

LPPC AGENDA ITEM DETAIL SHEET

BILL: AB 150, as introduced, Mathis. Disabled persons: rights: liability.

ISSUE: Should business owners be given more notice before a lawsuit for an alleged ADA violation is filed against them?

SUMMARY: This bill would establish notice requirements for a plaintiff to follow before bringing an action against a small business, as defined, for an alleged violation of the Americans with Disabilities Act of 1990 (ADA). The bill would require the plaintiff to provide notice to a business at least 6 months before filing the complaint. The bill would also preclude commencement of an action against a small business for an alleged ADA violation if the small business has made a good faith effort to correct the alleged violation.

BACKGROUND/ANALYSIS:

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1.

Section 54.3 of the Civil Code is amended to read:

54.3.

(a) Any person or persons, firm or corporation who denies or interferes with admittance to or enjoyment of the public facilities as specified in Sections 54 and 54.1 or otherwise interferes with the rights of an individual with a disability under Sections 54, 54.1 and 54.2 is liable for each offense for the actual damages and any amount as may be determined by a jury, or the court sitting without a jury, up to a maximum of three times the amount of actual damages but in no case less than one thousand dollars (\$1,000), and attorney's fees as may be determined by the court in addition thereto, suffered by any person denied any of the rights provided in Sections 54, 54.1, and 54.2. "Interfere," for purposes of this section, includes, but is not limited to, preventing or causing the prevention of a guide dog, signal dog, or service dog from carrying out its functions in assisting a disabled person.

(b) Any person who claims to be aggrieved by an alleged unlawful practice in violation of Section 54, 54.1, or 54.2 may also file a verified complaint with the Department of Fair Employment and Housing pursuant to Section 12948 of the Government Code. The remedies in this section are nonexclusive and are in addition to any other remedy provided by law, including, but not limited to, any action for injunctive or other equitable relief available to the aggrieved party or brought in the name of the people of this state or of the United States.

(c) A person may not be held liable for damages pursuant to both this section and Section 52 for the same act or failure to act.

(d) (1) *A plaintiff may not commence an action against a small business pursuant to this section for a violation of subdivision (c) of Section 54 or subdivision (d) of Section 54.1 unless all of the following conditions have been met:*

(A) *At least six months prior to filing the complaint, the plaintiff provided the defendant notice of the alleged violation of the Americans with Disabilities Act of 1990 (Public Law 101-336), including the specific facts that constitute the alleged violation, and specifying how the violation can be remedied.*

(B) *The defendant failed to make a good faith effort to correct the alleged violation within six months of the date that the notice of the alleged violation was received.*

(2) *For purposes of this subdivision, "small business" means a business that employs fewer than 50 full-time employees.*

DISCUSSION: Various bills have been introduced in the legislature over the years aimed at curbing what some people view as frivolous lawsuits filed for what they see as minor ADA violations.

However, disability rights proponents counter that the ADA has been the law for the land for decades, and that ignorance of the law is no excuse. They further contend that what may seem like a trivial violation to someone who is not disabled can be a major impediment for a person with I/DD.

It should also be noted that this bill does not seem to define what constitutes a "good faith effort" to correct a violation.

RECOMMENDATION: None.

COUNCIL STRATEGIC PLAN OBJECTIVE: Goal 1: Self Advocacy.

ATTACHMENTS: Text of AB 150.

PREPARED: Bob Giovati.

ASSEMBLY BILL

No. 150

Introduced by Assembly Member Mathis

January 10, 2017

An act to amend Section 54.3 of the Civil Code, relating to disabled persons.

LEGISLATIVE COUNSEL'S DIGEST

AB 150, as introduced, Mathis. Disabled persons: rights: liability.

Under existing law, a person, firm, or corporation that interferes with various specified rights of a disabled individual is liable for the actual damages of each offense and any amount determined by a judge or jury of up to 3 times the amount of the actual damages, but in no case less than \$1,000.

This bill would establish notice requirements for a plaintiff to follow before bringing an action against a small business, as defined, for an alleged violation of the Americans with Disabilities Act of 1990 (ADA). The bill would require the plaintiff to provide notice to a business at least 6 months before filing the complaint. The bill would also preclude commencement of an action against a small business for an alleged ADA violation if the small business has made a good faith effort to correct the alleged violation.

