



# Senate

General Assembly

**File No. 531**

January Session, 2009

Substitute Senate Bill No. 243

*Senate, April 8, 2009*

The Committee on Public Health reported through SEN. HARRIS of the 5th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

## ***AN ACT CONCERNING TRAINING IN PAIN MANAGEMENT.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 19a-521 of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective July 1, 2009*):

3 As used in this section and sections 19a-522 to 19a-534a, inclusive,  
4 19a-536 to 19a-539, inclusive, [and] 19a-550 to 19a-554, inclusive, and  
5 19a-562a, as amended by this act, unless the context otherwise  
6 requires: "Nursing home facility" means any nursing home or  
7 residential care home as defined in section 19a-490 or any rest home  
8 with nursing supervision which provides, in addition to personal care  
9 required in a residential care home, nursing supervision under a  
10 medical director twenty-four hours per day, or any chronic and  
11 convalescent nursing home which provides skilled nursing care under  
12 medical supervision and direction to carry out nonsurgical treatment  
13 and dietary procedures for chronic diseases, convalescent stages, acute  
14 diseases or injuries; "department" means the Department of Public  
15 Health and "commissioner" means the Commissioner of Public Health

16 or the commissioner's designated representative.

17 Sec. 2. Section 19a-562a of the general statutes is repealed and the  
18 following is substituted in lieu thereof (*Effective July 1, 2009*):

19 (a) Each nursing home facility that is not an Alzheimer's special care  
20 unit or program shall annually provide a minimum of two hours of  
21 training in pain recognition and administration of pain management  
22 techniques to all licensed and registered direct care staff and nurse's  
23 aides who provide direct patient care to residents.

24 [(a)] (b) Each Alzheimer's special care unit or program shall  
25 annually provide Alzheimer's and dementia specific training to all  
26 licensed and registered direct care staff and nurse's aides who provide  
27 direct patient care to residents enrolled in the Alzheimer's special care  
28 unit or program. Such requirements shall include, but not be limited  
29 to, (1) not less than eight hours of dementia-specific training, which  
30 shall be completed not later than six months after the date of  
31 employment and not less than eight hours of such training annually  
32 thereafter, and (2) annual training of not less than two hours in pain  
33 recognition and administration of pain management techniques for  
34 direct care staff.

35 [(b)] (c) Each Alzheimer's special care unit or program shall  
36 annually provide a minimum of one hour of Alzheimer's and dementia  
37 specific training to all unlicensed and unregistered staff, except nurse's  
38 aides, who provide services and care to residents enrolled in the  
39 Alzheimer's special care unit or program. For such staff hired on or  
40 after October 1, 2007, such training shall be completed not later than  
41 six months after the date of employment.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2009	19a-521
Sec. 2	July 1, 2009	19a-562a

**Statement of Legislative Commissioners:**

In section 2(a), the phrase "of training" was added for clarity and consistency.

**AGE**      *Joint Favorable Subst.-LCO C/R*                      PH

**PH**        *Joint Favorable Subst.-LCO*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

**OFA Fiscal Note**

**State Impact:**

Agency Affected	Fund-Effect	FY 10 \$	FY 11 \$
Department of Social Services	GF - Cost	Potential Minimal	Potential Minimal

**Municipal Impact:** None

**Explanation**

Requiring additional training on pain management will increase the operational cost for nursing facilities. To the extent that these facilities care for Medicaid patients, a portion of these training costs may be passed on to the state through allowable cost rate increases. Any such increase in state costs is not expected to be significant.

**The Out Years**

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

**OLR Bill Analysis****sSB 243*****AN ACT CONCERNING TRAINING IN PAIN MANAGEMENT.*****SUMMARY:**

The bill requires all nursing home facilities, instead of only Alzheimer's special care units or programs, to provide at least two hours of annual training in pain recognition and administration of pain management techniques to (1) all licensed and registered direct care staff and (2) nurse's aides who provide direct patient care. The law defines a "nursing home facility" as a nursing home, residential care home, or rest home with 24-hour nursing supervision.

EFFECTIVE DATE: July 1, 2009

**COMMITTEE ACTION**

Select Committee on Aging

Joint Favorable Change of Reference

Yea 11 Nay 0 (03/05/2009)

Public Health Committee

Joint Favorable

Yea 30 Nay 0 (03/20/2009)