

Tab 4	CS/SB 634 by HP, Gibson (CO-INTRODUCERS) Baxley, Farmer, Torres; (Similar to CS/H 00309) Dementia-related Staff Training				
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405408	D	S	WD	CF, Gibson	Delete everything after 03/26 03:34 PM
841312	D	S		CF, Gibson	Delete everything after 03/29 08:33 AM

Tab 5	SB 768 by Baxley; (Compare to H 00459) Immunizations				
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601850	D	S		CF, Baxley	Delete everything after 03/29 08:43 AM
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The Florida Senate
COMMITTEE MEETING EXPANDED AGENDA

CHILDREN, FAMILIES, AND ELDER AFFAIRS
Senator Book, Chair
Senator Albritton, Vice Chair

MEETING DATE: Tuesday, March 30, 2021
TIME: 9:00—11:30 a.m.
PLACE: *Mallory Horne Committee Room, 37 Senate Building*

MEMBERS: Senator Book, Chair; Senator Albritton, Vice Chair; Senators Brodeur, Garcia, Harrell, Rouson, Torres, and Wright

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
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PUBLIC TESTIMONY WILL BE RECEIVED FROM ROOM A2 AT THE DONALD L. TUCKER CIVIC CENTER, 505 W PENSACOLA STREET, TALLAHASSEE, FL 32301

TAB	OFFICE and APPOINTMENT (HOME CITY)	FOR TERM ENDING	COMMITTEE ACTION
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1 **Senate Confirmation Hearing:** A public hearing will be held for consideration of the below-named executive appointment to the office indicated.

Secretary of Children and Families

Harris, Shevaun (Tallahassee)

Pleasure of Governor

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
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2 Workshop Discussion on Foster Parents and Foster Placement:

Representative from the Department of Children and Families
 Molly Clore, Director, Foster Family Support Program, Northwest Family Support Program - Remote Participant
 Amanda Cruce, President, Florida Foster/Adoptive Parent Association - Remote Participant
 Justice McGill, Former Foster Youth, Member of Florida Youth SHINE - Remote Participant

3 Workshop Discussion on Grandparents' Visitation Rights:

Introduction Video Presentation
 Jeremy Cohen, Representative for the Markel Family
 Abigail Beebe, Representative for the Family Law Section of the Florida Bar - Remote Participant
 Dr. Mimi Graham, Ph.D.; Director of the Center for Prevention and Early Intervention Policy, Florida State University

Remote Testimony on Immunizations by Dr. Lisa Gwynn, Associate Professor Clinical Pediatrics and Public Health Sciences, Program Director, Pediatric Mobile Clinic & School Health, University of Miami

COMMITTEE MEETING EXPANDED AGENDA

Children, Families, and Elder Affairs

Tuesday, March 30, 2021, 9:00—11:30 a.m.

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
4	CS/SB 634 Health Policy / Gibson (Similar CS/H 309)	Dementia-related Staff Training; Citing this act as the "Florida Alzheimer's Disease and Dementia Training Act"; requiring certain entities, as a condition of licensure, to provide specified dementia-related training for new employees within a specified timeframe; requiring annual dementia-related training for certain employees; providing that such additional training counts toward a certified nursing assistant's total annual training; authorizing certain health care practitioners to count certain continuing education hours toward the dementia-related training requirements under certain circumstances, etc.	HP 03/10/2021 Fav/CS CF 03/23/2021 Temporarily Postponed CF 03/30/2021 AP
5	SB 768 Baxley (Compare H 459, CS/CS/H 1063, CS/S 494, S 898)	Immunizations; Requiring certain persons licensed to practice pharmacy to report specified vaccination data to the Department of Health's immunization registry, with exceptions; authorizing certain pharmacists and registered interns to administer specified immunizations and vaccines to children within a specified age range under certain circumstances; requiring authorized pharmacists and registered interns to obtain a certain medical consent form before administering a vaccine to a child younger than 18 years of age, etc.	HP 02/17/2021 Favorable CF 03/30/2021 RC

Other Related Meeting Documents

A Black and white copy of this document is not official.

165

STATE OF FLORIDA
DEPARTMENT OF STATE

Division of Elections

I, Laurel M. Lee, Secretary of State,
do hereby certify that

Shevaun Harris

is duly appointed

Secretary,

Department of Children and Families

for a term beginning on the Fifth day of February, A.D., 2021, to
serve at the pleasure of the Governor and is subject to be
confirmed by the Senate during the next regular session of the
Legislature.

*Given under my hand and the Great Seal of the
State of Florida, at Tallahassee, the Capital, this
the Second day of March, A.D., 2021.*



Secretary of State

DSDE 99 (3/03)

The original document has a reflective line mark in paper. Hold at an angle to view when checking.

State of Florida appears in small letters across the face of this 8 1/2 x 11 document

If photocopied or chemically altered, the word "VOID" will appear.



RON DESANTIS
GOVERNOR

RECEIVED
DEPARTMENT OF STATE
2021 FEB -9 AM 11:01
DIVISION OF ELECTIONS
TALLAHASSEE, FL

February 5, 2021

Secretary Laurel M. Lee
Department of State
R.A. Gray Building, Room 316
500 South Bronough Street
Tallahassee, Florida 32399-0250

Dear Secretary Lee:

Please be advised I have made the following appointment under the provisions of Section 20.19(a), Florida Statutes:

Mrs. Shevaun Harris
3061 Adiron Way
Tallahassee, Florida 32317

as Secretary of the Department of Children and Families, subject to confirmation by the Senate. This appointment is effective February 5, 2021 for a term ending at the pleasure of the Governor.

Sincerely,

Ron DeSantis
Governor

RD/jf

HAND DELIVERED

OATH OF OFFICE

(Art. II, § 5(b), Fla. Const.)

RECEIVED
DEPARTMENT OF STATE

2021 MAR -1 PM 1:40

DIVISION OF ELECTIONS
TALLAHASSEE, FL

STATE OF FLORIDA

County of Leon

I do solemnly swear (or affirm) that I will support, protect, and defend the Constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the State, and that I will well and faithfully perform the duties of

Secretary, Florida Department of Children and Families

(Title of Office)

on which I am now about to enter, so help me God.

[NOTE: If you affirm, you may omit the words "so help me God." See § 92.52, Fla. Stat.]

Shevaun Harris

Signature

Sworn to and subscribed before me by means of physical presence or
 online notarization, this 17th day of February, 2021.

Mary Gay Templeton

Signature of Officer Administering Oath or of Notary Public

Mary Gay Templeton

Print, Type, or Stamp Commissioned Name of Notary Public



Personally Known OR Produced Identification

Type of Identification Produced _____

ACCEPTANCE

I accept the office listed in the above Oath of Office.

Mailing Address: Home Office

3061 Adiron way
Street or Post Office Box

Tallahassee, FL 32317
City, State, Zip Code

Shevaun L. Harris

Print Name

Shevaun Harris
Signature



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LEGISLATIVE ACTION

Senate	.	House
Comm: WD	.	
03/26/2021	.	
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	.	
	.	

The Committee on Children, Families, and Elder Affairs (Gibson) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause
and insert:

Section 1. This act may be cited as the "Florida
Alzheimer's Disease and Dementia Training Act."