Vote: majority. Appropriation: no. Fiscal committee: no.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 54.3 of the Civil Code is amended to
2 read:

1 54.3. (a) Any person or persons, firm or corporation who
2 denies or interferes with admittance to or enjoyment of the public
3 facilities as specified in Sections 54 and 54.1 or otherwise interferes
4 with the rights of an individual with a disability under Sections
5 54, 54.1 and 54.2 is liable for each offense for the actual damages
6 and any amount as may be determined by a jury, or the court sitting
7 without a jury, up to a maximum of three times the amount of
8 actual damages but in no case less than one thousand dollars
9 (\$1,000), and attorney's fees as may be determined by the court
10 in addition thereto, suffered by any person denied any of the rights
11 provided in Sections 54, 54.1, and 54.2. "Interfere," for purposes
12 of this section, includes, but is not limited to, preventing or causing
13 the prevention of a guide dog, signal dog, or service dog from
14 carrying out its functions in assisting a disabled person.

15 (b) Any person who claims to be aggrieved by an alleged
16 unlawful practice in violation of Section 54, 54.1, or 54.2 may also
17 file a verified complaint with the Department of Fair Employment
18 and Housing pursuant to Section 12948 of the Government Code.
19 The remedies in this section are nonexclusive and are in addition
20 to any other remedy provided by law, including, but not limited
21 to, any action for injunctive or other equitable relief available to
22 the aggrieved party or brought in the name of the people of this
23 state or of the United States.

24 (c) A person may not be held liable for damages pursuant to
25 both this section and Section 52 for the same act or failure to act.

26 (d) (1) *A plaintiff may not commence an action against a small
27 business pursuant to this section for a violation of subdivision (c)
28 of Section 54 or subdivision (d) of Section 54.1 unless all of the
29 following conditions have been met:*

30 (A) *At least six months prior to filing the complaint, the plaintiff
31 provided the defendant notice of the alleged violation of the
32 Americans with Disabilities Act of 1990 (Public Law 101-336),
33 including the specific facts that constitute the alleged violation,
34 and specifying how the violation can be remedied.*

35 (B) *The defendant failed to make a good faith effort to correct
36 the alleged violation within six months of the date that the notice
37 of the alleged violation was received.*

- 1 (2) *For purposes of this subdivision, “small business” means*
- 2 *a business that employs fewer than 50 full-time employees.*

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LPPC AGENDA ITEM DETAIL SHEET

BILL: AB 340, as introduced, Arambula. Early and Periodic Screening, Diagnosis, and Treatment Program: trauma screening.

ISSUE: Should screening for trauma be added to the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program?

SUMMARY: According to the author, AB 340 will expand California's infant and child early screening program to identify children who are victims of trauma, in order to provide them with the proper mental health care services.

BACKGROUND/ANALYSIS: Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services, including early and periodic screening, diagnosis, and treatment for any individual under 21 years of age who is covered under Medi-Cal consistent with the requirements under federal law. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions.

Existing federal law provides that EPSDT services include periodic screening services, vision services, dental services, hearing services, and other necessary services to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, whether or not the services are covered under the state plan. In addition to the required periodic screening services, existing federal law provides that Medicaid-eligible children are entitled to interperiodic screenings in order to identify a suspected illness or condition not present or discovered during the periodic examination.

The bill would require, consistent with federal law, that screening services under the EPSDT program include screening for trauma, as defined by the bill and as specified. The bill also would require the department, in consultation with the State Department of Social Services and others, to adopt, employ, and develop, as appropriate, tools and protocols for screening children for trauma and would authorize the department to implement, interpret, or make specific the screening tools and protocols by means of all-county letters, plan letters, or plan or provider bulletins, as specified.

DISCUSSION: The author declares: The Center for Disease Control and Prevention has found that children who experience trauma are at higher risk for health and social problems, like mental health, asthma, diabetes and obesity, as well as learning difficulties. This research shows that negative childhood experiences such as physical, sexual, and emotional abuse and neglect, substance misuse within the household,

incarcerated household member or household mental illness have a tremendous impact on the mental, behavioral and physical health. Research on this is referred to as Adverse Childhood Experiences (ACEs), which if not prevented or diagnosed and treated early on in a child's life, are linked to chronic health conditions, low life potential, and early death.

