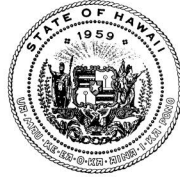


DAVID Y. IGE
GOVERNOR



VIRGINIA PRESSLER, M.D.
DIRECTOR OF HEALTH

State of Hawaii
DEPARTMENT OF HEALTH
1250 Punchbowl Street
Honolulu, HI 96813-2416
doh.testimony@doh.hawaii.gov

**Testimony in OPPOSITION to HB1876
RELATING TO HEALTH**

REPRESENTATIVE DELLA BELATTI, CHAIR
HOUSE COMMITTEE ON HEALTH

Hearing Date: February 10, 2016

Room Number: 329

1 **Fiscal Implications:** Unfunded mandate for the department.

2

3 **Department Testimony:** The Department of Health (DOH) respectfully opposes HB1876 as it is overly
4 broad and lacks any appropriation to establish meaningful and sustainable leadership in dementia
5 services.

6

7 The first requirement of HB1876 is for DOH to study and appraise the State's health needs and resources
8 related to dementia. This is consistent with the 2013 State Plan on Alzheimer's disease and Related
9 Dementias' finding that the best use of public health is to increase data collection and promote brain
10 health through healthy lifestyles, as well as early detection and diagnosis. Funding from the Alzheimer's
11 Association Aloha Chapter enabled DOH to include a cognitive module survey to the Behavioral Risk
12 Factor Surveillance Survey, which was a valuable first step. The department does not have any other
13 resources dedicated to dementia in a public health context and would require an appropriation to
14 comply with the bill requirements. An estimated minimum of three FTE positions (program specialist,
15 training and curriculum specialist, and clerk) with an operating budget is required, approximately
16 \$350,000.

17

18 The second requirement of this measure is to compel training on dementia to all caregivers. This
19 expectation is vague and does not provide the department with the means to enforce, penalties for non-
20 compliance, or flexibility to implement the practice.

21

1 Lastly, HB1876 is well-meaning but premature. Major recommendations described in the 2013 State
2 Plan are in various stages of implementation, including through the Hawaii Alzheimer's Disease Initiative
3 (HADI), the purpose of which is to "strengthen Hawaii's 'dementia capability' through professional
4 training, caregiver education, and new services for persons with dementia and their caregivers. This
5 project is funded by the federal Administration on Community Living from 2015 through 2018. The
6 Department of Health is a core HADI partner.

7

8 The department respectfully recommends HB1876 be deferred as the department and other
9 stakeholders work toward the State's goals. The proposed duties and obligations of HB1876 without
10 meaningful appropriations amounts to an unfunded mandate and create expectations that the
11 department is unable to fulfill.

12

13 **Offered Amendments:** N/A

ALOHA CHAPTER

1050 Ala Moana Blvd. Suite 2610, Honolulu, Hawaii 96814
Phone: 808.591.2771 Fax: 808.591.9071 www.alz.org/hawaii

February 8, 2016

Honorable Representative Della Au Belatti, Chair
Committee on Health
House Committee
Hawaii State Capitol
415 South Beretania Street
Honolulu, HI 96813

RE: HB1876 Relating to Health

Dear Chairwoman Au Belatti and Committee Members:

Thank you for the opportunity to testify in support of House Bill 1876. On behalf of the Alzheimer's Association, Aloha Chapter, I am pleased to extend our full support for House Bill 1876, which will set policy that requires dementia training for individuals who work in residential care homes, skilled nursing facilities, assisted living facilities, etc.

Individuals with Alzheimer's disease have medical, psychological and social care needs that often make care delivery challenging and more demanding. Most individuals with Alzheimer's have at least one other chronic condition such as diabetes or heart disease and cognitive impairment caused by Alzheimer's disease often complicates the management and treatment of such conditions. Furthermore, over time, people with Alzheimer's and other dementias will lose the ability to use words and may communicate their needs through their behavior. To further exacerbate the situation, sometimes, the behaviors exhibited by individuals with dementia may be hurtful to themselves and others.