Section 2. Section 430.5025, Florida Statutes, is created
to read:

430.5025 Care for persons with Alzheimer's disease or a
related disorder; staff training.-



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- 11 (1) As used in this section, the term:
- 12 (a) "Department" means the Department of Elder Affairs.
- 13 (b) "Direct care worker" means an individual who, as part
14 of his or her employment duties, provides or has access to
15 provide direct contact assistance with personal care or
16 activities of daily living to clients, patients, or residents of
17 any facility licensed under part II, part III, or part IV of
18 chapter 400 or chapter 429.
- 19 (c) "Employee" means any staff member who has regular or
20 incidental interaction on a recurring basis with clients,
21 patients, or residents of a facility licensed under part II,
22 part III, or part IV of chapter 400 or chapter 429. The term
23 includes, but is not limited to, direct care workers; staff
24 responsible for housekeeping, the front desk, maintenance, and
25 other administrative functions; and any other individuals who
26 may have regular contact or incidental contact on a recurring
27 basis with clients, patients, or residents.
- 28 (d) "Licensee" means a person or an entity licensed under
29 part II, part III, or part IV of chapter 400 or chapter 429.
- 30 (2) On or after October 1, 2021, as a condition of
31 licensure, licensees must provide to each of their employees the
32 following which must be developed or approved by the department
33 pursuant to subsection (8):
- 34 (a) Upon beginning employment, basic written information
35 about interacting with persons with Alzheimer's disease or a
36 related disorder;
- 37 (b) Within 30 days from the first date of employment, 1-
38 hour of dementia-related training which must include methods for
39 interacting with persons with Alzheimer's disease or a related



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40 disorder and for identifying warning signs of dementia; and
41 (c) Within every two calendar years from the first date of
42 employment, 1-hour of continuing education on topics of
43 Alzheimer's disease or a related disorder and any related
44 changes in state or federal law.

45 (3) On or after October 1, 2021, in addition to the
46 training requirements of subsection (2), licensees must require
47 all employees who are direct care workers to receive at least 3
48 hours developed or approved pursuant to subsection (8) evidence-
49 based training if the direct care workers are expected to, or
50 their responsibilities require them to, have direct contact with
51 clients, patients, or residents with Alzheimer's disease or a
52 related disorder or with populations that are at a greater risk
53 for Alzheimer's disease or a related disorder. The training must
54 be completed within the first 3 months after employment begins
55 and must include, but need not be limited to, an overview of
56 Alzheimer's disease and related disorders and person-centered
57 care, assessment and care planning, activities of daily living,
58 and dementia-related behaviors and communication for clients,
59 patients, and residents with Alzheimer's disease or a related
60 disorder. Each calendar year thereafter, the licensee must
61 require all of its direct care workers to receive at least 4
62 hours of continuing education, developed or approved by the
63 department pursuant to (8), on these topics and any related
64 changes in state or federal law.

65 (4) On or after October 1, 2021, in addition to the
66 training requirements of subsections (2) and (3), if a licensee
67 provides special care for individuals with Alzheimer's disease
68 or a related disorder which includes direct care to such



69 individuals, the licensee must require its direct care workers
70 to complete 4 hours of training developed or approved pursuant
71 to subsection (8) which must be completed within 4 months after
72 employment begins. Completion of the 4 hours of training
73 developed or approved pursuant to subsection (8) shall count
74 toward a certified nursing assistant's annual training
75 requirements.

76 (5) The licensee must require employees who became employed
77 before the requirements provided for under this section to
78 complete the training within 3 months after the training is
79 developed or approved pursuant to subsection (8).

80 (6) Nothing in this section shall be construed to reduce
81 the number of hours of training that a licensee is required to
82 provide to its employees under s. 429.178. An employee shall
83 complete training as provided in this section or as provided in
84 s. 429.178, whichever is greater.

85 (7) If a health care practitioner as defined in s. 456.001
86 completes continuing education hours as required by that
87 practitioner's licensing board, he or she may count those
88 continuing education hours toward satisfaction of the training
89 requirements of subsections (3) and (4) if the course curriculum
90 covers the topics required under those subsections. The
91 department must approve such continuing education hours for
92 purposes of satisfying the training requirements of subsections
93 (3) and (4).

94 (8) The department or its designee shall develop or approve
95 the courses that licensees may use to satisfy the training
96 requirements under this section. The department or its designee
97 must approve training offered in a variety of formats,



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98 including, but not limited to, Internet-based training, videos,
99 teleconferencing, and classroom instruction.

100 (9) The department or its designee shall develop a process
101 for registering training providers and maintain a list of those
102 providers approved to provide training required under this
103 section. To be approved, a training provider must have at least
104 2 years of experience related to Alzheimer's disease or related
105 disorders, gerontology, health care, or a related field. The
106 department or its designee shall issue each approved training
107 provider a unique registration identifier.

108 (10) For each training topic required under this section,
109 the training provider shall develop an assessment that measures
110 an individual's understanding of the topic and indicate a
111 minimum required score to pass the assessment. Upon completion
112 of any training under this section, the employee or direct care
113 worker must pass the related assessment. If an employee or a
114 direct care worker completes a training and passes the related
115 assessment, the training provider must issue the employee or
116 direct care worker a certificate that includes the training
117 provider's name and unique identifier, the topic covered in the
118 training, the date of completion, and the signature of the
119 training provider. The certificate is evidence of completion of
120 the training and assessment in the identified topic, and the
121 employee or direct care worker is not required to repeat
122 training in that topic if he or she changes employment to a
123 different licensee, but he or she must comply with any
124 applicable continuing education requirements under this section.
125 Licensees must maintain copies of certificates issued to each of
126 their employees or direct care workers under this section and



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127 must make them available for inspection to meet the requirements
128 of licensure.

129 (11) The department shall adopt rules to implement this
130 section.

131 Section 3. Section 400.1755, Florida Statutes, is amended
132 to read:

133 400.1755 Care for persons with Alzheimer's disease or
134 related disorders; staff training requirements.-

135 ~~(1) As a condition of licensure, facilities licensed under~~
136 ~~this part must provide to each of their employees training as~~
137 ~~required in s. 430.5025, upon beginning employment, basic~~
138 ~~written information about interacting with persons with~~
139 ~~Alzheimer's disease or a related disorder.~~

140 ~~(2) All employees who are expected to, or whose~~
141 ~~responsibilities require them to, have direct contact with~~
142 ~~residents with Alzheimer's disease or a related disorder must,~~
143 ~~in addition to being provided the information required in~~
144 ~~subsection (1), also have an initial training of at least 1 hour~~
145 ~~completed in the first 3 months after beginning employment. This~~
146 ~~training must include, but is not limited to, an overview of~~
147 ~~dementias and must provide basic skills in communicating with~~
148 ~~persons with dementia.~~

149 ~~(3) An individual who provides direct care shall be~~
150 ~~considered a direct caregiver and must complete the required~~
151 ~~initial training and an additional 3 hours of training within 9~~
152 ~~months after beginning employment. This training shall include,~~
153 ~~but is not limited to, managing problem behaviors, promoting the~~
154 ~~resident's independence in activities of daily living, and~~
155 ~~skills in working with families and caregivers.~~



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156 ~~(a) The required 4 hours of training for certified nursing~~
157 ~~assistants are part of the total hours of training required~~
158 ~~annually.~~

159 ~~(b) For a health care practitioner as defined in s.~~
160 ~~456.001, continuing education hours taken as required by that~~
161 ~~practitioner's licensing board shall be counted toward this~~
162 ~~total of 4 hours.~~

163 ~~(4) For an employee who is a licensed health care~~
164 ~~practitioner as defined in s. 456.001, training that is~~
165 ~~sanctioned by that practitioner's licensing board shall be~~
166 ~~considered to be approved by the Department of Elderly Affairs.~~

167 ~~(5) The Department of Elderly Affairs or its designee must~~
168 ~~approve the initial and continuing training provided in the~~
169 ~~facilities. The department must approve training offered in a~~
170 ~~variety of formats, including, but not limited to, Internet-~~
171 ~~based training, videos, teleconferencing, and classroom~~
172 ~~instruction. The department shall keep a list of current~~
173 ~~providers who are approved to provide initial and continuing~~
174 ~~training. The department shall adopt rules to establish~~
175 ~~standards for the trainers and the training required in this~~
176 ~~section.~~

177 ~~(6) Upon completing any training listed in this section,~~
178 ~~the employee or direct caregiver shall be issued a certificate~~
179 ~~that includes the name of the training provider, the topic~~
180 ~~covered, and the date and signature of the training provider.~~
181 ~~The certificate is evidence of completion of training in the~~
182 ~~identified topic, and the employee or direct caregiver is not~~
183 ~~required to repeat training in that topic if the employee or~~
184 ~~direct caregiver changes employment to a different facility or~~



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185 ~~to an assisted living facility, home health agency, adult day~~
186 ~~care center, or adult family care home. The direct caregiver~~
187 ~~must comply with other applicable continuing education~~
188 ~~requirements.~~

