

1.1 moves to amend H.F. No. 2216 as follows:

1.2 Delete everything after the enacting clause and insert:

1.3 "**Section 1. [144A.082] AUTOMATIC EXTERNAL DEFIBRILLATOR.**

1.4 (a) For purposes of this section, "automatic external defibrillator" has the meaning given
1.5 in section 403.51, subdivision 1.

1.6 (b) A nursing home must:

1.7 (1) maintain an automatic external defibrillator in each building on the nursing home
1.8 campus where residents may be present;

1.9 (2) ensure each of its automatic external defibrillators is maintained and regularly tested
1.10 according to the manufacturer's recommendations; and

1.11 (3) as part of initial orientation and annually thereafter, ensure all nursing home personnel
1.12 receive training in cardiopulmonary resuscitation, the use of automatic external defibrillators,
1.13 the nursing home's process for checking a resident's code status before initiating lifesaving
1.14 measures, and requesting emergency medical assistance as soon as practicable after an
1.15 automatic external defibrillator is used.

1.16 **EFFECTIVE DATE.** This section is effective August 1, 2026.

1.17 **Sec. 2. [144A.104] PROHIBITED CONDITION FOR ADMISSION OR CONTINUED**
1.18 **RESIDENCE.**

1.19 A nursing home is prohibited from requiring a current or prospective resident to have
1.20 or obtain a guardian or conservator as a condition of admission to or continued residence
1.21 in the nursing home.

1.22 **EFFECTIVE DATE.** This section is effective August 1, 2026.

2.1 Sec. 3. Minnesota Statutes 2024, section 144G.40, subdivision 2, is amended to read:

2.2 Subd. 2. **Uniform checklist disclosure of information and services.** (a) All assisted
2.3 living facilities must provide to prospective residents:

2.4 (1) a disclosure of the categories of assisted living licenses available and the category
2.5 of license held by the facility;

2.6 (2) a written checklist listing all services permitted under the facility's license, identifying
2.7 all services the facility offers to provide under the assisted living facility contract, and
2.8 identifying all services allowed under the license that the facility does not provide; ~~and~~

2.9 (3) an oral explanation of the services offered under the contract;

2.10 (4) a copy of the most recent Department of Health survey of the facility;

2.11 (5) a list of all correction orders issued against and fines imposed on the facility in the
2.12 previous three years and the results of all complaint investigations concerning the facility
2.13 in the previous three years; and

2.14 (6) the website for the Department of Human Services and Board on Aging assisted
2.15 living report card.

2.16 (b) The requirements of paragraph (a) must be completed prior to the execution of the
2.17 assisted living contract.

2.18 (c) The commissioner must, in consultation with all interested stakeholders, design the
2.19 uniform checklist disclosure form for use as provided under paragraph (a).

2.20 **EFFECTIVE DATE.** This section is effective August 1, 2026.

2.21 Sec. 4. Minnesota Statutes 2024, section 144G.41, subdivision 1, is amended to read:

2.22 Subdivision 1. **Minimum requirements.** All assisted living facilities shall:

2.23 (1) distribute to residents the assisted living bill of rights;

2.24 (2) provide services in a manner that complies with the Nurse Practice Act in sections
2.25 148.171 to 148.285;

2.26 (3) utilize a person-centered planning and service delivery process;

2.27 (4) have and maintain a system for delegation of health care activities to unlicensed
2.28 personnel by a registered nurse, including supervision and evaluation of the delegated
2.29 activities as required by the Nurse Practice Act in sections 148.171 to 148.285;

3.1 (5) provide a means for residents to request assistance for health and safety needs 24
3.2 hours per day, seven days per week, and maintain a log of resident requests for assistance
3.3 and staff responses including, for each request, the time that elapsed between the resident's
3.4 communication of the request and the staff response. The facility must retain a log for at
3.5 least five years after the most recent request and response in the log. Upon request, the
3.6 facility must provide to the resident or the resident's legal representative or designated
3.7 representative, a log of the requests for assistance made by that resident;

3.8 (6) allow residents the ability to furnish and decorate the resident's unit within the terms
3.9 of the assisted living contract;

3.10 (7) permit residents access to food at any time;

3.11 (8) allow residents to choose the resident's visitors and times of visits;

3.12 (9) allow the resident the right to choose a roommate if sharing a unit;

