Dementia Training Standards across Settings and Professions: A 50 State Analysis

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**BACKGROUND**

To best serve people with Alzheimer’s and other dementias, all individuals employed in the delivery of care across the care continuum should be properly trained in dementia care. Yet, professionals in long-term care and community-based settings may not receive adequate training on how to effectively serve people with Alzheimer’s disease and other dementias.

**OBJECTIVES**

To document states’ legal requirements for professionals caring for people with dementias. To identify, through analysis and comparison, best practices and policy recommendations to improve on and expand current requirements.

**PURPOSE**

This study analyzed workforce laws regarding dementia training standards in all 50 states, the District of Columbia and Puerto Rico. The analysis focused on laws pertaining to both settings (e.g., nursing homes, assisted living facilities) as well as to professional credentialing or licensure (e.g., requirements for certified nursing assistants (CNAs), administrators, law enforcement).

The study encompassed training requirements including: subject areas for training curricula; requirements for certain hours for initial training and continuing education; use of competency examinations to measure mastery of training curricula; and special requirements for staff providing services in Alzheimer’s special care units or programs.

**METHODS**

**DATA COLLECTION:** Use of keyword searches of Lexis and Westlaw search engines, which were updated over a six-month period to assure the study database was current through December 2014

**RESEARCH RESULTS:** Tabulated in 25 categories and divided into three major groupings: settings, professional licensure, and first responders

**EXAMPLES OF ANALYTIC CATEGORIES:** Hospitals, nursing homes, assisted living, hospice, adult day care, licensed nurses and CNAs, home health agencies, medication aides, police, EMTs, adult protective services and long-term care Ombudsmen. In each category, state-to-state comparisons were made based on an analysis of the quantitative results of the research. A qualitative analysis identified best practices.

**RESULTS**

Initial analysis indicates 23 of the 52 states have laws prescribing training requirements for direct care staff in nursing homes, and of those, only one state requires staff to pass competency examinations. Forty-four states require dementia care training for staff in assisted living facilities, and, of those, 14 limit requirements to staff of Alzheimer’s special care units. Only 10 states require dementia training for law enforcement and EMTs.

**FINDINGS**

Our research found the ways states design their requirement vary greatly. Some set very general requirements; others are much more prescriptive with respect to hours, frequency, and content of training. Several states include competency evaluations along with the training requirements.

Most dementia training requirements focus on residential facilities, especially assisted living, and few apply to community-based facilities and programs such as adult day programs. Other requirements are linked to professional licensure, primarily for nurses and certified nursing assistants and administrators. Also, few states set dementia training requirements for law enforcement and emergency personnel.

**RECOMMENDATIONS**

- Require training in all settings where individuals with dementia are likely to be encountered, including community-based settings
- Ensure all staff in health care settings have access to needed training
- Develop robust, content-rich curriculum requirements, including continuing education, and require testing and demonstration of competency
- Enhance training requirements for law enforcement and emergency personnel

**CONCLUSIONS**

Study results identify gaps across states in specificity of training requirements and in the categories of providers covered. The study also identifies best practices and innovations in training design requirements that can be helpful models as states update and expand their dementia training requirements.