Overview

This bill allows nursing facilities to employ resident attendants to assist residents with eating and drinking, and requires the commissioner of health to develop and implement alternative procedures for the nursing facility survey process. The bill also contains other provisions related to nursing facility regulation.

1 Resident attendants. Adds § 144A.62.
   Subd. 1. Assistance with eating and drinking. Allows a nursing facility to employ resident attendants to assist residents with eating and drinking. States that resident attendants are not counted in the minimum staffing requirements.
   Subd. 2. Definition. Defines resident attendant as an individual who assists residents with eating and drinking. Provides that a resident attendant does not include a licensed health professional or registered dietician, a volunteer who does not receive monetary compensation, or a registered nursing assistant.
   Subd. 3. Requirements. Prohibits a nursing facility from using an individual as a resident attendant unless the individual has completed a training and competency evaluation program, is competent to provide feeding and hydration services, and is under the supervision of the director of nursing.
   Subd. 4. Evaluation. Requires the training and competency evaluation program to be facility based, and to include, at a minimum, the training and competency standards for eating and drinking assistance contained in the nursing assistant training curriculum.
   Subd. 5. Criminal background check. Makes persons seeking employment as resident assistants subject to the criminal background check requirements.

2 Nursing home survey process. (a) Requires the commissioner of health, in consultation with the long-term care ombudsman, nursing home consumer and advocacy groups, nursing home provider organizations, unions, and other health care professionals, to examine state and federal
rules and regulations governing nursing facility care, and develop and implement, upon receipt
of necessary federal approval, alternative procedures for the nursing home survey process.
Requires the commissioner to pursue any necessary federal law changes and apply for any
necessary federal waivers or approval.

(b) If a federal waiver is required, directs the commissioner to submit the waiver request by May
15, 2000. Also requires the commissioner to pursue any necessary federal law changes by July 1,
2000. Requires alternative procedures to be implemented January 1, 2001, or upon federal
approval.

(c) Requires the alternative procedures to: (1) reward facilities with very good performance with
extended intervals between full surveys; (2) use other existing or new measures to provide
assessments of quality and to measure quality improvement; (3) provide for collaboration
between facility staff and surveyors, rather than a punitive approach; and (4) use department
resources more effectively and efficiently in targeting problem areas.

(d) Upon implementation of the alternative survey process, requires the commissioner to work
with industry stakeholders to evaluate the new process and ensure that health department
resources are properly aligned. Prior to implementation, requires the commissioner to assure
residents and family members that the new process will not reduce or restrict quality of care.

3 State licensure conflicts with federal regulations. Amends Laws 1999, chapter 245, section
45. Allows a resident, or representative of resident who is not competent, to waive in writing the
requirement that a physician authorize any interval in checking incontinent residents that is
longer than two hours.

4 Defensive documentation. Requires the commissioner of health, in consultation with the
nursing home industry, consumers, unions, and advocates, to develop a proposal to resolve the
issue of defensive documentation in nursing facilities.

5 Federal waiver request. Requires the commissioner of health to seek a federal waiver to
decrease the amount of paperwork facilities must complete when a stay in a nursing facility is
less than 30 days.

6 Regulations that impede direct care of residents. Requires the commissioners of health and
human services, in consultation with trade groups, consumers, advocates, unions, and families,
to develop a proposal to decrease regulations that impede direct care of nursing facility residents.

7 Repealer. Repeals section 144A.103 (penalty for death of a resident related to abuse or neglect)
and part 4658.0515 of Minnesota Rules (frequency of recording nursing notes).

8 Effective date. States that section 2 is effective the day following final enactment.