The chronic stress from ACEs childhood trauma can damage brain development for children and can result in future health diseases and violent behaviors in the child and can be passed from parent to child. Proper detection for ACEs is needed through screening for trauma in children to prevent future negative health and social consequences and help them reach their full potential.

Current Federal law under the Social Security Act defines Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services as comprehensive preventative, diagnostic and treatment services for low-income children under 21. States are required to provide coverage of any services listed in federal law to children who require them.

RECOMMENDATION: Support AB 340.

COUNCIL STRATEGIC PLAN OBJECTIVE: Goal 4: Health and Safety.

ATTACHMENTS: Text of AB 340.

PREPARED: Bob Giovati.

ASSEMBLY BILL

No. 340

Introduced by Assembly Member Arambula

February 7, 2017

An act to add Section 14132.19 to the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 340, as introduced, Arambula. Early and Periodic Screening, Diagnosis, and Treatment Program: trauma screening.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services, including early and periodic screening, diagnosis, and treatment for any individual under 21 years of age who is covered under Medi-Cal consistent with the requirements under federal law. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions.

Existing federal law provides that EPSDT services include periodic screening services, vision services, dental services, hearing services, and other necessary services to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, whether or not the services are covered under the state plan. In addition to the required periodic screening services, existing federal law provides that Medicaid-eligible children are entitled to interperiodic screenings in order to identify a suspected illness or condition not present or discovered during the periodic examination.

The bill would require, consistent with federal law, that screening services under the EPSDT program include screening for trauma, as

defined by the bill and as specified. The bill also would require the department, in consultation with the State Department of Social Services and others, to adopt, employ, and develop, as appropriate, tools and protocols for screening children for trauma and would authorize the department to implement, interpret, or make specific the screening tools and protocols by means of all-county letters, plan letters, or plan or provider bulletins, as specified.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 14132.19 is added to the Welfare and
2 Institutions Code, to read:

3 14132.19. (a) Consistent with federal law, screening services
4 provided under the Early and Periodic Screening, Diagnosis, and
5 Treatment (EPSDT) benefit pursuant to subdivision (v) of Section
6 14132 shall include screening for trauma consistent with the
7 protocols the department develops pursuant to subdivision (c).

8 (b) "Trauma," as used in this section, means the result of an
9 event, series of events, or set of circumstances that is experienced
10 by an individual as physically or emotionally harmful or
11 threatening and that has lasting adverse effects on the individual's
12 functioning and physical, social, emotional, or spiritual well-being.

13 (c) (1) The department, in consultation with the State
14 Department of Social Services, behavioral health experts, child
15 welfare experts, and stakeholders, shall adopt, employ, and
16 develop, as appropriate, tools and protocols for the screening of
17 children for trauma, consistent with existing law and this section.

18 (2) Notwithstanding Chapter 3.5 (commencing with Section
19 11340) of Part 1 of Division 3 of Title 2 of the Government Code,
20 the department may implement, interpret, or make specific this
21 subdivision by means of all-county letters, plan letters, plan or
22 provider bulletins, or similar instructions, without taking regulatory
23 action.

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LPPC AGENDA ITEM DETAIL SHEET

BILL: SB 283, as introduced, Wilk. Developmental services: traumatic brain injuries.

ISSUE: Age on onset definition of a developmental disability in California.

SUMMARY: The author states that this bill will extend the age of onset definition for developmental disability to include persons who suffer traumatic brain injuries after attaining age 18 but before attaining age 22. Such persons shall be eligible for developmental disability services and support. It would not change or broaden the definitions of the disability conditions themselves. This age of onset change would be to California Welfare and Institutions Code Section 4512(a), not the Lanterman Act.

BACKGROUND/ANALYSIS: From the fact sheet: California Welfare and Institutions Code Section 4512(a) defines a developmental disability as a disability that originates before an individual attains 18 years of age; continues, and can be expected to continue, indefinitely; and constitutes a substantial disability for that individual. There are multiple reasons for extending the age to 22. First, suggesting that California change its age of onset from 18 to 22 is to conform with the Federal definition as 38 states have already done. Secondly, the medical community has long made it clear that a child's brain has not completed its growth or development until the age of 22 at least and possibly beyond that. Finally, the change in law would have a very meaningful impact on the lives of these struggling young disabled Californians who need help.

