Replacement Volume and 2020 Supplement)

BY adding to

Article – Health – General
Section 19–1805(e) 19–1805(a)(10)
Annotated Code of Maryland (2019 Replacement Volume and 2020 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article – Health – General

19–1805.

(a) The Department shall:

(8) Establish a “resident bill of rights” for residents of assisted living program facilities; [and]
(9) Define which, if any, assisted living programs may be exempt from the requirements of § 19–311 of this title; AND

(10) **FOR ALZHEIMER’S SPECIAL CARE UNITS:**

   (1) **ESTABLISH THE NUMBER OF DEMENTIA–SPECIFIC TRAINING HOURS TO BE COMPLETED FOR THOSE STAFF WORKING IN ALZHEIMER’S SPECIAL CARE UNITS:**

   (II) **DETERMINE THE TOPIC CONTENT FOR DEMENTIA–SPECIFIC TRAINING REQUIRED FOR THOSE STAFF WORKING IN ALZHEIMER’S SPECIAL CARE UNITS; AND**

   (III) **REQUIRE STAFF SUFFICIENT TO MEET THE NEEDS OF RESIDENTS IN ALZHEIMER’S SPECIAL CARE UNITS.**

(c)(1) In this subsection the following words have the meanings indicated.

   (II) “**DIRECT CARE STAFF**” means, “**DIRECT CARE STAFF**” means an employee, a volunteer, or a contractual employee who provides to residents:

   1. (I) **MEDICATION ADMINISTRATION OR ASSISTANCE;**

   2. (II) **ASSISTANCE WITH AMBULATION AND TRANSFER;**

   3. (III) **ESSENTIAL ACTIVITIES OF DAILY LIVING; OR**

   4. (IV) **ANY OTHER LIMITED NURSING SERVICES.**

   (III) “**LIMITED NURSING SERVICES**” means the assessment of the physical, mental, and emotional status of an individual to determine the appropriate level of care for the individual, and the provision of nursing care within the direct care staff’s scope of practice, which can be completed within 7 days or intermittently.

(2) **THE DEPARTMENT SHALL ADOPT REGULATIONS THAT:**

   (I) **ESTABLISH SPECIFIC STANDARDS GOVERNING MEMORY CARE AND ALZHEIMER’S DISEASE UNITS IN ASSISTED LIVING PROGRAMS, INCLUDING:**
1. **Staff Training Requirements**, including the number of hours and topic content of dementia-specific training that is required to be completed annually by administrators and direct care staff assigned to a special care unit; and

2. **Staffing Pattern Requirements**, including a direct care staff standard and nursing staff ratio adequate to meet the needs of residents during waking and nonwaking hours; residents; and

3. **Appropriate Frequency and Type of Activities** for residents, including:
   
   A. The number of hours and training requirements for the individual who oversees the activities; and
   
   B. Adjusting activities to reduce social isolation of residents during a disease outbreak investigation;

4. **Procedures** that are beyond those procedures historically provided for in an assisted living program, including frequency of nighttime bed checks to prevent dangerous events among residents; and

5. **Admissions** and discharge criteria and procedures, including the appropriateness of placement and continued residence in the special care unit; and

   (II) **Require compliance by assisted living programs with the standards established under item (I) of this paragraph.**

**SECTION 2. AND BE IT FURTHER ENACTED, That:**

(1) on or before December 1, 2022, subject to item (2) of this section, the Maryland Department of Health shall adopt the regulations for Assisted Living Programs (COMAR 10.07.14) that are in draft form, closed for comment, and undergoing internal review and are on the Department’s website as of the effective date of this Act; and

(2) the regulations adopted under item (1) of this section shall include the regulations required under § 19–1805(c) of the Health-General Article, as enacted by Section 1 of this Act.

**SECTION 2. AND BE IT FURTHER ENACTED, That, on or before December 1, 2022, the Maryland Department of Health shall:**
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(1) convene interested stakeholders to make revisions to the regulations for Assisted Living Programs (COMAR 10.07.14) using the draft dated September 30, 2016, as the starting point for discussion; and

(2) adopt revised regulations for assisted living programs that incorporate the requirements for Alzheimer’s special care units as enacted under Section 1 of this Act.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2021.

Enacted under Article II, § 17(c) of the Maryland Constitution, May 30, 2021.