Such situations can be both frustrating and frightening to health care workers. It is our opinion that most health care workers are ill-equipped and ill-informed to deal with the unique needs of those with Alzheimer's disease. This was further supported in the Hawaii State Plan on Alzheimer's Disease and Related Dementias which recommended that a) Build a workforce with the skills to provide high quality care for people with ADRD and b) Identify high-quality dementia care guidelines and measures across care settings were targeted strategies needed to ensure quality care of individuals with dementia.

While we fully support this bill, we would humbly and respectfully recommend that the term "caregiver" be replaced with "dementia care provider" as the term "caregiver" maybe misleading and many may think that it refers to family caregivers. Using the term "dementia care provider" may address this concern as it more clearly refers to professionals in caregiving roles.

alzheimer's  association®

ALOHA CHAPTER

1050 Ala Moana Blvd. Suite 2610, Honolulu, Hawaii 96814
Phone: 808.591.2771 Fax: 808.591.9071 www.alz.org/hawaii

I appreciate the opportunity to comment on this legislation and applaud your leadership in bringing it forward.

With best regards,



Christine Payne
Executive Director
Alzheimer's Association, Aloha Chapter

To: Committee on Health
Representative Della Au Belatti, Chair

Date: February 10, 2016, Conference Room 329, 8:30 a.m.

Re: **HB 1876 – RELATING TO HEALTH**
Testimony in Strong Support

Chair Belatti and Committee Members:

I **strongly support** HB1876, as it requires the Department of Health to require dementia training for dementia care providers.

My father passed away from Alzheimer's Disease about 2 years ago. I personally saw how Alzheimer's Disease robbed my father of his ability to control his emotions; behavior; mobility; bodily functions, and ultimately his ability to speak and show his love and appreciation to my mother. He passed away one week short of my parent's 60th wedding anniversary.

As there is no cure for the disease, it ultimately progressed to the point that we could no longer care for my father at home. We were fortunate to have found a facility that was able to provide care for him. However, in our search for an appropriate care facility we found that many facilities did not have personnel with the knowledge and expertise to care for individuals with Alzheimer's Disease.

I am providing this testimony in memory of my father and on behalf of my relatives and family friends with Alzheimer's or other dementias. They may eventually need more help than family members can provide at home, and will look to facilities for that help. Hawaii residents living with Alzheimer's are expected to increase by 35% to 35,000 in 2025. I fear that there will not be enough professional care providers that are trained to help individuals with Alzheimer's or other forms of dementia; as individuals with Alzheimer's/dementia need care that is specific to the psychological, medical, and social needs that are brought upon by this disease. This bill addresses the need to require dementia training for care providers.

I would also like to suggest that this bill replace the term "caregiver" with dementia care provider as "caregiver" typically references unpaid family caregivers, while this bill is directed at care providers in hospitals, hospices, adult residential care homes, skilled nursing facilities, etc.

Thank you for the opportunity to provide this testimony.

Sincerely,

Steve Tam
Hawaii Kai

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 08, 2016 6:23 PM
To: HLTtestimony
Cc: mendezj@hawaii.edu
Subject: *Submitted testimony for HB1876 on Feb 10, 2016 08:30AM*

HB1876

Submitted on: 2/8/2016

Testimony for HLT on Feb 10, 2016 08:30AM in Conference Room 329

| Submitted By | Organization | Testifier Position | Present at Hearing |
|-----------------------|---------------------|---------------------------|---------------------------|
| Javier Mendez-Alvarez | Individual | Support | No |

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 08, 2016 6:17 PM
To: HLTtestimony
Cc: kellyandco@outlook.com
Subject: Submitted testimony for HB1876 on Feb 10, 2016 08:30AM