DISCUSSION: The author adds: The bill would modify the developmental disability definition to make a person who suffers a traumatic brain injury after he or she attains 18 years of age, but before he or she attains 22 years of age, eligible for services and supports for persons with developmental disabilities if the person would be otherwise eligible for those services but for his or her age.

RECOMMENDATION: Support SB 283.

COUNCIL STRATEGIC PLAN OBJECTIVE: Goal 4: Health and Safety.

ATTACHMENTS: Text of SB 238.

PREPARED: Bob Giovati.

**Introduced by Senator Wilk
(Coauthor: Senator Hertzberg)**

February 9, 2017

An act to add Section 4512.5 to the Welfare and Institutions Code, relating to developmental services.

LEGISLATIVE COUNSEL'S DIGEST

SB 283, as introduced, Wilk. Developmental services: traumatic brain injuries.

Existing law, the Lanterman Developmental Disabilities Services Act, requires the State Department of Developmental Services to contract with regional centers to provide services and supports to individuals with developmental disabilities and their families, and requires regional centers to identify and pursue all possible sources of funding for consumers receiving those services. Existing law defines a "developmental disability" as a disability that originates before an individual attains 18 years of age, continues, or can be expected to continue, indefinitely, and constitutes a substantial disability for the individual.

This bill would modify that definition to make a person who suffers a traumatic brain injury after he or she attains 18 years of age, but before he or she attains 22 years of age, eligible for services and supports for persons with developmental disabilities if the person would be otherwise eligible for those services but for his or her age.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 4512.5 is added to the Welfare and
2 Institutions Code, to read:
3 4512.5. Notwithstanding subdivision (a) of Section 4512, a
4 person who suffers a traumatic brain injury after he or she attains
5 18 years of age, but before he or she attains 22 years of age, shall
6 be eligible for services and supports for persons with
7 developmental disabilities if the person would be otherwise eligible
8 for those services but for his or her age.

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LPPC AGENDA ITEM DETAIL SHEET

BILL: SB 409, as introduced, Nguyen. Veteran's homes: residents with complex mental and behavioral health needs.

ISSUE: Mental and behavioral health issues impacting veterans.

SUMMARY: The author states that SB 409 requires the California Department of Veterans Affairs (CalVet) to develop a plan to accommodate veterans with complex mental and behavioral needs at the state's veteran's homes.

BACKGROUND/ANALYSIS: From the author's fact sheet: Research, including a 2008 RAND Corporation survey and the National Vietnam Veterans Readjustment Study, has shown that veterans are more likely to suffer from a mental or behavioral health condition than the general population. About 2,500 California veterans reside in California's eight veteran's homes. They receive residential or long-term care, including basic mental and behavioral health services. Those with mental and behavioral health conditions typically suffer from depression, anxiety, bipolar disorder, schizophrenia, substance use disorder, and/or post-traumatic stress disorder (PTSD). In January 2017, the Legislative Analyst's Office (LAO) found that the state's veteran's homes have limited capacity to assist veterans with complex mental and behavioral needs.

Veterans that suffer from such needs often require more services. Because of staffing and specialized care ratio requirements and limited resources available, some veteran's homes have had to deny admission or discharge these veterans. For example, data from the Yountville and Redding veteran's homes show that in 2015-16, 30 applicants were denied admission and 32 residents were discharged (10 involuntarily) due to behavioral health-related concerns about staffing and care disruption. Consequently, veterans most in need of mental and behavioral health services stemming from their sacrifices and service to the state and country are unable to receive them.

California operates veteran's homes, which provide independent living and long-term care services and basic mental and behavioral health care to eligible California veterans. CalVet regulates the state's veteran's homes.

DISCUSSION: The author declares: SB 409 requires CalVet to develop a plan to accommodate more residents suffering from complex mental and behavioral health needs into California's veterans' homes. The plan should include a strategy for where, how, and how many residents with complex mental and behavioral health needs could best be accommodated, in light of staffing and other budgeting resources. CalVet must

report its plan to the Legislature by January 1, 2019. SB 409 allows the state to help our veterans who suffer from mental illness and have already sacrificed so much for our country.

Staff note: This could be classified as an emerging issue area that SCDD may want to consider becoming more involved in.

RECOMMENDATION: None.