189 Section 4. Section 400.4785, Florida Statutes, is amended
190 to read:

191 400.4785 Patients with Alzheimer's disease or other related
192 disorders; staff training requirements; certain disclosures.—

193 (1) A home health agency must provide ~~the following~~ staff
194 training as required in s. 430.5025—

195 ~~(a) Upon beginning employment with the agency, each~~
196 ~~employee must receive basic written information about~~
197 ~~interacting with participants who have Alzheimer's disease or~~
198 ~~dementia-related disorders.~~

199 ~~(b) In addition to the information provided under paragraph~~
200 ~~(a), newly hired home health agency personnel who will be~~
201 ~~providing direct care to patients must complete 2 hours of~~
202 ~~training in Alzheimer's disease and dementia-related disorders~~
203 ~~within 9 months after beginning employment with the agency. This~~
204 ~~training must include, but is not limited to, an overview of~~
205 ~~dementia, a demonstration of basic skills in communicating with~~
206 ~~persons who have dementia, the management of problem behaviors,~~
207 ~~information about promoting the client's independence in~~
208 ~~activities of daily living, and instruction in skills for~~
209 ~~working with families and caregivers.~~

210 ~~(c) For certified nursing assistants, the required 2 hours~~
211 ~~of training shall be part of the total hours of training~~
212 ~~required annually.~~

213 ~~(d) For a health care practitioner as defined in s.~~



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214 ~~456.001, continuing education hours taken as required by that~~
215 ~~practitioner's licensing board shall be counted toward the total~~
216 ~~of 2 hours.~~

217 ~~(e) For an employee who is a licensed health care~~
218 ~~practitioner as defined in s. 456.001, training that is~~
219 ~~sanctioned by that practitioner's licensing board shall be~~
220 ~~considered to be approved by the Department of Elderly Affairs.~~

221 ~~(f) The Department of Elderly Affairs, or its designee,~~
222 ~~must approve the required training. The department must consider~~
223 ~~for approval training offered in a variety of formats. The~~
224 ~~department shall keep a list of current providers who are~~
225 ~~approved to provide the 2-hour training. The department shall~~
226 ~~adopt rules to establish standards for the employees who are~~
227 ~~subject to this training, for the trainers, and for the training~~
228 ~~required in this section.~~

229 ~~(g) Upon completing the training listed in this section,~~
230 ~~the employee shall be issued a certificate that states that the~~
231 ~~training mandated under this section has been received. The~~
232 ~~certificate shall be dated and signed by the training provider.~~
233 ~~The certificate is evidence of completion of this training, and~~
234 ~~the employee is not required to repeat this training if the~~
235 ~~employee changes employment to a different home health agency.~~

236 ~~(2)(h)~~ A licensed home health agency whose unduplicated
237 census during the most recent calendar year was composed
238 ~~comprised~~ of at least 90 percent of individuals aged 21 years or
239 younger at the date of admission is exempt from the training
240 requirements in this section.

241 ~~(3)(2)~~ An agency licensed under this part which claims that
242 it provides special care for persons who have Alzheimer's



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243 disease or other related disorders must disclose in its
244 advertisements or in a separate document those services that
245 distinguish the care as being especially applicable to, or
246 suitable for, such persons. The agency must give a copy of all
247 such advertisements or a copy of the document to each person who
248 requests information about the agency and must maintain a copy
249 of all such advertisements and documents in its records. The
250 Agency for Health Care Administration shall examine all such
251 advertisements and documents in the agency's records as part of
252 the license renewal procedure.

253 Section 5. Subsection (1) of section 400.6045, Florida
254 Statutes, is amended to read:

255 400.6045 Patients with Alzheimer's disease or other related
256 disorders; staff training requirements; certain disclosures.-

257 (1) A hospice licensed under this part must provide ~~the~~
258 ~~following~~ staff training as required in s. 430.5025:-

259 ~~(a) Upon beginning employment with the agency, each~~
260 ~~employee must receive basic written information about~~
261 ~~interacting with persons who have Alzheimer's disease or~~
262 ~~dementia-related disorders.~~

263 ~~(b) In addition to the information provided under paragraph~~
264 ~~(a), employees who are expected to, or whose responsibilities~~
265 ~~require them to, have direct contact with participants who have~~
266 ~~Alzheimer's disease or dementia-related disorders must complete~~
267 ~~initial training of at least 1 hour within the first 3 months~~
268 ~~after beginning employment. The training must include an~~
269 ~~overview of dementias and must provide instruction in basic~~
270 ~~skills for communicating with persons who have dementia.~~

271 ~~(c) In addition to the requirements of paragraphs (a) and~~



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272 ~~(b), an employee who will be providing direct care to a~~
273 ~~participant who has Alzheimer's disease or a dementia-related~~
274 ~~disorder must complete an additional 3 hours of training within~~
275 ~~9 months after beginning employment. This training must include,~~
276 ~~but is not limited to, the management of problem behaviors,~~
277 ~~information about promoting the patient's independence in~~
278 ~~activities of daily living, and instruction in skills for~~
279 ~~working with families and caregivers.~~

280 ~~(d) For certified nursing assistants, the required 4 hours~~
281 ~~of training shall be part of the total hours of training~~
282 ~~required annually.~~

283 ~~(e) For a health care practitioner as defined in s.~~
284 ~~456.001, continuing education hours taken as required by that~~
285 ~~practitioner's licensing board shall be counted toward the total~~
286 ~~of 4 hours.~~

287 ~~(f) For an employee who is a licensed health care~~
288 ~~practitioner as defined in s. 456.001, training that is~~
289 ~~sanctioned by that practitioner's licensing board shall be~~
290 ~~considered to be approved by the Department of Elderly Affairs.~~

291 ~~(g) The Department of Elderly Affairs or its designee must~~
292 ~~approve the required 1-hour and 3-hour training provided to~~
293 ~~employees or direct caregivers under this section. The~~
294 ~~department must consider for approval training offered in a~~
295 ~~variety of formats. The department shall keep a list of current~~
296 ~~providers who are approved to provide the 1-hour and 3-hour~~
297 ~~training. The department shall adopt rules to establish~~
298 ~~standards for the employees who are subject to this training,~~
299 ~~for the trainers, and for the training required in this section.~~

300 ~~(h) Upon completing any training described in this section,~~



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301 ~~the employee or direct caregiver shall be issued a certificate~~
302 ~~that includes the name of the training provider, the topic~~
303 ~~covered, and the date and signature of the training provider.~~
304 ~~The certificate is evidence of completion of training in the~~
305 ~~identified topic, and the employee or direct caregiver is not~~
306 ~~required to repeat training in that topic if the employee or~~
307 ~~direct caregiver changes employment to a different hospice or to~~
308 ~~a home health agency, assisted living facility, nursing home, or~~
309 ~~adult day care center.~~

310 Section 6. Subsections (2) through (8) of section 429.178,
311 Florida Statutes, are amended to read:

312 429.178 Special care for persons with Alzheimer's disease
313 or other related disorders.-

314 (2)~~(a)~~ An individual who is employed by a facility that
315 provides special care for residents who have Alzheimer's disease
316 or other related disorders, and who has regular contact with
317 such residents, must complete the dementia-specific training as
318 required in s. 430.5025 or training as provided for in this
319 section, whichever is greater.

320 (a) An individual who is employed by a facility that
321 provides special care for residents who have Alzheimer's disease
322 or other related disorders, and who has regular contact with
323 such residents, must complete up to 4 hours of initial dementia-
324 specific training developed or approved by the department. The
325 training must be completed within 3 months after beginning
326 employment and satisfy the core training requirements of s.
327 429.52(3)(g).

328 (b) A direct caregiver who is employed by a facility that
329 provides special care for residents who have Alzheimer's disease



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330 or other related disorders and provides direct care to such
331 residents must complete the required initial training and 4
332 additional hours of training developed or approved by the
333 department. The training must be completed within 9 months after
334 beginning employment and satisfy the core training requirements
335 of s. 429.52(3)(g).

