- 1 HJR232
- 2 159316-1
- 3 By Representative Hall
- 4 RFD: Rules
- 5 First Read: 26-FEB-14

159316-1:n:02/26/2014:LLR/th LRS2014-1016 1 2 3 4 5 6 7 CREATING THE ALZHEIMER'S DISEASE TASK FORCE. 8 9 10 BE IT RESOLVED BY THE LEGISLATURE OF ALABAMA, BOTH 11 HOUSES THEREOF CONCURRING, That there is created the 12 Alzheimer's Disease Task Force. 13 (a) The membership of the task force shall consist of all of the following: 14 15 (1) The Chair of the House of Representatives Health Committee or its successor. 16 17 (2) The Chair of the Senate Health Committee or its 18 successor. 19 (3) The Commissioner of the Department of Mental Health, or his or her designee. 20 21 (4) The Director of the Department of Public Health, 22 or his or her designee. (5) The Director of the Department of Senior 23 24 Services, or his or her designee. (6) The Commissioner of the Alabama Medicaid Agency, 25 26 or his or her designee.

(7) The Commissioner of the Department of Human
 Resources, or his or her designee.

3 (8) The Director of the Dementia Education Training4 Program.

5 (9) A member of the House of Representatives,
6 appointed by the Speaker of the House of Representatives.

7 (10) A member of the Senate, appointed by the8 President Pro Tempore of the Senate.

9 (11) A representative of the nursing facility
10 industry, appointed by the Nursing Home Association.

(12) A representative of the assisted living
industry, appointed by the Board of Examiners of Assisted
Living Administrators.

14 (13) A representative of the State Department of
15 Veterans' Affairs, appointed by the department.

16 (14) A representative of the adult day care services
17 industry, appointed by the Department of Senior Services.

18 (15) A representative of the probate judges19 association, appointed by the association.

20 (16) A representative of the Alzheimer's Foundation
21 of the South in Mobile, Alabama, appointed by the foundation.

(17) A representative of Alzheimer's of Central
Alabama in Birmingham, Alabama, appointed by the organization.
(18) A representative of the Alzheimer's Association
of North Alabama in Huntsville, Alabama, appointed by the

26 association.

1 (19) A representative of the Alzheimer's 2 Organization-Greater Montgomery Area, appointed by the organization. 3 4 (20) A representative of the Alzheimer's Resource Center in Dothan, Alabama, appointed by the center. 5 (21) A representative of the Alabama Silver Haired 6 7 Legislature, appointed by the membership of that body. (22) An at-large member, appointed by the Governor. 8 (23) An at-large member, appointed by the Department 9 10 of Mental Health. (24) A representative of the medical profession, 11 12 appointed by the Medical Association of the State of Alabama. 13 (25) A representative of the State Board of Health, 14 appointed by the State Board of Health. 15 (26) A representative of the Alabama Association of 16 Retired Persons, appointed by the association. 17 (27) The following members appointed by the Lt. Governor: 18 a. A member of the Bio Alabama Association. 19 b. A member of the Bio Technology Legislative Caucus 20 21 or their designee. 22 c. An at-large member. 23 (28) The following members appointed by the 24 Governor: 25 a. A person with dementia, appointed from a list of 26 three names submitted by the Department of Mental Health.

b. A caregiver of a person with Alzheimer's disease,
 appointed from a list of three names submitted by the
 Department of Mental Health.

c. An Alzheimer's disease researcher, appointed from
a list of three names submitted by the Department of Mental
Health.

7 (29) Additional members may be added by majority
8 vote of the membership of the task force.

9 (b) Members shall serve without compensation. The 10 membership of the task force shall be inclusive and reflect 11 the racial, gender, geographic, urban/rural, and economic 12 diversity of the state. The Governor shall call the first 13 meeting of the task force at which time the members shall 14 elect a chair and a vice chair from among the membership of 15 the task force.

(c) The task force shall assess the current and 16 17 future impact of Alzheimer's disease and related dementias on the residents of Alabama, shall examine the existing long-term 18 care industries, services, health care manpower, and resources 19 addressing the needs of persons with Alzheimer's disease, 20 21 their families, and caregivers, and shall develop a strategy 22 to mobilize a state response to the crisis produced by dementia such as Alzheimer's disease. 23

24 (d) The task force shall include an examination of
25 all of the following issues and considerations in its
26 assessment and recommendations:

1 (1) Trends in state Alzheimer's disease population 2 and needs, including the changing population with dementia, including, but not limited to, all of the following: 3 4 a. The state role in long-term care, family caregiver support, and assistance to persons with early-stage 5 and early onset of Alzheimer's disease. 6 7 b. The state policy regarding persons with dementia such as Alzheimer's disease. 8 (2) Existing services, resources, and capacity 9 10 including, but not limited to, all of the following: 11 a. Type, cost, and availability of dementia 12 services. 13 b. Dementia-specific training requirements for 14 long-term care staff. 15 c. Quality care measures for residential care facilities. 16 d. Capacity of public safety and law enforcement to 17 respond to persons with dementia such as Alzheimer's disease. 18 e. Availability of home-based and community-based 19 resources for persons with dementias such as Alzheimer's 20 21 disease and respite care to assist families. 22 f. Inventory of long-term care dementia care units 23 for persons with significant behavioral problems. 24 q. Adequacy and appropriateness of geriatric-psychiatric units for persons with behavior 25 disorders associated with Alzheimer's disease and related 26 27 dementia.

1 h. Adequacy of community hospitals to provide 2 appropriate health services to persons with dementia. i. Adequacy of the probate system to approve and 3 4 monitor guardians for persons with dementia. j. Adequacy of existing resources within the 5 criminal justice system to protect the civil and financial 6 7 rights of persons with dementia. k. Availability of appropriate resources for persons 8 under the age of 60 with dementia. 9 10 1. Availability of memory screening service for early detection and treatment. 11 12 m. Availability of dementia prevention programs. 13 n. Assisted living residential options for persons 14 with dementia. o. State support of Alzheimer's disease research 15 through universities and other resources. 16 17 p. Health care disparities for minority populations with dementia. 18 (3) Needed state policies or responses, including, 19 but not limited to, directions for the provision of clear and 20 21 coordinated services and supports to persons and families 22 living with Alzheimer's disease and related disorders and 23 strategies to address any identified gaps in services. 24 (e) The task force shall do all of the following: (1) Examine the level of integration of efforts by 25 26 responsible state and county agencies to address current and future challenges to good care, including the state university 27

system's capacity to produce critical health care
 professionals.

3 (2) Hold public meetings and utilize technological
4 means, such as web casts, to gather feedback on the
5 recommendations from the general public and from persons and
6 families affected by Alzheimer's disease.

7 (3) Submit its findings and recommendations to the
8 Governor and the Legislature in the form of a State
9 Alzheimer's Disease Plan no later than March 1, 2014, at which
10 time the task force shall terminate.

(f) The recommendations of the task force may not be considered a medical protocol, guideline, or standard of care for the treatment of any disease or condition.

(g) Upon the request of the chair, the Secretary of the Senate and the Clerk of the House of Representatives shall provide necessary clerical assistance for the work of the task force and the Department of Mental Health shall provide necessary administrative support for the task force.

19 (h) The total expenditures of the task force shall20 not exceed \$1,000.

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