HB1876

Submitted on: 2/8/2016

Testimony for HLT on Feb 10, 2016 08:30AM in Conference Room 329

| Submitted By | Organization | Testifier Position | Present at Hearing |
|--------------|--------------|--------------------|--------------------|
| Kelly Penn | Individual | Support | No |

Comments: Dear Chairwoman Au Belatti and Committee Members: Thank you for the opportunity to testify in support of House Bill 1876. I am pleased to extend my full support for House Bill 1876, which will set policy that requires dementia training for individuals who work in residential care homes, skilled nursing facilities, assisted living facilities, etc. I've been working with individuals with Alzheimer's for 15 years now in the capacity of a Director of Therapeutic Recreation. I modify and create activities that support their mind, body and soul. This helps individuals with Alzheimer's disease relieve stress and feel more useful. I have worked in several different states and these states did require dementia related training in residential care homes, skilled nursing facilities, assisted living facilities, etc. I felt it really made a difference in the way individuals with Alzheimer's were cared for. Individuals with Alzheimer's disease have medical, psychological and social care needs that often make care delivery challenging and more demanding. Most individuals with Alzheimer's have at least one other chronic condition such as diabetes or heart disease and cognitive impairment caused by Alzheimer's disease often complicates the management and treatment of such conditions. Furthermore, over time, people with Alzheimer's and other dementias will lose the ability to use words and may communicate their needs through their behavior. To further exacerbate the situation, sometimes, the behaviors exhibited by individuals with dementia may be hurtful to themselves and others. I appreciate the opportunity to comment on this legislation and applaud your leadership in bringing it forward. Sincerely, Kelly Penn Co-Chair "Walk to End Alzheimer's" Oahu 2016 Alzheimer's Association Aloha Chapter

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 08, 2016 5:23 PM
To: HLTtestimony
Cc: lbc@hawaiiantel.net
Subject: Submitted testimony for HB1876 on Feb 10, 2016 08:30AM

HB1876

Submitted on: 2/8/2016

Testimony for HLT on Feb 10, 2016 08:30AM in Conference Room 329

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Lois Crozer | Individual | Support | No |

Comments: Dear Chairwoman Au Belatti and Committee Members: Thank you for the opportunity to testify in support of House Bill 1876. Individuals with Alzheimer's disease have medical, psychological and social care needs that often make care delivery challenging and more demanding. Individuals with dementia may be hurtful to themselves and others and it is heartbreaking to see the confusion that the disease presents. Patients and families of patients need this help in managing their loved ones. I appreciate the opportunity to comment on this legislation and applaud your leadership in bringing it forward.

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Dear Chairwoman Au Belatti and Committee Members:

Thank you for the opportunity to testify in support of House Bill 1876. I am pleased to extend my full support for House Bill 1876, which will set policy that requires dementia training for individuals who work in residential care homes, skilled nursing facilities, assisted living facilities, etc.

Individuals with Alzheimer's disease have medical, psychological and social care needs that often make care delivery challenging and more demanding. Most individuals with Alzheimer's have at least one other chronic condition such as diabetes or heart disease and cognitive impairment caused by Alzheimer's disease often complicates the management and treatment of such conditions. Furthermore, over time, people with Alzheimer's and other dementias will lose the ability to use words and may communicate their needs through their behavior. To further exacerbate the situation, sometimes, the behaviors exhibited by individuals with dementia may be hurtful to themselves and others.

I appreciate the opportunity to comment on this legislation and applaud your leadership in bringing it forward.

Sincerely,

Ashley Studerus

HLTtestimony

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 09, 2016 10:03 PM
To: HLTtestimony
Cc: dylanarm@hawaii.edu
Subject: *Submitted testimony for HB1876 on Feb 10, 2016 08:30AM*

HB1876

Submitted on: 2/9/2016

Testimony for HLT on Feb 10, 2016 08:30AM in Conference Room 329

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Dylan Armstrong | Individual | Support | No |

Comments:

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