336 (c) An individual who is employed by a facility that
337 provides special care for residents with Alzheimer's disease or
338 other related disorders, but who only has incidental contact
339 with such residents, must be given, at a minimum, general
340 information on interacting with individuals with Alzheimer's
341 disease or other related disorders, within 3 months after
342 beginning employment.

343 (3) In addition to the training required under subsection
344 (2), a direct caregiver must participate in a minimum of 4
345 contact hours of continuing education each calendar year. The
346 continuing education must include one or more topics included in
347 the dementia-specific training developed or approved by the
348 department, in which the caregiver has not received previous
349 training.

350 (4) Upon completing any training listed in subsection (2),
351 the employee or direct caregiver shall be issued a certificate
352 that includes the name of the training provider, the topic
353 covered, and the date and signature of the training provider.
354 The certificate is evidence of completion of training in the
355 identified topic, and the employee or direct caregiver is not
356 required to repeat training in that topic if the employee or
357 direct caregiver changes employment to a different facility. The
358 employee or direct caregiver must comply with other applicable



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359 continuing education requirements.

360 (5) The department, or its designee, shall approve the
361 initial and continuing education courses and providers.

362 (6) The department shall keep a current list of providers
363 who are approved to provide initial and continuing education for
364 staff of facilities that provide special care for persons with
365 Alzheimer's disease or other related disorders.

366 (7) Any facility more than 90 percent of whose residents
367 receive monthly optional supplementation payments is not
368 required to pay for the training and education programs required
369 under this section. A facility that has one or more such
370 residents must ~~shall~~ pay a reduced fee that is proportional to
371 the percentage of such residents in the facility. A facility
372 that does not have any residents who receive monthly optional
373 supplementation payments must pay a reasonable fee, as
374 established by the department, for such training and education
375 programs.

376 (8) The department shall adopt rules to establish standards
377 for trainers and training and to implement this section.

378 Section 7. Subsection (1) of section 429.52, Florida
379 Statutes, is amended to read:

380 429.52 Staff training and educational requirements.—

381 (1) Each new assisted living facility employee who has not
382 previously completed core training must attend a preservice
383 orientation provided by the facility before interacting with
384 residents. The preservice orientation must be at least 2 hours
385 in duration and cover topics that help the employee provide
386 responsible care and respond to the needs of facility residents.
387 Upon completion, the employee and the administrator of the



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388 facility must sign a statement that the employee completed the
389 required preservice orientation. The facility must keep the
390 signed statement in the employee's personnel record. Each
391 assisted living facility shall provide staff training as
392 required in s. 430.5025.

393 Section 8. Section 429.83, Florida Statutes, is amended to
394 read:

395 429.83 Residents with Alzheimer's disease or other related
396 disorders; training; certain disclosures.—

397 (1) An adult family-care home licensed under this part must
398 provide staff training as required in s. 430.5025.

399 (2) An adult family-care home licensed under this part
400 which claims that it provides special care for persons who have
401 Alzheimer's disease or other related disorders must Disclose in
402 its advertisements or in a separate document those services that
403 distinguish the care as being especially applicable to, or
404 suitable for, such persons. The home must give a copy of all
405 such advertisements or a copy of the document to each person who
406 requests information about programs and services for persons
407 with Alzheimer's disease or other related disorders offered by
408 the home and must maintain a copy of all such advertisements and
409 documents in its records. The agency shall examine all such
410 advertisements and documents in the home's records as part of
411 the license renewal procedure.

412 Section 9. Subsection (1) of section 429.917, Florida
413 Statutes, is amended to read:

414 429.917 Patients with Alzheimer's disease or other related
415 disorders; staff training requirements; certain disclosures.—

416 (1) An adult day care center licensed under this part must



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417 provide ~~the following~~ staff training as required in s. 430.5025+

418 ~~(a) Upon beginning employment with the facility, each~~
419 ~~employee must receive basic written information about~~
420 ~~interacting with participants who have Alzheimer's disease or~~
421 ~~dementia-related disorders.~~

422 ~~(b) In addition to the information provided under paragraph~~
423 ~~(a), newly hired adult day care center personnel who are~~
424 ~~expected to, or whose responsibilities require them to, have~~
425 ~~direct contact with participants who have Alzheimer's disease or~~
426 ~~dementia-related disorders must complete initial training of at~~
427 ~~least 1 hour within the first 3 months after beginning~~
428 ~~employment. The training must include an overview of dementias~~
429 ~~and must provide instruction in basic skills for communicating~~
430 ~~with persons who have dementia.~~

431 ~~(c) In addition to the requirements of paragraphs (a) and~~
432 ~~(b), an employee who will be providing direct care to a~~
433 ~~participant who has Alzheimer's disease or a dementia-related~~
434 ~~disorder must complete an additional 3 hours of training within~~
435 ~~9 months after beginning employment. This training must include,~~
436 ~~but is not limited to, the management of problem behaviors,~~
437 ~~information about promoting the participant's independence in~~
438 ~~activities of daily living, and instruction in skills for~~
439 ~~working with families and caregivers.~~

440 ~~(d) For certified nursing assistants, the required 4 hours~~
441 ~~of training shall be part of the total hours of training~~
442 ~~required annually.~~

443 ~~(e) For a health care practitioner as defined in s.~~
444 ~~456.001, continuing education hours taken as required by that~~
445 ~~practitioner's licensing board shall be counted toward the total~~



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446 ~~of 4 hours.~~

447 ~~(f) For an employee who is a licensed health care~~
448 ~~practitioner as defined in s. 456.001, training that is~~
449 ~~sanctioned by that practitioner's licensing board shall be~~
450 ~~considered to be approved by the Department of Elderly Affairs.~~

451 ~~(g) The Department of Elderly Affairs or its designee must~~
452 ~~approve the 1-hour and 3-hour training provided to employees and~~
453 ~~direct caregivers under this section. The department must~~
454 ~~consider for approval training offered in a variety of formats.~~
455 ~~The department shall keep a list of current providers who are~~
456 ~~approved to provide the 1-hour and 3-hour training. The~~
457 ~~department shall adopt rules to establish standards for the~~
458 ~~employees who are subject to this training, for the trainers,~~
459 ~~and for the training required in this section.~~

460 ~~(h) Upon completing any training described in this section,~~
461 ~~the employee or direct caregiver shall be issued a certificate~~
462 ~~that includes the name of the training provider, the topic~~
463 ~~covered, and the date and signature of the training provider.~~
464 ~~The certificate is evidence of completion of training in the~~
465 ~~identified topic, and the employee or direct caregiver is not~~
466 ~~required to repeat training in that topic if the employee or~~
467 ~~direct caregiver changes employment to a different adult day~~
468 ~~care center or to an assisted living facility, nursing home,~~
469 ~~home health agency, or hospice. The direct caregiver must comply~~
470 ~~with other applicable continuing education requirements.~~

471 ~~(i) An employee who is hired on or after July 1, 2004, must~~
472 ~~complete the training required by this section.~~

473 Section 10. This act shall take effect upon becoming law.

474 ===== T I T L E A M E N D M E N T =====



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475 And the title is amended as follows:

476 Delete everything before the enacting clause
477 and insert:

478 A bill to be entitled

479 An act relating to dementia-related staff training;
480 providing a short title; creating s. 430.5025, F.S.;
481 defining terms; requiring certain entities, as a
482 condition of licensure, to provide specified dementia-
483 related training for new employees within a specified
484 timeframe; requiring certain employees to receive
485 additional dementia-related training under certain
486 circumstances within a specified timeframe; providing
487 requirements for the training; requiring annual
488 dementia-related training for certain employees;
489 requiring certain employees to receive additional
490 training developed or approved by the Department of
491 Elder Affairs under certain circumstances; providing
492 for a timeframe for existing employees to comply with
493 the training requirement; providing for a timeframe
494 for existing employees to comply with the training
495 requirement; providing that such additional training
496 counts toward a certified nursing assistant's total
497 annual training; authorizing certain health care
498 practitioners to count certain continuing education
499 hours toward the dementia-related training
500 requirements under certain circumstances; requiring
501 the department to approve such continuing education
502 hours to satisfy the dementia-related training
503 requirements; requiring the department or its designee