COUNCIL STRATEGIC PLAN OBJECTIVE: Goal 4: Health and Safety.

ATTACHMENTS: Text of SB 409.

PREPARED: Bob Giovati.

Introduced by Senator Nguyen

February 15, 2017

An act relating to veterans homes.

LEGISLATIVE COUNSEL'S DIGEST

SB 409, as introduced, Nguyen. Veterans homes: residents with complex mental and behavioral health needs.

Existing law provides for the establishment and operation of veterans' homes at various sites, and provides for an administrator of each home, as specified. Existing law establishes the duties of the Department of Veterans Affairs with regard to the establishment and regulation of veterans' homes.

This bill would, on or before January 1, 2019, require the Department of Veterans Affairs to develop a plan to accommodate more residents suffering from complex mental and behavioral health needs into veterans homes, and to send a report to the Legislature detailing that plan.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. (a) The Department of Veterans Affairs shall,
2 on or before January 1, 2019, develop a plan to accommodate more
3 residents suffering from complex mental and behavioral health
4 needs into homes for veterans.
5 (b) On or before January 1, 2019, the department shall send a
6 report to the Legislature detailing the plan developed pursuant to

- 1 subdivision (a). This report shall be submitted in compliance with
- 2 Section 9795 of the Government Code.

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LPPC AGENDA ITEM DETAIL SHEET

BILL: SB 449, as introduced, Monning. Skilled nursing and intermediate care facilities: training programs.

ISSUE: Should Certified Nurse Aids (CNAs) be required to have specific training related directly to Alzheimer's and related dementias?

SUMMARY: The author states that SB 449 will require eight hours of classroom training for Certified Nurse Aides (CNAs) to be dedicated to address the special needs of those with Alzheimer's and related dementias.

BACKGROUND/ANALYSIS: From the author's fact sheet: Alzheimer's is the fifth leading cause of death in California. It is a progressive, degenerative disease currently affecting 610,000 Californians. Over the 7-10 year course of the disease, most individuals require care and support spanning the entire long-term care continuum: in home support, community-based care, institutionalization, and hospitalization.

Nearly all those with Alzheimer's (97 percent) experience behavioral and psychological symptoms with prevalence, frequency, and severity increasing as dementia progresses. Apathy, depression, irritability, and anxiety are particularly common during mild cognitive impairment. Additionally, other symptoms may emerge over the course of the disease, including agitation, verbal and/or physical aggressiveness, delusions, hallucinations, disinhibition, hyperactivity (e.g. wandering, pacing, rummaging), and sleep disturbances.

Certified Nurse Aides (CNAs) are the backbone of California's long-term care delivery system, providing vital care and support to those with disabilities, wherever they reside. With a majority of nursing home residents diagnosed or presenting with a cognitive impairment, CNAs are often challenged to meet the unique care needs of this population due to inadequate training on behaviors, communication, medication management, and other topics specific to Alzheimer's.

When direct care staff have specialized dementia training to anticipate and meet patient needs, there are fewer incidents of falls; lower utilization of antipsychotic and psychotropic medications; reductions in the use of physical restraints; fewer incidents of wandering; and decreases in resident-to-resident or resident-to-staff abuse, a problem that prompts evictions and transfers to higher levels of care.

DISCUSSION: The author adds: Of the existing 60 classroom hours for CNAs, only 50 are prescribed in regulation by the California Department of Public Health

(CDPH). There are 10 training hours that are not specified. This bill requires eight of the 10 unspecified classroom hours to focus on dementia training.

SB 449 will provide training, job skills and dementia competency to CNAs and improve the care provided to individuals with Alzheimer's and related dementias.

The senior population is the fastest growing population in California and it is in the public's interest to prepare CNAs to meet statewide staffing shortages to serve this increasing demographic.

RECOMMENDATION: Support SB 449.

COUNCIL STRATEGIC PLAN OBJECTIVE: Goal 4: Health and Safety.

ATTACHMENTS: Text of SB 449.

PREPARED: Bob Giovati.

Introduced by Senator Monning
(Principal coauthor: Assembly Member Cooley)

February 15, 2017

An act to amend Section 1337.1 of the Health and Safety Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

SB 449, as introduced, Monning. Skilled nursing and intermediate care facilities: training programs.

Existing law requires a skilled nursing or intermediate care facility to adopt an approved training program, which is required to include a precertification training program consisting of at least 60 classroom hours of training on basic nursing skills, patient safety and rights, the social and psychological problems of patients, and resident abuse prevention, recognition, and reporting and at least 100 hours of supervised and on-the-job training clinical practice. Existing law requires at least 2 hours of the 60 hours of classroom training and at least 4 hours of the 100 hours of the supervised clinical training to address the special needs of persons with developmental and mental disorders, including intellectual disability, Alzheimer's disease, cerebral palsy, epilepsy, dementia, Parkinson's disease, and mental illness. Violation of these provisions is a crime.

This bill would require that at least 8 of the 60 hours of classroom training address the special needs of persons with Alzheimer's disease and related dementias. By changing the definition of a crime, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 1337.1 of the Health and Safety Code is
2 amended to read:

3 1337.1. A skilled nursing or intermediate care facility shall
4 adopt an approved training program that meets standards
5 established by the state department. The approved training program
6 shall consist of at least *all of* the following:

7 (a) An orientation program to be given to newly employed nurse
8 assistants prior to providing direct patient care in skilled nursing
9 or intermediate care facilities.

10 (b) (1) A precertification training program consisting of at least
11 60 classroom hours of training on basic nursing skills, patient
12 safety and rights, the social and psychological problems of patients,
13 and resident abuse prevention, recognition, and reporting pursuant
14 to subdivision (e). The 60 classroom hours of training may be
15 conducted within a skilled nursing or intermediate care facility or
16 in an educational institution.

17 (2) In addition to the 60 classroom hours of training required
18 under paragraph (1), the precertification training program shall
19 consist of at least 100 hours of supervised and on-the-job training
20 clinical practice. The 100 hours may consist of normal employment
21 as a nurse assistant under the supervision of either the director of
22 nurse training or a licensed nurse qualified to provide nurse
23 assistant training who has no other assigned duties while providing
24 the training.

25 (3) At least two hours of the 60 hours of classroom training and
26 at least four hours of the 100 hours of the supervised clinical
27 training shall address the special needs of persons with
28 developmental and mental disorders, including intellectual
29 disability, ~~Alzheimer's disease~~, cerebral palsy, epilepsy, dementia,
30 Parkinson's disease, and mental illness.

31 (4) *At least 8 of the 60 hours of classroom training shall address*
32 *the special needs of persons with Alzheimer's disease and related*
33 *dementias.*

1 ~~(4)~~

2 (5) In a precertification training program subject to this
3 subdivision, credit shall be given for the training received in an
4 approved precertification training program adopted by another
5 skilled nursing or intermediate care facility.

6 ~~(5)~~

7 (6) This subdivision shall not apply to a skilled nursing or
8 intermediate care facility that demonstrates to the ~~state~~ department
9 that it employs only nurse assistants with a valid certification.

10 (c) Continuing in-service training to ~~assure~~ *ensure* continuing
11 competency in existing and new nursing skills.

12 (d) Each facility shall consider including training regarding the
13 characteristics and method of assessment and treatment of acquired
14 immunodeficiency syndrome (AIDS).

15 (e) (1) The approved training program shall include, within the
16 60 hours of classroom training, a minimum of six hours of
17 instruction on preventing, recognizing, and reporting instances of
18 resident abuse utilizing those courses developed pursuant to Section
19 13823.93 of the Penal Code, and a minimum of one hour of
20 instruction on preventing, recognizing, and reporting residents'
21 rights violations.

22 (2) A minimum of four hours of instruction on preventing,
23 recognizing, and reporting instances of resident abuse, including
24 instruction on preventing, recognizing, and reporting residents'
25 rights violations, shall be included within the total minimum hours
26 of continuing education or in-service training required and in effect
27 for certified nursing assistants.

28 SEC. 2. No reimbursement is required by this act pursuant to
29 Section 6 of Article XIII B of the California Constitution because
30 the only costs that may be incurred by a local agency or school
31 district will be incurred because this act creates a new crime or
32 infraction, eliminates a crime or infraction, or changes the penalty
33 for a crime or infraction, within the meaning of Section 17556 of
34 the Government Code, or changes the definition of a crime within
35 the meaning of Section 6 of Article XIII B of the California
36 Constitution.

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