3.13 (10) notify the resident of the resident's right to have and use a lockable door to the
3.14 resident's unit. The licensee shall provide the locks on the unit. Only a staff member with
3.15 a specific need to enter the unit shall have keys, and advance notice must be given to the
3.16 resident before entrance, when possible. An assisted living facility must not lock a resident
3.17 in the resident's unit;

3.18 (11) develop and implement a staffing plan for determining its staffing level that:

3.19 (i) includes an evaluation, to be conducted at least twice a year, of the appropriateness
3.20 of staffing levels in the facility;

3.21 (ii) ensures sufficient staffing at all times to meet the scheduled and reasonably
3.22 foreseeable unscheduled needs of each resident as required by the residents' assessments
3.23 and service plans on a 24-hour per day basis; and

3.24 (iii) ensures that the facility can respond promptly and effectively to individual resident
3.25 emergencies and to emergency, life safety, and disaster situations affecting staff or residents
3.26 in the facility;

3.27 (12) ensure that one or more persons are available 24 hours per day, seven days per
3.28 week, who are responsible for responding to the requests of residents for assistance with
3.29 health or safety needs. Such persons must be:

3.30 (i) awake;

3.31 (ii) located in the same building, in an attached building, or on a contiguous campus
3.32 with the facility in order to respond within a reasonable amount of time;

4.1 (iii) capable of communicating with residents;

4.2 (iv) capable of providing or summoning the appropriate assistance; and

4.3 (v) capable of following directions; and

4.4 (13) provide staff access to an on-call registered nurse 24 hours per day, seven days per
4.5 week.

4.6 **EFFECTIVE DATE.** This section is effective July 1, 2026.

4.7 Sec. 5. Minnesota Statutes 2024, section 144G.41, is amended by adding a subdivision to
4.8 read:

4.9 Subd. 9. **Automatic external defibrillator.** (a) For purposes of this subdivision,
4.10 "automatic external defibrillator" has the meaning given in section 403.51, subdivision 1.

4.11 (b) A facility must:

4.12 (1) maintain an automatic external defibrillator in each building on the assisted living
4.13 facility campus where residents may be present; and

4.14 (2) ensure each of its automatic external defibrillators is maintained and regularly tested
4.15 according to the manufacturer's recommendations.

4.16 **EFFECTIVE DATE.** This section is effective August 1, 2026.

4.17 Sec. 6. **[144G.505] PROHIBITED CONDITION OF ADMISSION OR CONTINUED**
4.18 **RESIDENCE.**

4.19 An assisted living facility is prohibited from requiring a current or prospective resident
4.20 to have or obtain a guardian or conservator as a condition of admission to or continued
4.21 residence in the assisted living facility.

4.22 **EFFECTIVE DATE.** This section is effective August 1, 2026.

4.23 Sec. 7. Minnesota Statutes 2024, section 144G.63, subdivision 2, is amended to read:

4.24 Subd. 2. **Content of required orientation.** (a) The orientation must contain the following
4.25 topics:

4.26 (1) an overview of this chapter;

4.27 (2) an introduction and review of the facility's policies and procedures related to the
4.28 provision of assisted living services by the individual staff person;

4.29 (3) handling of emergencies and use of emergency services;

5.1 (4) compliance with and reporting of the maltreatment of vulnerable adults under section
5.2 626.557 to the Minnesota Adult Abuse Reporting Center (MAARC);

5.3 (5) the assisted living bill of rights and staff responsibilities related to ensuring the
5.4 exercise and protection of those rights;

5.5 (6) the principles of person-centered planning and service delivery and how they apply
5.6 to direct support services provided by the staff person;

5.7 (7) handling of residents' complaints, reporting of complaints, and where to report
5.8 complaints, including information on the Office of Health Facility Complaints;

5.9 (8) consumer advocacy services of the Office of Ombudsman for Long-Term Care,
5.10 Office of Ombudsman for Mental Health and Developmental Disabilities, Managed Care
5.11 Ombudsman at the Department of Human Services, county-managed care advocates, or
5.12 other relevant advocacy services; ~~and~~

5.13 (9) a review of the types of assisted living services the staff member will be providing
5.14 and the facility's category of licensure; and

5.15 (10) cardiopulmonary resuscitation, the use of automatic external defibrillators, the
5.16 facility's process for checking a resident's code status before initiating lifesaving measures,
5.17 and requesting emergency medical assistance as soon as practicable after an automatic
5.18 external defibrillator is used.