504 to develop a registration process for training
505 providers; specifying requirements for such
506 registration; requiring the department or its designee
507 to issue unique identifiers to approved training
508 providers; requiring the department or its designee to
509 approve courses used to satisfy the dementia-related
510 training requirements; requiring training providers to
511 develop certain assessments and passing scores for a
512 specified purpose; requiring certain employees to take
513 and pass such assessments upon completion of the
514 training; requiring training providers to issue such
515 employees a certificate upon completing the training
516 and passing the assessments; providing requirements
517 for the certificate; providing that certain employees
518 do not need to repeat certain training when changing
519 employment, under certain circumstances; requiring
520 licensees to maintain copies of training
521 certifications for each of their employees and direct
522 care workers; requiring licensees to make such copies
523 available for inspection for a specified purpose;
524 requiring the department to adopt rules; amending ss.
525 400.1755, 400.4785, 400.6045, 429.178, 429.52, 429.83,
526 and 429.917, F.S.; revising dementia-related staff
527 training requirements for nursing homes, home health
528 agencies, hospices, facilities that provide special
529 care for persons with Alzheimer's disease or related
530 disorders, assisted living facilities, adult family-
531 care homes, and adult day care centers, respectively,
532 to conform to changes made by the act; providing an



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533

effective date.



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LEGISLATIVE ACTION

Senate

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House

The Committee on Children, Families, and Elder Affairs (Gibson) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause
and insert:

Section 1. This act may be cited as the "Florida
Alzheimer's Disease and Dementia Training Act."

Section 2. Section 430.5025, Florida Statutes, is created
to read:

430.5025 Care for persons with Alzheimer's disease or a
related disorder; staff training.-



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11 (1) As used in this section, the term:
12 (a) "Department" means the Department of Elderly Affairs.
13 (b) "Direct care worker" means an individual who, as part
14 of his or her employment duties, provides or is expected to
15 provide direct contact assistance with personal care or
16 activities of daily living to clients, patients, or residents of
17 any facility licensed under part II, part III, or part IV of
18 chapter 400 or chapter 429.
19 (c) "Employee" means any staff member, contracted staff, or
20 independent contractor hired or referred by a licensee who is
21 required to have a level 2 background screening as required by
22 s. 408.809(1)(e). The term includes, but is not limited to,
23 direct care workers; staff responsible for housekeeping, the
24 front desk, maintenance, and other administrative functions; and
25 companions or homemakers.
26 (d) "Licensee" means a person or an entity licensed under
27 part II, part III, or part IV of chapter 400 or chapter 429.
28 (2) By January 1, 2022, the department or its designee must
29 develop or approve the courses that licensees may use to satisfy
30 the training requirements under this section. The department or
31 its designee must develop or approve training offered in a
32 variety of formats and languages, including, but not limited to,
33 Internet-based training, videos, teleconferencing, and classroom
34 instruction. The department or its designee may approve any
35 existing training course or curriculum that is being used by
36 licensees if it meets the requirements of this section.
37 (3) The department or its designee shall develop a process
38 for registering training providers and maintain a list of those
39 providers approved to provide training required under this



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40 section. The process must take into account those training
41 providers who are already approved and include a method to
42 verify that all training providers are actively providing
43 training required under this section. To be approved, a training
44 provider must have at least 2 years of experience related to
45 Alzheimer's disease or related disorders, gerontology, health
46 care, or a related field. The department or its designee shall
47 issue each approved training provider a unique registration
48 identifier.

49 (4) Upon completion of any training under this section, the
50 training provider must issue the employee or direct care worker
51 a certificate that includes the training provider's name and
52 unique identifier, the topic covered in the training, the date
53 of completion, and the signature of the training provider. The
54 certificate is evidence of completion of the training and
55 assessment in the identified topic, and the employee or direct
56 care worker is not required to repeat training in that topic if
57 he or she changes employment to a different licensee, but he or
58 she must comply with any applicable continuing education
59 requirements under this section. Copies of the employee's or
60 direct care worker's training certificate issued under this
61 section must be available for inspection in each facility in
62 which he or she may be employed in order to meet the
63 requirements of that facility's licensure.

64 (5) Licensees must provide to each of their employees 1
65 hour of dementia-related training that includes methods for
66 interacting with individuals with Alzheimer's disease or a
67 related disorder and for identifying warning signs of dementia.

68 (a) A licensee must require an employee to complete the



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69 training within 30 days after employment begins. Employees hired
70 on or before the effective date of this act must be required to
71 complete the training within 3 months after the training is
72 developed or approved pursuant to subsection (2).

73 (b) A licensee must maintain a copy of the employee's
74 training certificate in the employee's personnel records.

75 (c) An employee who has completed the training required by
76 this subsection is not required to repeat the course upon
77 changing employment to a different licensee if he or she has a
78 copy of the training certificate.

79 (6) In addition to the training requirements of subsection
80 (5), licensees must require all employees who are direct care
81 workers to receive at least 3 hours of evidence-based training
82 developed or approved pursuant to subsection (2). The training
83 must be completed within the first 4 months after employment
84 begins and must include, but need not be limited to, an overview
85 of Alzheimer's disease and related disorders and person-centered
86 care, assessment and care planning, activities of daily living,
87 and dementia-related behaviors and communication for clients,
88 patients, and residents with Alzheimer's disease or a related
89 disorder. Every 2 calendar years thereafter, the licensee must
90 require all of its direct care workers to receive at least 2
91 hours of continuing education, developed or approved pursuant to
92 subsection (2), on these topics and any related changes in state
93 or federal law.

94 (a) Employees hired on or before the effective date of this
95 act must complete the training under this subsection within 6
96 months after the training is developed or approved pursuant to
97 subsection (2) if they have not received any applicable



98 dementia-related training within the preceding calendar year.

99 (b) Completion of the 2 hours of continuing education under
100 this subsection counts toward a certified nursing assistant's
101 annual training requirements.

102 (c) Continuing education under this subsection may count
103 toward core training requirements as described under s. 429.52.

104 (7) In addition to the training requirements of subsections
105 (5) and (6), if a licensee advertises that it provides special
106 care for individuals with Alzheimer's disease or a related
107 disorder which includes direct care to such individuals, the
108 licensee must require its direct care workers to complete 4
109 hours of training developed or approved pursuant to subsection
110 (2). This training must be completed within 4 months after
111 employment begins and shall count toward a certified nursing
112 assistant's annual training requirements.

113 (8) If a health care practitioner as defined in s. 456.001
114 completes continuing education hours as required by that
115 practitioner's licensing board, he or she may count those
116 continuing education hours toward satisfaction of the training
117 requirements of subsections (5) and (6) if the course curriculum
118 covers the topics required under those subsections. The
119 department must approve such continuing education hours for
120 purposes of satisfying the training requirements of subsections
121 (5) and (6).

122 Section 3. Section 400.1755, Florida Statutes, is amended
123 to read:

124 400.1755 Care for persons with Alzheimer's disease or
125 related disorders; staff training requirements.-

126 ~~(1)~~ As a condition of licensure, facilities licensed under



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127 this part must provide to each of their employees training as
128 required in s. 430.5025, ~~upon beginning employment, basic~~
129 ~~written information about interacting with persons with~~
130 ~~Alzheimer's disease or a related disorder.~~

131 ~~(2) All employees who are expected to, or whose~~
132 ~~responsibilities require them to, have direct contact with~~
133 ~~residents with Alzheimer's disease or a related disorder must,~~
134 ~~in addition to being provided the information required in~~
135 ~~subsection (1), also have an initial training of at least 1 hour~~
136 ~~completed in the first 3 months after beginning employment. This~~
137 ~~training must include, but is not limited to, an overview of~~
138 ~~dementias and must provide basic skills in communicating with~~
139 ~~persons with dementia.~~

140 ~~(3) An individual who provides direct care shall be~~
141 ~~considered a direct caregiver and must complete the required~~
142 ~~initial training and an additional 3 hours of training within 9~~
143 ~~months after beginning employment. This training shall include,~~
144 ~~but is not limited to, managing problem behaviors, promoting the~~
145 ~~resident's independence in activities of daily living, and~~
146 ~~skills in working with families and caregivers.~~

