



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Division of Health Care Quality
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Circular Letter: DHCQ – 14-5-615

TO: Nursing Home Administrators

FROM: Sherman Lohnes, Director, Division of Health Care Quality 
Paul DiNatale, Assistant Director, Division of Health Care Quality

SUBJECT: Guidelines for Dementia Special Care Unit Regulations

DATE: May 22, 2014

On February 28, 2014, the Department of Public Health amended its regulation for long term care facilities to include requirements for the care of residents with dementia. Under the amended regulation, a licensed facility or a unit thereof, that uses any word, term, phrase, or image, or suggests in any way, that it is capable of providing specialized care for residents with dementia, must comply with 105 CMR 150.022 through 150.029.

Training:

Under 105 CMR 150.025, all training required for relevant staff members must be in accordance with Department guidelines. Relevant staff members are defined as "...direct care workers, therapeutic activity directors and supervisors of direct care workers."

Training conducted to meet the requirements of 105 CMR 150.024 must include, at a minimum, the following topics:

- A basic introduction to the foundations of Alzheimer's and other related dementias;
- Training on communicating and connecting with residents with Alzheimer's and other related dementias;
- Training on techniques and approaches to care of persons with Alzheimer's and dementia;
- Training on person centered care;
- Training on understanding the needs of and working with the families;
- Training on the dietary needs of residents with Alzheimer's and other related dementia;

- Training on the social needs and appropriate activities in the care of residents with Alzheimer's and other related dementia;
- Recognizing and responding to caregiver stress; and,
- Preventing, recognizing, and responding to abuse and neglect of residents with Alzheimer's and other related dementia.

Training conducted to meet the requirements of 105 CMR 150.024 must be at least partially interactive. The Department considers "partially interactive" to be training that does not consist of the presentation of information through reading or lecture alone. Since adult learning styles differ, training should be planned and conducted in a meaningful part with the use of interactive learning techniques such as interactive or experiential exercises, small group discussion or exercises, role play, and case study.

As a number of effective training programs have already been adopted by facilities including but not limited to the Alzheimer's Association's "Habilitation Therapy – Caring for People with Dementia", Hand in Hand, and OASIS (augmented with additional training and focus related to Alzheimer's and dementia care), DPH will not be requiring or excluding the use of any specific training program at this time. Facilities must ensure that the basic curriculum used incorporates at a minimum the above-mentioned topics.

As indicated in the regulation, training for facilities with a dementia special care unit was to have been completed by relevant staff members within three months of the promulgation of the regulation, and within six month for all other facilities. As the regulation required the development of guidelines by the Department, all facilities must provide training in accordance with the following timelines.

- All facilities with a dementia special care unit must have plans in place no later than June 21, 2014, (that is, within thirty days of the date of these guidelines) for the initial training of relevant staff members no later than the following dates:
 - Training for relevant staff members already providing care as of May 22, 2014, must be completed no later than August 22, 2014 (that is, within three months of the date of these guidelines);
 - Training for relevant staff members who begin providing care between May 22, 2014, and June 21, 2014, must be completed no later than August 22, 2014; and,
 - Training for relevant staff members who begin providing care on or after June 22, 2014, must be completed prior to their release from orientation in accordance with 105 CMR 150.024(B)(1).
- All other facilities must have plans in place for the initial training of relevant staff members no later than the following dates:
 - Training for relevant staff members already providing care as of May 22, 2014, must be completed no later than November 22, 2014, (that is, within six months of the date of these guidelines);
 - Training for relevant staff members who begin providing care between May 22, 2014, and August 27, 2014, must be completed no later than November 22, 2014; and,

- Training for relevant staff members who begin providing care after August 27, 2014, must be completed prior to their release from orientation in accordance with 105 CMR 150.024(B)(1).

Facilities will not be required to retrain relevant staff members who have already completed eight hours of initial training that meets the requirements of 105 CMR 150.025(B)(2) or (3) and these guidelines. Facilities must have documentation that the initial training completed meets the requirements of the regulation and these guidelines. Relevant staff members who completed their training before January 1, 2014, must complete four hours of ongoing training during calendar year 2014 in accordance with 105 CMR 150.024(B)(4).

Physical Plant Requirements:

Facilities with a dementia special care unit must meet the physical plant requirements at 105 CMR 150.029. Facilities that do not meet these requirements may request additional time to implement necessary physical plant modifications, but must request a waiver by June 21, 2014, (that is, within thirty days of the date of these guidelines) using the standard waiver form. All waiver requests must include, in accordance with 105 CMR 153.031, information regarding what compensating features the facility has instituted, and documentation sufficient to demonstrate that granting a waiver will not affect the health or safety of residents or limit the facility's capacity to give adequate care.

