S 10. LONG-TERM CARE SAFETY INITIATIVE. TO ENACT REFORMS IN THE LONG-TERM CARE INDUSTRY IN ORDER TO IMPROVE QUALITY OF CARE, INCREASE PROTECTION OF RESIDENTS, AND STRENGTHEN STATE OVERSIGHT OF INDUSTRY PRACTICES. Contains no substantive provisions. Intro. by Perdue.

Ref. to Health Care  $\Box$  GS 131D  $\Box$ 

## April 28, 1999

**S 10. LONG-TERM CARE SAFETY INITIATIVE.** Intro. 1/28/99. Senate committee substitute makes the following changes to 1st edition. Adds substantive provisions to bill in three parts.

Part I – Substantive Provisions for Resident Safety. Creates new sections in Chapter 131D requiring the Medical Care Commission to adopt rules establishing minimum standards for adult care homes, and requires adult care homes to comply with those rules, as well as the resident's individual assessment and plan of care. Commission rules must address minimum staffing. training and gualification standards, establish due process and appeal rights for discharge and transfer of residents, procedures for determining compliance history of adult care homes' principals and affiliates, and for licensure of special care units, disclosure requirements and limited provisional licenses. Requires licensure of special care units, defined as a wing or hallway within an adult care home, or a program that is designated especially for residents with Alzheimer's disease or other dementias, or other special needs disease or condition as determined by the Comm'n, which may include mental disabilities. Creates adult care home specialist fund to assist counties in paying salaries of adult care home specialists. Amends GS 131D-2 to change references to Social Services Comm'n to Medical Care Comm'n in provisions involving determination of needs that cannot be met in adult care home. Requires Dep't of Health and Human Services to conduct compliance history review prior to issuing or renewing licenses. Amends GS 131D-21 to add notice and appeal provisions regarding transfer or discharge to list of resident's rights. Amends GS 131D-2(b)((1) to limit provisional license to not more than 90 days and to provide for not more than one extension under conditions specified in the bill. Adds provisions specifying requirements for department of social services and Dep't of Health and Human Services investigations upon receiving complaints. Adds new subsection to GS 131E-233 to authorize a court, upon petition by the Dep't for emergency intervention, to order appointment of an emergency temporary manager under circumstances specified in the bill. Amends GS 131E-242 to add requirement that the Dep't require facilities to conduct initial and annual assessments of each resident using an instrument approved by the Secretary upon the advice of the Director of the Div'n of Aging. The facility must use the assessment to develop service and care plans and to determine the level and type of staff needed to care for the resident. Requires the Dep't to review assessments and service plans as part of its inspection and licensing process and to require corrective action or pursue sanctions when facilities do not comply.

Part II - Adult Care Home Disclosure Requirements. Substantially similar to H 977/S 783, introduced 4/12/99. Requires adult care homes to disclose the form of care or treatment provided in a special care unit.

Part III - Miscellaneous and Conforming Provisions. Amends GS 131D-4.2(h) to provide that rates for family care homes must be based on market rate data. Requires the Dep't of Health and Human Services to establish and maintain a provider file to record and monitor compliance histories of facilities, owners, operators, and affiliates or nursing homes and adult care homes. Requires Dep't to continue demonstration project testing the TEACCH model as a method for finding and retaining staff for adult care homes and nursing homes. Repeals GS 143B, Article 3, Part 14E (Standards for Alzheimer's Special Care Units). Requires the Dep't to make recommendations by Feb. 1, 2000 to the North Carolina Study Commission on Aging on a more efficient system of regulatory administration for adult care homes. Requires Study Commission on Aging to study licensing fees, the need for licensure of administrators, and the organization of the current regulatory system. Requires the Joint Legislative Health Care Oversight Committee to

study whether the Health Care Registry is working effectively. Findings of these studies are to be reported to the General Assembly by May 1, 2000.

## July 14, 1999

**S 10. LONG-TERM CARE SAFETY INITIATIVE.** Intro. 1/28/99. House amendments make the following changes to 2nd edition.

Amendment #1 amends GS 131D-2(b)(1a) to require Dep't to monitor regularly the enforcement of rules pertaining to air circulation, ventilation, and room temperature; rules must require air conditioning or at least one fan per resident bedroom and dining areas when temperature in main center corridor exceeds 80 degrees F.

Amendment #2 revises definition of "special care unit" to include those designated especially for residents with "Alzheimer's disease or other dementias, <u>a mental health disability</u>, or other special needs disease or condition as determined by the Medical Care Comm'n" (underlined words added) and makes conforming changes throughout the bill.

Amendment #3 adds new section directing Mental Health Study Comm'n to study issues related to appropriate placement of persons with mental health disabilities in adult care homes and to consider whether adequate mental health services are available to residents of adult care homes. Directs Comm'n to report findings to General Assembly no later than May 1, 2000.

Amendment #4 amends GS 131D-2 (as revised by the bill) to provide that Dep't shall ensure that facilities complete an assessment of each resident within 72 hours of admission (was, "prior to" admission) and annually thereafter.

Amendment #5 revises GS 14-32.2, which now makes it a crime to physically abuse a patient of a health care facility or resident of residential care facility when the abuse is the result of an intentional or

culpably negligent act or omission which "causes serious bodily injury or death." The amendment deletes the word "serious" from the quoted phrase. Retains provisions of current law making various grades of conduct a felony ranging from Class C to Class F and adds new provision making it a Class A2 misdemeanor where such conduct evinces a pattern of conduct and the conduct is willful or culpably negligent and proximately causes bodily injury to a patient or resident. Defines "abuse" as used in this statute as willfully or culpably negligent infliction of physical injury or willful or culpably negligent violation of any law designed for the health, welfare, or comfort of a patient or resident. Amendment to GS 14-32.2 effective Dec. 1, 1999.

Amendment #6 adds direction that Health Care Oversight Committee shall also study requirements for criminal history record checks for applicants for employment in adult care homes.