



State of Wisconsin
2023 - 2024 LEGISLATURE

LRB-3926/1
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2023 ASSEMBLY BILL 942

January 12, 2024 - Introduced by Representatives PALMERI, BALDEH, CONLEY, CONSIDINE, DRAKE, JOERS, O'CONNOR, RATCLIFF, SINICKI, SNODGRASS, SUBECK, ORTIZ-VELEZ and OHNSTAD, cosponsored by Senator FEYEN. Referred to Committee on Health, Aging and Long-Term Care.

1 **AN ACT to renumber** 50.035 (1); and **to create** 50.034 (3) (f), 50.034 (3) (g), 50.034
2 (3) (h), 50.034 (3m), 50.035 (1) (b), 50.035 (1m), 50.035 (7), 50.035 (8), 50.04 (2)
3 (e), 50.04 (2k), 50.04 (2m), 50.15, 50.921, 50.922 and 50.935 of the statutes;
4 **relating to:** fall prevention and recovery training, CPR and first aid
5 certification, a duty to provide aid in certain residential facilities and hospices,
6 and granting rule-making authority.

Analysis by the Legislative Reference Bureau

Under this bill, the Department of Health Services must develop or identify fall prevention and recovery training programs for certain employees, as specified by DHS, and for patients and residents of residential care apartment complexes, community-based residential facilities, nursing homes, and hospices. Residential care apartment complexes, community-based residential facilities, nursing homes, and hospices must administer the fall prevention and recovery trainings to any employees that are required by DHS to receive the training and to patients and residents of the facilities.

In addition, under the bill, residential care apartment complexes, community-based residential facilities, nursing homes, and hospices must have at least one employee with current certification in CPR, at least one employee with current certification in first aid, and at least one employee who has received fall prevention and recovery training available on the premises at all times a resident

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or patient is present in the residential care apartment complex, community-based residential facility, nursing home, or hospice. The bill also imposes a duty upon residential care apartment complexes, community-based residential facilities, nursing homes, and hospices to administer CPR and first aid to patients and residents and to make an attempt to lift patients and residents who have fallen, appear to be uninjured, and cannot recover on their own. The bill exempts individuals and residential care apartment complexes, community-based residential facilities, nursing homes, and hospices from liability for civil damages for any act or omission of an individual administering CPR or first aid to a patient or resident or attempting to lift a fallen patient or resident if certain requirements are met.

For further information see the state fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 50.034 (3) (f) of the statutes is created to read:

2 50.034 (3) (f) Administer the training program under s. 50.15 (2) (a) to each
3 employee of the residential care apartment complex who is required under s. 50.15
4 (2) (b) to receive the training.

5 **SECTION 2.** 50.034 (3) (g) of the statutes is created to read:

6 50.034 (3) (g) Administer the training program under s. 50.15 (3) to each
7 resident of the residential care apartment complex within 30 days after the resident
8 moves in to the residential care apartment complex.

9 **SECTION 3.** 50.034 (3) (h) of the statutes is created to read:

10 50.034 (3) (h) At all times during which a resident is present in the residential
11 care apartment complex, have available on the premises at least one employee with
12 current certification in cardiopulmonary resuscitation, at least one employee with
13 current certification in first aid, and at least one employee who has received training
14 in fall prevention, fall recovery, and proper techniques for lifting and moving
15 residents.

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1 **SECTION 4.** 50.034 (3m) of the statutes is created to read:

2 50.034 **(3m)** DUTY TO ADMINISTER AID. (a) Subject to any known declaration or
3 do-not-resuscitate order under ch. 154, a residential care apartment complex has
4 a duty to do all of the following:

5 1. Administer cardiopulmonary resuscitation before the arrival of emergency
6 medical services to a resident who is nonresponsive or has a cessation of normal
7 respiration. The cardiopulmonary resuscitation shall be administered by or under
8 the direction of an individual who is certified in cardiopulmonary resuscitation and
9 shall be performed in accordance with that individual's cardiopulmonary
10 resuscitation certification training.

11 2. Administer first aid before the arrival of emergency medical services to a
12 resident who is in distress. The first aid shall be administered by or under the
13 direction of an individual who is certified in first aid and shall be performed in
14 accordance with that individual's first aid certification training.

15 3. Make an attempt before the arrival of emergency medical services to lift a
16 resident who has fallen, appears to be uninjured, and is unable to reasonably recover
17 independently. The lift shall be attempted by or under the direction of an individual
18 who has received training in first aid or in fall prevention, fall recovery, and proper
19 techniques for lifting and moving residents and shall be performed in accordance
20 with that individual's training.

21 (b) A residential care apartment complex may not have, establish, or
22 implement a policy that prevents an individual from providing appropriate
23 cardiopulmonary resuscitation or first aid or attempting to lift a fallen resident who
24 appears to be uninjured.

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1 (c) A residential care apartment complex or an individual that administers
2 cardiopulmonary resuscitation or first aid as provided in par. (a) 1. or 2. is not liable
3 for any civil damages as the result of any act or omission by the individual
4 administering the cardiopulmonary resuscitation or first aid, unless the individual
5 did not act in good faith or acted with gross negligence while administering the
6 cardiopulmonary resuscitation or first aid.

7 (d) A residential care apartment complex or an individual that attempts to lift
8 a fallen resident as provided in par. (a) 3. is not liable for any civil damages as the
9 result of any act or omission by the individual attempting the lift, unless the
10 individual acted with gross negligence while attempting the lift, if any of the
11 following are true:

12 1. The individual attempted the lift at the direction of a dispatcher from a
13 public safety answering point, as defined in s. 256.35 (1) (gm).

14 2. The individual attempted the lift to prevent further imminent and serious
15 injury to the fallen resident.

16 3. The fallen resident appeared to be uninjured, asserted a lack of injury, and
17 requested assistance.

18 **SECTION 5.** 50.035 (1) of the statutes is renumbered 50.035 (1) (a).

19 **SECTION 6.** 50.035 (1) (b) of the statutes is created to read:

20 50.035 (1) (b) Each community-based residential facility shall administer the
21 training program under s. 50.15 (2) (a) to each employee of the community-based
22 residential facility who is required under s. 50.15 (2) (b) to receive the training.

23 **SECTION 7.** 50.035 (1m) of the statutes is created to read:

24 50.035 (1m) RESIDENT FALL PREVENTION TRAINING. Each community-based
25 residential facility shall administer the training program under s 50.15 (3) to each

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1 resident of the community-based residential facility within 30 days after the
2 resident moves in to the community-based residential facility.

3 **SECTION 8.** 50.035 (7) of the statutes is created to read:

4 50.035 (7) CPR AND FIRST AID CERTIFICATION. At all times during which a
5 resident is present in a community-based residential facility, the community-based
6 residential facility shall have available on the premises at least one employee with
7 current certification in cardiopulmonary resuscitation, at least one employee with
8 current certification in first aid, and at least one employee who has received training
9 in fall prevention, fall recovery, and proper techniques for lifting and moving
10 residents.

11 **SECTION 9.** 50.035 (8) of the statutes is created to read:

12 50.035 (8) DUTY TO ADMINISTER AID. (a) Subject to any known declaration or
13 do-not-resuscitate order under ch. 154, a community-based residential facility has
14 a duty to do all of the following:

15 1. Administer cardiopulmonary resuscitation before the arrival of emergency
16 medical services to a resident who is nonresponsive or has a cessation of normal
17 respiration. The cardiopulmonary resuscitation shall be administered by or under
18 the direction of an individual who is certified in cardiopulmonary resuscitation and
19 shall be performed in accordance with that individual's cardiopulmonary
20 resuscitation certification training.

21 2. Administer first aid before the arrival of emergency medical services to a
22 resident who is in distress. The first aid shall be administered by or under the
23 direction of an individual who is certified in first aid and shall be performed in
24 accordance with that individual's first aid certification training.

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1 3. Make an attempt before the arrival of emergency medical services to lift a
2 resident who has fallen, appears to be uninjured, and is unable to reasonably recover
3 independently. The lift shall be attempted by or under the direction of an individual
4 who has received training in first aid or in fall prevention, fall recovery, and proper
5 techniques for lifting and moving residents and shall be performed in accordance
6 with that individual's training.

7 (b) A community-based residential facility may not have, establish, or
8 implement a policy that prevents an individual from providing appropriate
9 cardiopulmonary resuscitation or first aid or attempted to lift a fallen resident who
10 appears to be uninjured.

11 (c) A community-based residential facility or an individual that administers
12 cardiopulmonary resuscitation or first aid as provided in par. (a) 1. or 2. is not liable
13 for any civil damages as the result of any act or omission by the individual
14 administering the cardiopulmonary resuscitation or first aid, unless the individual
15 did not act in good faith or acted with gross negligence while administering the
16 cardiopulmonary resuscitation or first aid.

17 (d) A community-based residential facility or an individual that attempts to
18 lift a fallen resident as provided in par. (a) 3. is not liable for any civil damages as the
19 result of any act or omission by the individual attempting the lift, unless the
20 individual acted with gross negligence while attempting the lift, if any of the
21 following are true:

22 1. The individual attempted the lift at the direction of a dispatcher from a
23 public safety answering point, as defined in s. 256.35 (1) (gm).

24 2. The individual attempted the lift to prevent further imminent and serious
25 injury to the fallen resident.

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1 3. The fallen resident appeared to be uninjured, asserted a lack of injury, and
2 requested assistance.

3 **SECTION 10.** 50.04 (2) (e) of the statutes is created to read:

4 50.04 (2) (e) At all times during which a resident is present in a nursing home,
5 the nursing home shall have available on the premises at least one employee with
6 current certification in cardiopulmonary resuscitation, at least one employee with
7 current certification in first aid, and at least one employee who has received training
8 in fall prevention, fall recovery, and proper techniques for lifting and moving
9 residents.

10 **SECTION 11.** 50.04 (2k) of the statutes is created to read:

11 50.04 (2k) DUTY TO ADMINISTER AID. (a) Subject to any known declaration or
12 do-not-resuscitate order under ch. 154, a nursing home has a duty to do all of the
13 following:

14 1. Administer cardiopulmonary resuscitation before the arrival of emergency
15 medical services to a resident who is nonresponsive or has a cessation of normal
16 respiration. The cardiopulmonary resuscitation shall be administered by or under
17 the direction of an individual who is certified in cardiopulmonary resuscitation and
18 shall be performed in accordance with that individual's cardiopulmonary
19 resuscitation certification training.

20 2. Administer first aid before the arrival of emergency medical services to a
21 resident who is in distress. The first aid shall be administered by or under the
22 direction of an individual who is certified in first aid and shall be performed in
23 accordance with that individual's first aid certification training.

24 3. Make an attempt before the arrival of emergency medical services to lift a
25 resident who has fallen, appears to be uninjured, and is unable to reasonably recover

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1 independently. The lift shall be attempted by or under the direction of an individual
2 who has received training in first aid or in fall prevention, fall recovery, and proper
3 techniques for lifting and moving residents and shall be performed in accordance
4 with that individual's training.

5 (b) A nursing home may not have, establish, or implement a policy that
6 prevents an individual from providing appropriate cardiopulmonary resuscitation or
7 first aid or attempting to lift a fallen resident who appears to be uninjured.

8 (c) A nursing home or an individual that administers cardiopulmonary
9 resuscitation or first aid as provided in par. (a) 1. or 2. is not liable for any civil
10 damages as the result of any act or omission by the individual administering the
11 cardiopulmonary resuscitation or first aid, unless the individual did not act in good
12 faith or acted with gross negligence while administering the cardiopulmonary
13 resuscitation or first aid.

14 (d) A nursing home or an individual that attempted to lift a fallen resident as
15 provided in par. (a) 3. is not liable for any civil damages as the result of any act or
16 omission by the individual attempting the lift, unless the individual acted with gross
17 negligence while attempting the lift, if any of the following are true:

18 1. The individual attempted the lift at the direction of a dispatcher from a
19 public safety answering point, as defined in s. 256.35 (1) (gm).

20 2. The individual attempted the lift to prevent further imminent and serious
21 injury to the fallen resident.

22 3. The fallen resident appeared to be uninjured, asserted a lack of injury, and
23 requested assistance.

24 **SECTION 12.** 50.04 (2m) of the statutes is created to read:

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1 50.04 **(2m)** FALL PREVENTION AND RECOVERY TRAINING PROGRAM. (a) Each nursing
2 home shall administer the training program under s. 50.15 (2) (a) to each employee
3 of the nursing home who is required under s. 50.15 (2) (b) to receive the training.

4 (b) Each nursing home shall administer the training under s. 50.15 (3) to each
5 resident of the nursing home within 30 days after the resident moves in to the
6 nursing home.