5.19 (b) In addition to the topics in paragraph (a), orientation may also contain training on
5.20 providing services to residents with hearing loss. Any training on hearing loss provided
5.21 under this subdivision must be high quality and research based, may include online training,
5.22 and must include training on one or more of the following topics:

5.23 (1) an explanation of age-related hearing loss and how it manifests itself, its prevalence,
5.24 and the challenges it poses to communication;

5.25 (2) health impacts related to untreated age-related hearing loss, such as increased
5.26 incidence of dementia, falls, hospitalizations, isolation, and depression; or

5.27 (3) information about strategies and technology that may enhance communication and
5.28 involvement, including communication strategies, assistive listening devices, hearing aids,
5.29 visual and tactile alerting devices, communication access in real time, and closed captions.

5.30 **EFFECTIVE DATE.** This section is effective August 1, 2026.

6.1 Sec. 8. Minnesota Statutes 2024, section 144G.63, subdivision 5, is amended to read:

6.2 Subd. 5. **Required annual training.** (a) All staff that perform direct services must
6.3 complete at least eight hours of annual training for each 12 months of employment. The
6.4 training may be obtained from the facility or another source and must include topics relevant
6.5 to the provision of assisted living services. The annual training must include:

6.6 (1) training on reporting of maltreatment of vulnerable adults under section 626.557;

6.7 (2) review of the assisted living bill of rights and staff responsibilities related to ensuring
6.8 the exercise and protection of those rights;

6.9 (3) review of infection control techniques used in the home and implementation of
6.10 infection control standards including a review of hand washing techniques; the need for and
6.11 use of protective gloves, gowns, and masks; appropriate disposal of contaminated materials
6.12 and equipment, such as dressings, needles, syringes, and razor blades; disinfecting reusable
6.13 equipment; disinfecting environmental surfaces; and reporting communicable diseases;

6.14 (4) effective approaches to use to problem solve when working with a resident's
6.15 challenging behaviors, and how to communicate with residents who have dementia,
6.16 Alzheimer's disease, or related disorders;

6.17 (5) review of the facility's policies and procedures relating to the provision of assisted
6.18 living services and how to implement those policies and procedures; ~~and~~

6.19 (6) the principles of person-centered planning and service delivery and how they apply
6.20 to direct support services provided by the staff person; and

6.21 (7) cardiopulmonary resuscitation, the use of automatic external defibrillators, the
6.22 facility's process for checking a resident's code status before initiating lifesaving measures,
6.23 and requesting emergency medical assistance as soon as practicable after an automatic
6.24 external defibrillator is used.

6.25 (b) In addition to the topics in paragraph (a), annual training may also contain training
6.26 on providing services to residents with hearing loss. Any training on hearing loss provided
6.27 under this subdivision must be high quality and research based, may include online training,
6.28 and must include training on one or more of the following topics:

6.29 (1) an explanation of age-related hearing loss and how it manifests itself, its prevalence,
6.30 and challenges it poses to communication;

6.31 (2) the health impacts related to untreated age-related hearing loss, such as increased
6.32 incidence of dementia, falls, hospitalizations, isolation, and depression; or

7.1 (3) information about strategies and technology that may enhance communication and
7.2 involvement, including communication strategies, assistive listening devices, hearing aids,
7.3 visual and tactile alerting devices, communication access in real time, and closed captions.

7.4 **EFFECTIVE DATE.** This section is effective August 1, 2026.

7.5 Sec. 9. Minnesota Statutes 2024, section 144G.63, is amended by adding a subdivision to
7.6 read:

7.7 **Subd. 5a. Orientation and annual training; other staff.** (a) All staff who are not subject
7.8 to the orientation requirements in subdivisions 1 and 2 must complete an orientation on the
7.9 topics specified under paragraph (b) within 160 hours of the employment start date. All
7.10 staff who are not subject to the annual training requirements in subdivision 5 must complete
7.11 annual training on the topics specified under paragraph (b).

7.12 (b) The orientation and annual training must include training on cardiopulmonary
7.13 resuscitation, the use of automatic external defibrillators, the facility's process for checking
7.14 a resident's code status before initiating lifesaving measures, and requesting emergency
7.15 medical assistance as soon as practicable after an automatic external defibrillator is used.

7.16 **EFFECTIVE DATE.** This section is effective August 1, 2026."

7.17 Amend the title accordingly