147 ~~(a) The required 4 hours of training for certified nursing~~
148 ~~assistants are part of the total hours of training required~~
149 ~~annually.~~

150 ~~(b) For a health care practitioner as defined in s.~~
151 ~~456.001, continuing education hours taken as required by that~~
152 ~~practitioner's licensing board shall be counted toward this~~
153 ~~total of 4 hours.~~

154 ~~(4) For an employee who is a licensed health care~~
155 ~~practitioner as defined in s. 456.001, training that is~~



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156 ~~sanctioned by that practitioner's licensing board shall be~~
157 ~~considered to be approved by the Department of Elderly Affairs.~~

158 ~~(5) The Department of Elderly Affairs or its designee must~~
159 ~~approve the initial and continuing training provided in the~~
160 ~~facilities. The department must approve training offered in a~~
161 ~~variety of formats, including, but not limited to, Internet-~~
162 ~~based training, videos, teleconferencing, and classroom~~
163 ~~instruction. The department shall keep a list of current~~
164 ~~providers who are approved to provide initial and continuing~~
165 ~~training. The department shall adopt rules to establish~~
166 ~~standards for the trainers and the training required in this~~
167 ~~section.~~

168 ~~(6) Upon completing any training listed in this section,~~
169 ~~the employee or direct caregiver shall be issued a certificate~~
170 ~~that includes the name of the training provider, the topic~~
171 ~~covered, and the date and signature of the training provider.~~
172 ~~The certificate is evidence of completion of training in the~~
173 ~~identified topic, and the employee or direct caregiver is not~~
174 ~~required to repeat training in that topic if the employee or~~
175 ~~direct caregiver changes employment to a different facility or~~
176 ~~to an assisted living facility, home health agency, adult day~~
177 ~~care center, or adult family care home. The direct caregiver~~
178 ~~must comply with other applicable continuing education~~
179 ~~requirements.~~

180 Section 4. Section 400.4785, Florida Statutes, is amended
181 to read:

182 400.4785 Patients with Alzheimer's disease or other related
183 disorders; staff training requirements; certain disclosures.—

184 (1) A home health agency must provide ~~the following~~ staff



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185 training as required in s. 430.5025:

186 ~~(a) Upon beginning employment with the agency, each~~
187 ~~employee must receive basic written information about~~
188 ~~interacting with participants who have Alzheimer's disease or~~
189 ~~dementia-related disorders.~~

190 ~~(b) In addition to the information provided under paragraph~~
191 ~~(a), newly hired home health agency personnel who will be~~
192 ~~providing direct care to patients must complete 2 hours of~~
193 ~~training in Alzheimer's disease and dementia-related disorders~~
194 ~~within 9 months after beginning employment with the agency. This~~
195 ~~training must include, but is not limited to, an overview of~~
196 ~~dementia, a demonstration of basic skills in communicating with~~
197 ~~persons who have dementia, the management of problem behaviors,~~
198 ~~information about promoting the client's independence in~~
199 ~~activities of daily living, and instruction in skills for~~
200 ~~working with families and caregivers.~~

201 ~~(c) For certified nursing assistants, the required 2 hours~~
202 ~~of training shall be part of the total hours of training~~
203 ~~required annually.~~

204 ~~(d) For a health care practitioner as defined in s.~~
205 ~~456.001, continuing education hours taken as required by that~~
206 ~~practitioner's licensing board shall be counted toward the total~~
207 ~~of 2 hours.~~

208 ~~(e) For an employee who is a licensed health care~~
209 ~~practitioner as defined in s. 456.001, training that is~~
210 ~~sanctioned by that practitioner's licensing board shall be~~
211 ~~considered to be approved by the Department of Elderly Affairs.~~

212 ~~(f) The Department of Elderly Affairs, or its designee,~~
213 ~~must approve the required training. The department must consider~~



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214 ~~for approval training offered in a variety of formats. The~~
215 ~~department shall keep a list of current providers who are~~
216 ~~approved to provide the 2-hour training. The department shall~~
217 ~~adopt rules to establish standards for the employees who are~~
218 ~~subject to this training, for the trainers, and for the training~~
219 ~~required in this section.~~

220 ~~(g) Upon completing the training listed in this section,~~
221 ~~the employee shall be issued a certificate that states that the~~
222 ~~training mandated under this section has been received. The~~
223 ~~certificate shall be dated and signed by the training provider.~~
224 ~~The certificate is evidence of completion of this training, and~~
225 ~~the employee is not required to repeat this training if the~~
226 ~~employee changes employment to a different home health agency.~~

227 ~~(2)(h)~~ A licensed home health agency whose unduplicated
228 census during the most recent calendar year was composed
229 ~~comprised~~ of at least 90 percent of individuals aged 21 years or
230 younger at the date of admission is exempt from the training
231 requirements in this section.

232 ~~(3)(2)~~ An agency licensed under this part which claims that
233 it provides special care for persons who have Alzheimer's
234 disease or other related disorders must disclose in its
235 advertisements or in a separate document those services that
236 distinguish the care as being especially applicable to, or
237 suitable for, such persons. The agency must give a copy of all
238 such advertisements or a copy of the document to each person who
239 requests information about the agency and must maintain a copy
240 of all such advertisements and documents in its records. The
241 Agency for Health Care Administration shall examine all such
242 advertisements and documents in the agency's records as part of



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243 the license renewal procedure.

244 Section 5. Subsection (1) of section 400.6045, Florida
245 Statutes, is amended to read:

246 400.6045 Patients with Alzheimer's disease or other related
247 disorders; staff training requirements; certain disclosures.—

248 (1) A hospice licensed under this part must provide ~~the~~
249 ~~following~~ staff training as required in s. 430.5025;

250 ~~(a) Upon beginning employment with the agency, each~~
251 ~~employee must receive basic written information about~~
252 ~~interacting with persons who have Alzheimer's disease or~~
253 ~~dementia-related disorders.~~

254 ~~(b) In addition to the information provided under paragraph~~
255 ~~(a), employees who are expected to, or whose responsibilities~~
256 ~~require them to, have direct contact with participants who have~~
257 ~~Alzheimer's disease or dementia-related disorders must complete~~
258 ~~initial training of at least 1 hour within the first 3 months~~
259 ~~after beginning employment. The training must include an~~
260 ~~overview of dementias and must provide instruction in basic~~
261 ~~skills for communicating with persons who have dementia.~~

262 ~~(c) In addition to the requirements of paragraphs (a) and~~
263 ~~(b), an employee who will be providing direct care to a~~
264 ~~participant who has Alzheimer's disease or a dementia-related~~
265 ~~disorder must complete an additional 3 hours of training within~~
266 ~~9 months after beginning employment. This training must include,~~
267 ~~but is not limited to, the management of problem behaviors,~~
268 ~~information about promoting the patient's independence in~~
269 ~~activities of daily living, and instruction in skills for~~
270 ~~working with families and caregivers.~~

271 ~~(d) For certified nursing assistants, the required 4 hours~~



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272 ~~of training shall be part of the total hours of training~~
273 ~~required annually.~~

274 ~~(e) For a health care practitioner as defined in s.~~
275 ~~456.001, continuing education hours taken as required by that~~
276 ~~practitioner's licensing board shall be counted toward the total~~
277 ~~of 4 hours.~~

278 ~~(f) For an employee who is a licensed health care~~
279 ~~practitioner as defined in s. 456.001, training that is~~
280 ~~sanctioned by that practitioner's licensing board shall be~~
281 ~~considered to be approved by the Department of Elderly Affairs.~~

282 ~~(g) The Department of Elderly Affairs or its designee must~~
283 ~~approve the required 1-hour and 3-hour training provided to~~
284 ~~employees or direct caregivers under this section. The~~
285 ~~department must consider for approval training offered in a~~
286 ~~variety of formats. The department shall keep a list of current~~
287 ~~providers who are approved to provide the 1-hour and 3-hour~~
288 ~~training. The department shall adopt rules to establish~~
289 ~~standards for the employees who are subject to this training,~~
290 ~~for the trainers, and for the training required in this section.~~

291 ~~(h) Upon completing any training described in this section,~~
292 ~~the employee or direct caregiver shall be issued a certificate~~
293 ~~that includes the name of the training provider, the topic~~
294 ~~covered, and the date and signature of the training provider.~~
295 ~~The certificate is evidence of completion of training in the~~
296 ~~identified topic, and the employee or direct caregiver is not~~
297 ~~required to repeat training in that topic if the employee or~~
298 ~~direct caregiver changes employment to a different hospice or to~~
299 ~~a home health agency, assisted living facility, nursing home, or~~
300 ~~adult day care center.~~



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301 Section 6. Subsections (2) through (8) of section 429.178,
302 Florida Statutes, are amended to read:

303 429.178 Special care for persons with Alzheimer's disease
304 or other related disorders.-

305 ~~(2)(a) An individual who is employed by a facility that~~
306 ~~provides special care for residents who have Alzheimer's disease~~
307 ~~or other related disorders, and who has regular contact with~~
308 ~~such residents, must complete the up to 4 hours of initial~~
309 ~~dementia-specific training as required in s. 430.5025 developed~~
310 ~~or approved by the department. The training must be completed~~
311 ~~within 3 months after beginning employment and satisfy the core~~
312 ~~training requirements of s. 429.52(3)(g).~~

313 ~~(b) A direct caregiver who is employed by a facility that~~
314 ~~provides special care for residents who have Alzheimer's disease~~
315 ~~or other related disorders and provides direct care to such~~
316 ~~residents must complete the required initial training and 4~~
317 ~~additional hours of training developed or approved by the~~
318 ~~department. The training must be completed within 9 months after~~
319 ~~beginning employment and satisfy the core training requirements~~
320 ~~of s. 429.52(3)(g).~~

321 ~~(c) An individual who is employed by a facility that~~
322 ~~provides special care for residents with Alzheimer's disease or~~
323 ~~other related disorders, but who only has incidental contact~~
324 ~~with such residents, must be given, at a minimum, general~~
325 ~~information on interacting with individuals with Alzheimer's~~
326 ~~disease or other related disorders, within 3 months after~~
327 ~~beginning employment.~~

328 ~~(3) In addition to the training required under subsection~~
329 ~~(2), a direct caregiver must participate in a minimum of 4~~



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330 ~~contact hours of continuing education each calendar year. The~~
331 ~~continuing education must include one or more topics included in~~
332 ~~the dementia-specific training developed or approved by the~~
333 ~~department, in which the caregiver has not received previous~~
334 ~~training.~~

335 ~~(4) Upon completing any training listed in subsection (2),~~
336 ~~the employee or direct caregiver shall be issued a certificate~~
337 ~~that includes the name of the training provider, the topic~~
338 ~~covered, and the date and signature of the training provider.~~
339 ~~The certificate is evidence of completion of training in the~~
340 ~~identified topic, and the employee or direct caregiver is not~~
341 ~~required to repeat training in that topic if the employee or~~
342 ~~direct caregiver changes employment to a different facility. The~~
343 ~~employee or direct caregiver must comply with other applicable~~
344 ~~continuing education requirements.~~

345 ~~(5) The department, or its designee, shall approve the~~
346 ~~initial and continuing education courses and providers.~~

347 ~~(6) The department shall keep a current list of providers~~
348 ~~who are approved to provide initial and continuing education for~~
349 ~~staff of facilities that provide special care for persons with~~
350 ~~Alzheimer's disease or other related disorders.~~

351 ~~(3)(7)~~ Any facility more than 90 percent of whose residents
352 receive monthly optional supplementation payments is not
353 required to pay for the training and education programs required
354 under this section. A facility that has one or more such
355 residents must ~~shall~~ pay a reduced fee that is proportional to
356 the percentage of such residents in the facility. A facility
357 that does not have any residents who receive monthly optional
358 supplementation payments must pay a reasonable fee, as



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359 established by the department, for such training and education
360 programs.

361 (4)~~(8)~~ The department shall adopt rules to establish
362 standards for trainers and training and to implement this
363 section.

364 Section 7. Subsection (1) of section 429.52, Florida
365 Statutes, is amended to read:

366 429.52 Staff training and educational requirements.—

367 (1) Each new assisted living facility employee who has not
368 previously completed core training must attend a preservice
369 orientation provided by the facility before interacting with
370 residents. The preservice orientation must be at least 2 hours
371 in duration and cover topics that help the employee provide
372 responsible care and respond to the needs of facility residents.
373 Upon completion, the employee and the administrator of the
374 facility must sign a statement that the employee completed the
375 required preservice orientation. The facility must keep the
376 signed statement in the employee's personnel record. Each
377 assisted living facility shall provide staff training as
378 required in s. 430.5025.

379 Section 8. Section 429.83, Florida Statutes, is amended to
380 read:

381 429.83 Residents with Alzheimer's disease or other related
382 disorders; training; certain disclosures.—

383 (1) An adult family-care home licensed under this part must
384 provide staff training as required in s. 430.5025.

385 (2) An adult family-care home licensed under this part
386 which claims that it provides special care for persons who have
387 Alzheimer's disease or other related disorders must Disclose in



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388 its advertisements or in a separate document those services that
389 distinguish the care as being especially applicable to, or
390 suitable for, such persons. The home must give a copy of all
391 such advertisements or a copy of the document to each person who
392 requests information about programs and services for persons
393 with Alzheimer's disease or other related disorders offered by
394 the home and must maintain a copy of all such advertisements and
395 documents in its records. The agency shall examine all such
396 advertisements and documents in the home's records as part of
397 the license renewal procedure.

398 Section 9. Subsection (1) of section 429.917, Florida
399 Statutes, is amended to read:

400 429.917 Patients with Alzheimer's disease or other related
401 disorders; staff training requirements; certain disclosures.—

402 (1) An adult day care center licensed under this part must
403 provide ~~the following~~ staff training as required in s. 430.5025+

404 ~~(a) Upon beginning employment with the facility, each~~
405 ~~employee must receive basic written information about~~
406 ~~interacting with participants who have Alzheimer's disease or~~
407 ~~dementia-related disorders.~~

408 ~~(b) In addition to the information provided under paragraph~~
409 ~~(a), newly hired adult day care center personnel who are~~
410 ~~expected to, or whose responsibilities require them to, have~~
411 ~~direct contact with participants who have Alzheimer's disease or~~
412 ~~dementia-related disorders must complete initial training of at~~
413 ~~least 1 hour within the first 3 months after beginning~~
414 ~~employment. The training must include an overview of dementias~~
415 ~~and must provide instruction in basic skills for communicating~~
416 ~~with persons who have dementia.~~



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417 ~~(c) In addition to the requirements of paragraphs (a) and~~
418 ~~(b), an employee who will be providing direct care to a~~
419 ~~participant who has Alzheimer's disease or a dementia-related~~
420 ~~disorder must complete an additional 3 hours of training within~~
421 ~~9 months after beginning employment. This training must include,~~
422 ~~but is not limited to, the management of problem behaviors,~~
423 ~~information about promoting the participant's independence in~~
424 ~~activities of daily living, and instruction in skills for~~
425 ~~working with families and caregivers.~~

426 ~~(d) For certified nursing assistants, the required 4 hours~~
427 ~~of training shall be part of the total hours of training~~
428 ~~required annually.~~

429 ~~(e) For a health care practitioner as defined in s.~~
430 ~~456.001, continuing education hours taken as required by that~~
431 ~~practitioner's licensing board shall be counted toward the total~~
432 ~~of 4 hours.~~

433 ~~(f) For an employee who is a licensed health care~~
434 ~~practitioner as defined in s. 456.001, training that is~~
435 ~~sanctioned by that practitioner's licensing board shall be~~
436 ~~considered to be approved by the Department of Elderly Affairs.~~