7 **SECTION 13.** 50.15 of the statutes is created to read:

8 **50.15 Fall prevention and recovery. (1) DEFINITION.** In this section,
9 “hospice” has the meaning given in s. 50.90 (1).

10 **(2) EMPLOYEE TRAINING PROGRAM.** (a) The department shall develop or identify
11 an evidence-based training program for employees of residential care apartment
12 complexes, community-based residential facilities, nursing homes, and hospices
13 that can be administered uniformly for each employee identified under par. (b) and
14 contains instruction on fall prevention, fall recovery, and proper techniques for
15 lifting and moving patients or residents. The training program under this paragraph
16 shall consist of an initial training and ongoing competency trainings.

17 (b) The department shall, by rule, identify the types of employees of residential
18 care apartment complexes, community-based residential facilities, nursing homes,
19 and hospices who are required to receive the training under par. (a).

20 **(3) PATIENT OR RESIDENT TRAINING PROGRAM.** The department shall develop or
21 identify a training program for patients and residents of residential care apartment
22 complexes, community-based residential facilities, nursing homes, and hospices
23 that contains instruction on fall prevention and fall recovery.

24 **SECTION 14.** 50.921 of the statutes is created to read:

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1 **50.921 Fall prevention and recovery training.** (1) Each hospice shall
2 administer the training program under s. 50.15 (2) (a) to each employee of the hospice
3 who is required under s. 50.15 (2) (b) to receive the training.

4 (2) Each hospice shall administer the training under s. 50.15 (3) to each patient
5 of the hospice within 30 days after the patient moves in to the hospice.

6 **SECTION 15.** 50.922 of the statutes is created to read:

7 **50.922 Staffing requirements.** At all times during which a patient is present
8 in a hospice, the hospice shall have available on the premises at least one employee
9 with current certification in cardiopulmonary resuscitation, at least one employee
10 with current certification in first aid, and at least one employee who has received
11 training in first aid or in fall prevention, fall recovery, and proper techniques for
12 lifting and moving patients.

13 **SECTION 16.** 50.935 of the statutes is created to read:

14 **50.935 Duty to administer aid.** (1) Subject to any known declaration or
15 do-not-resuscitate order under ch. 154, a hospice has a duty to do all of the following:

16 (a) Administer cardiopulmonary resuscitation before the arrival of emergency
17 medical services to a patient who is nonresponsive or has a cessation of normal
18 respiration. The cardiopulmonary resuscitation shall be administered by or under
19 the direction of an individual who is certified in cardiopulmonary resuscitation and
20 shall be performed in accordance with that individual's cardiopulmonary
21 resuscitation certification training.

22 (b) Administer first aid before the arrival of emergency medical services to a
23 patient who is in distress. The first aid shall be administered by or under the
24 direction of an individual who is certified in first aid and shall be performed in
25 accordance with that individual's first aid certification training.

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1 (c) Make an attempt before the arrival of emergency medical services to lift a
2 patient who has fallen, appears to be uninjured, and is unable to reasonably recover
3 independently. The lift shall be attempted by or under the direction of an individual
4 who has received training in first aid or in fall prevention, fall recovery, and proper
5 techniques for lifting and moving patients and shall be performed in accordance with
6 that individual's training.

7 (2) A hospice may not have, establish, or implement a policy that prevents an
8 individual from providing appropriate cardiopulmonary resuscitation or first aid or
9 attempted to lift a fallen patient who appears to be uninjured.

10 (3) A hospice or an individual that administers cardiopulmonary resuscitation
11 or first aid as provided in sub. (1) (a) or (b) is not liable for any civil damages as the
12 result of any act or omission by the individual administering the cardiopulmonary
13 resuscitation or first aid, unless the individual did not act in good faith or acted with
14 gross negligence while administering the cardiopulmonary resuscitation or first aid.

15 (4) A hospice or an individual that attempts to lift a fallen patient as provided
16 in sub. (1) (c) is not liable for any civil damages as the result of any act or omission
17 by the individual attempting the lift, unless the individual acted with gross
18 negligence while attempting the lift, if any of the following are true:

19 (a) The individual attempted the lift at the direction of a dispatcher from a
20 public safety answering point, as defined in s. 256.35 (1) (gm).

21 (b) The individual attempted the lift to prevent further imminent and serious
22 injury to the fallen patient.

23 (c) The fallen patient appeared to be uninjured, asserted a lack of injury, and
24 requested assistance.