Requests for a waiver of any of the physical plant requirement must specify how the facility will achieve compliance in a timely manner, but not later than February 28, 2015. Facilities must obtain plan approval prior to beginning any construction, renovations or alterations.

Any facility which anticipates that, due to unique circumstances, it will be impossible to meet the physical plant requirements by February 28, 2015, must provide sufficient documentation to the Department to support its request for a waiver beyond that date. As facilities are not required to have a dementia special care unit, the Department anticipates requests for a permanent waiver will be made in only the most extreme situations, and will be subject to thorough review by the Department before approval.

Disclosure Form:

Every nursing home that holds itself out to the public or advertises itself as having a dementia special care unit must submit a disclosure form (see attached) to the Department by June 21, 2014, (that is, within thirty days of the date of these guidelines) using the Health Care Facility Reporting System (HCFRS) under incident type "Dementia SCU Disclosure Form", and then annually on March 1st, regardless of whether the information reported in the form has changed. A copy of each waiver requested by a facility must be attached to the disclosure form the facility submits to the Department and makes available in accordance with 105 CMR 150.028.

Facility questions regarding these regulations should be directed to the appropriate regional manager of the Department for that facility.

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See below for Disclosure Form

Dementia Special Care Unit (DSCU) Disclosure Form

This disclosure form must be submitted to Massachusetts Department of Public Health using the Health Care Facility Reporting System (HCFRS) annually on March 1st by each DSCU; posted in a conspicuous place in the facility; and provided by the facility to each resident or resident's authorized representative prior to admission, and to each resident, resident's authorized representative, or any member of the public upon request. See 105 CMR 150.028.

Facility Name:

Unit Name(s – if applicable):

Address:

Town or City:	Zip:	DPH License Number:	
Phone:	Number of Beds:		
	Facility Total:	In DSCU:	Not in DCSU:

Ratio of Staff to Residents on the DSCU:

Staff Type	Weekday				Weekend			
	7AM – 3PM	3PM – 7PM	7PM – 11PM	11PM – 7AM	7AM – 3PM	3PM – 7PM	7PM – 11PM	11PM – 7AM
Registered Nurse/ Licensed Practical Nurse								
Certified Nurse Aide								
Activity Personnel								

Are the following services available within the facility to residents on the dementia special care unit?

Service	Yes	No	Service	Yes	No
Dental			Occupational therapy		
Optical			Mental Health		
Podiatry					

Hours of therapeutic activities offered for each shift:

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Morning (7AM – noon)							
Afternoon (noon – 5PM)							
Evening (5PM – 11PM)							

Are activities provided 24 hours a day for residents who need them? (Please check appropriate box)

Yes

No

DSCU Policies, Programs, and Physical Environment Features:

Please indicate a “yes” or “no” answer for each question:	Yes	No
Is there secure outdoor space with walkways for residents?		
Is the dementia special care unit locked?		
Does the dementia special care unit offer private bedrooms?		
Is the dementia special care unit equipped with a cooling system which will maintain a comfortable temperature, no greater than 75 degrees?		
Does the dementia special care unit have an Alzheimer’s/dementia support group for family members?		
Does the program/unit have a family council?		
Are written guidelines on the use of chemical and physical restrains available to consumers?		
Are family members informed of procedures for registering, resolving, and appealing any grievances or complaints?		
Does the care planning team include a variety of professionals with skills in medical and nursing, as well as in behavioral, emotional, and social needs?		
Do care plans include personal histories prior to dementia, such as skills, occupations, interests, and daily routine?		
Are care-planning meetings open to family members?		
Are care-planning meetings scheduled to accommodate family members?		
Does the dementia special care unit practice consistent assignment of direct care staff?		
Are end of life issues discussed with family members at the time of admission?		

Waivers to DSCU Requirement:

Has the DSCU requested a waiver of any DSCU regulation? If “yes”, attach copy of waiver request.

Requirement	Yes/ Copy Attached	No	Requirement	Yes/ Copy Attached	No
Training (105 CMR 150.024-025)			Disclosure (105 CMR 150.028)		
Activities (105 CMR 150.026-027)			Physical Environment (105 CMR 150.029)		

Facility Contacts for Additional Information:

Name:

Phone Number:

E-mail Address:

Facility Administrator’s attestation the information on this disclosure form is a true and accurate representation of the staffing, services and program activity provided by the DSCU to its residents:

Typed Name:

License Number:

Signature:

Date: