

Senate Bill No. 472

Passed the Senate September 11, 1995

Secretary of the Senate

Passed the Assembly September 7, 1995

Chief Clerk of the Assembly

This bill was received by the Governor this ____ day
of _____, 1995, at ____ o'clock __M.

Private Secretary of the Governor

└

CHAPTER ____

An act to amend Section 412 of the Health and Safety Code, and to amend Section 4364 of the Welfare and Institutions Code, relating to health.

LEGISLATIVE COUNSEL'S DIGEST

SB 472, Petris. Neurological degenerative disorders: training.

(1) Existing law expresses legislative findings regarding Alzheimer's disease and that existing diagnostic and treatment centers have improved the quality of care of patients with this disease. Existing law provides that the functions of these centers shall be designed to serve certain prescribed purposes, including to increase the training of health care professionals with respect to Alzheimer's disease.

This bill would revise this to provide that the purpose is to increase the training of health care professionals with respect to Huntington's disease also. It would authorize these centers to develop and approve curricula regarding certain aspects of other acquired brain impairments. The bill would provide that health care facilities, adult day health care centers, residential care facilities for the elderly, and other providers of health care or personal care services to children with disabilities, adults, or older adults may offer the curricula to employees and it may satisfy up to 4 hours annually of any in-service training requirement.

(2) Existing law requires the Director of Mental Health to contract with a nonprofit agency meeting prescribed criteria to act as the Statewide Resources Consultant and prescribes the duties of the consultant to include, but not be limited to, serving as an information and technical assistance clearinghouse for brain-impaired adults, as defined, and their families, and caregivers, and to develop and conduct related training.

This bill would specify that the duties of the consultant may include reviewing proposed training curricula



regarding individuals with brain damage, as defined, assisting organizations that serve families with adults with Huntington's disease and Alzheimer's disease in reviewing data, and forwarding this information to the appropriate state departments for consideration.

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

SECTION 1. The Legislature finds and declares all of the following:

(a) Among the various diseases that affect the lives of individuals and their functional abilities is Huntington's disease. It is an inherited neurological and degenerative disease that usually affects a person between the ages of 35 and 45 years and has a duration of about 15 to 20 years, and during that time there is a very slow diminishing of an individual's capacity to function independently.

(b) While most Huntington's disease patients are cared for at home for as long as possible, intensive care in a health facility is usually necessary during the latter stages of the disease due to the patient's increasing lack of motor control and coordination, often accompanied by increasing behavioral difficulties.

(c) The impact of this disease affects families in a variety of ways including a dramatic impact on the economic circumstances of the family.

(d) There is a need for appropriate training and education for personnel in health facilities to ensure the highest quality of care for the individuals who reside there as well as to be as responsive as possible to the needs of the families.

(e) The state must carefully examine all possible sources of federal and state funding for these individuals in out-of-home care to ensure that the appropriate levels of care are available.

SEC. 2. Section 412 of the Health and Safety Code is amended to read:

412. (a) The Legislature finds that Alzheimer's disease, a devastating disease which destroys certain vital cells of the brain, affects more than 1,500,000 Americans.



The Legislature also finds that Alzheimer's disease and related disorders are responsible for 50 percent of all nursing home admissions and Alzheimer's disease is the fourth leading cause of death in adults. The Legislature recognizes that the disease has serious emotional, financial, and social consequences for its victims and their families.

(b) The Legislature recognizes that the cause of Alzheimer's disease is presently unknown, and there is no established treatment which can cure, reverse, or stop the progression of Alzheimer's disease. The Legislature also recognizes that research is the only hope for victims and families. The Legislature finds that existing diagnostic and treatment centers have improved the quality of care available to the victims of Alzheimer's disease and increased knowledge with respect to Alzheimer's disease and related disorders. These centers provide clinical opportunities for research and facilitate the collection of essential data regarding Alzheimer's disease and related disorders, while at the same time providing valuable services such as information and referral, counseling, and training to victims and their families. It is the intent of the Legislature, in enacting this article, to encourage the establishment of geographically dispersed diagnostic and treatment centers for Alzheimer's disease within every postsecondary higher educational institution with a medical center, and to encourage research to discover the cause of, and a cure for, Alzheimer's disease.

(c) The functions of the diagnostic and treatment centers shall be designed to serve all of the following purposes:

(1) To provide diagnostic and treatment services and improve the quality of care to victims of Alzheimer's disease.

(2) To increase research by faculty and students in discovering the cause of, and a cure for, Alzheimer's disease.



(3) To provide training, monitoring, consultation, and continuing education to the families of those who are affected by Alzheimer's disease.

(4) To increase the training of health care professionals with respect to Alzheimer's disease and other acquired brain impairments to the extent that the centers have the requisite expertise.

(d) The diagnostic and treatment centers may collaborate with the Statewide Resources Consultant designated pursuant to Section 4364 of the Welfare and Institutions Code, to the extent that the centers deem necessary in order to fulfill the functions set forth in subdivision (c).

SEC. 3. Section 4364 of the Welfare and Institutions Code is amended to read:

4364. The Statewide Resources Consultant shall do all of the following:

(a) Serve as the centralized information and technical assistance clearinghouse for brain-impaired adults, their families, caregivers, service professionals and agencies, and volunteer organizations, and in this capacity may assist organizations that serve families with adults with Huntington's disease and Alzheimer's disease by reviewing data collected by those organizations in their efforts to determine the means of providing high-quality appropriate care in health facilities and other out-of-home placements; and shall disseminate information, including, but not limited to, the results of research and activities conducted pursuant to its responsibilities set forth in this chapter as determined by the director, and which may include forwarding quality of care and related information to appropriate state departments for consideration.

(b) Work closely and coordinate with organizations serving brain-impaired adults, their families, and caregivers in order to ensure, consistent with requirements for quality of services as may be established by the director, that the greatest number of persons are served and that the optimal number of organizations participate.



(c) Develop and conduct training that is appropriate for a variety of persons, including, but not limited to, all of the following:

(1) Families.

(2) Caregivers and service professionals involved with brain-impaired adults.

(d) Provide other training services, including, but not limited to, reviewing proposed training curricula regarding the health, psychological, and caregiving aspects of individuals with brain damage as defined in subdivision (f) of Section 4362. The proposed curricula may be submitted by providers or statewide associations representing individuals with brain damage, their families, or caregivers.

(3) Advocacy and self-help family and caregiver support organizations.

(4) Educational institutions.

(e) Provide service and program development consultation to resource centers and to identify funding sources that are available.

(f) Assist the appropriate state agencies in identifying and securing increased federal financial participation and third-party reimbursement, including, but not limited to, Title XVIII (42 U.S.C. Sec. 1395 and following) and Title XIX (42 U.S.C. Sec. 1396 and following) of the federal Social Security Act.

(g) Conduct public social policy research based upon the recommendations of the Director of Mental Health.

(h) Assist the director, as the director may require, in conducting directly, or through contract, research in brain damage epidemiology and data collection, and in developing a uniform terminology and nomenclature.

(i) Assist the director in establishing criteria for, and in selecting resource centers and in designing a methodology for, the consistent assessment of resources and needs within the geographic areas to be serviced by the resource centers.

(j) Conduct conferences, as required by the director, for families, caregivers, service providers, advocacy organizations, educational institutions, business



associations, community groups, and the general public, in order to enhance the quality and availability of high-quality, low-cost care and treatment of brain-impaired adults.



Approved _____, 1995

Governor