437 ~~(g) The Department of Elderly Affairs or its designee must~~
438 ~~approve the 1-hour and 3-hour training provided to employees and~~
439 ~~direct caregivers under this section. The department must~~
440 ~~consider for approval training offered in a variety of formats.~~
441 ~~The department shall keep a list of current providers who are~~
442 ~~approved to provide the 1-hour and 3-hour training. The~~
443 ~~department shall adopt rules to establish standards for the~~
444 ~~employees who are subject to this training, for the trainers,~~
445 ~~and for the training required in this section.~~



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446 ~~(h) Upon completing any training described in this section,~~
447 ~~the employee or direct caregiver shall be issued a certificate~~
448 ~~that includes the name of the training provider, the topic~~
449 ~~covered, and the date and signature of the training provider.~~
450 ~~The certificate is evidence of completion of training in the~~
451 ~~identified topic, and the employee or direct caregiver is not~~
452 ~~required to repeat training in that topic if the employee or~~
453 ~~direct caregiver changes employment to a different adult day~~
454 ~~care center or to an assisted living facility, nursing home,~~
455 ~~home health agency, or hospice. The direct caregiver must comply~~
456 ~~with other applicable continuing education requirements.~~

457 ~~(i) An employee who is hired on or after July 1, 2004, must~~
458 ~~complete the training required by this section.~~

459 Section 10. This act shall take effect October 1, 2021.

460
461 ===== T I T L E A M E N D M E N T =====

462 And the title is amended as follows:

463 Delete everything before the enacting clause
464 and insert:

465 A bill to be entitled
466 An act relating to dementia-related staff training;
467 providing a short title; creating s. 430.5025, F.S.;
468 defining terms; requiring the Department of Elderly
469 Affairs or its designee to develop or approve certain
470 dementia-related training by a specified date;
471 requiring such training to be offered in a variety of
472 formats; authorizing the department or its designee to
473 approve existing training courses and curricula if
474 they meet certain requirements; requiring the



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475 department or its designee to develop a registration
476 process for training providers; specifying
477 requirements for such registration; requiring the
478 department or its designee to issue unique identifiers
479 to approved training providers; requiring training
480 providers to issue employees a certificate upon
481 completing the training and passing the assessments;
482 providing requirements for the certificate; providing
483 that certain employees do not need to repeat certain
484 training when changing employment, under certain
485 circumstances; providing that copies of training
486 certificates for employees and direct care workers
487 must be available for inspection as a requirement of
488 facility licensure; requiring certain entities to
489 provide specified dementia-related training for new
490 employees within a specified timeframe; requiring such
491 entities to maintain copies of the employees' training
492 certificates; providing that employees who complete
493 such training do not need to repeat the training upon
494 change of employment under certain circumstances;
495 requiring certain employees to receive additional
496 dementia-related training under certain circumstances
497 within a specified timeframe; providing requirements
498 for the training; requiring biennial dementia-related
499 training for certain employees; providing that such
500 training counts toward a certified nursing assistant's
501 annual training requirements; providing that such
502 training may be used to count toward certain core
503 training requirements; requiring certain employees to



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504 receive additional training within a specified
505 timeframe if the employing entity advertises that it
506 provides certain special care for individuals with
507 Alzheimer's disease or related disorders; providing
508 that such additional training counts toward a
509 certified nursing assistant's annual training
510 requirements; authorizing certain health care
511 practitioners to count certain continuing education
512 hours toward the dementia-related training
513 requirements under certain circumstances; requiring
514 the department to approve such continuing education
515 hours to satisfy the dementia-related training
516 requirements; amending ss. 400.1755, 400.4785,
517 400.6045, 429.178, 429.52, 429.83, and 429.917, F.S.;
518 revising dementia-related staff training requirements
519 for nursing homes, home health agencies, hospices,
520 facilities that provide special care for persons with
521 Alzheimer's disease or related disorders, assisted
522 living facilities, adult family-care homes, and adult
523 day care centers, respectively, to conform to changes
524 made by the act; providing an effective date.

By the Committee on Health Policy; and Senators Gibson, Baxley,
and Farmer

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1 A bill to be entitled
2 An act relating to dementia-related staff training;
3 providing a short title; creating s. 430.5025, F.S.;
4 defining terms; requiring certain entities, as a
5 condition of licensure, to provide specified dementia-
6 related training for new employees within a specified
7 timeframe; requiring certain employees to receive
8 additional dementia-related training under certain
9 circumstances within a specified timeframe; providing
10 requirements for the training; requiring annual
11 dementia-related training for certain employees;
12 requiring certain employees to receive additional
13 training developed or approved by the Department of
14 Elderly Affairs under certain circumstances; providing
15 that such additional training counts toward a
16 certified nursing assistant's total annual training;
17 authorizing certain health care practitioners to count
18 certain continuing education hours toward the
19 dementia-related training requirements under certain
20 circumstances; requiring the department to approve
21 such continuing education hours to satisfy the
22 dementia-related training requirements; requiring the
23 department or its designee to develop a registration
24 process for training providers; specifying
25 requirements for such registration; requiring the
26 department or its designee to issue unique identifiers
27 to approved training providers; requiring the
28 department or its designee to approve courses used to
29 satisfy the dementia-related training requirements;

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30 requiring such courses to be approved in various;
31 requiring training providers to develop certain
32 assessments and passing scores for a specified
33 purpose; requiring certain employees to take and pass
34 such assessments upon completion of the training;
35 requiring training providers to issue such employees a
36 certificate upon completing the training and passing
37 the assessments; providing requirements for the
38 certificate; providing that certain employees do not
39 need to repeat certain training when changing
40 employment, under certain circumstances; requiring
41 licensees to maintain copies of training
42 certifications for each of their employees and direct
43 care workers; requiring licensees to make such copies
44 available for inspection for a specified purpose;
45 requiring the department to adopt rules; amending ss.
46 400.1755, 400.4785, 400.6045, 429.178, 429.52, 429.83,
47 and 429.917, F.S.; revising dementia-related staff
48 training requirements for nursing homes, home health
49 agencies, hospices, facilities that provide special
50 care for persons with Alzheimer's disease or related
51 disorders, assisted living facilities, adult family-
52 care homes, and adult day care centers, respectively,
53 to conform to changes made by the act; providing an
54 effective date.

55
56 Be It Enacted by the Legislature of the State of Florida:

57
58 Section 1. This act may be cited as the "Florida

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59 Alzheimer's Disease and Dementia Training Act."

60 Section 2. Section 430.5025, Florida Statutes, is created
61 to read:

62 430.5025 Care for persons with Alzheimer's disease or a
63 related disorder; staff training.-

64 (1) As used in this section, the term:

65 (a) "Department" means the Department of Elderly Affairs.

66 (b) "Direct care worker" means an individual who, as part
67 of his or her employment duties, provides or has access to
68 provide direct contact assistance with personal care or
69 activities of daily living to clients, patients, or residents of
70 any facility licensed under part II, part III, or part IV of
71 chapter 400 or chapter 429.

72 (c) "Employee" means any staff member who has regular
73 contact or incidental contact on a recurring basis with clients,
74 patients, or residents of a facility licensed under part II,
75 part III, or part IV of chapter 400 or chapter 429. The term
76 includes, but is not limited to, direct care workers; staff
77 responsible for housekeeping, the front desk, maintenance, and
78 other administrative functions; and any other individuals who
79 may have regular contact or incidental contact on a recurring
80 basis with clients, patients, or residents.

81 (d) "Licensee" means a person or an entity licensed under
82 part II, part III, or part IV of chapter 400 or chapter 429.

83 (2) As a condition of licensure, licensees must provide to
84 each of their employees, within 30 days after their employment
85 begins, 1 hour of dementia-related training, which must include
86 methods for interacting with persons with Alzheimer's disease or
87 a related disorder and for identifying warning signs of

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88 dementia.

89 (3) In addition to the training requirements of subsection
90 (2), licensees must require all employees who are direct care
91 workers to receive at least 3 hours of evidence-based training
92 if the direct care workers are expected to, or their
93 responsibilities require them to, have direct contact with
94 clients, patients, or residents with Alzheimer's disease or a
95 related disorder or with populations that are at a greater risk
96 for Alzheimer's disease or a related disorder. The training must
97 be completed within the first 3 months after employment begins
98 and must include, but need not be limited to, an overview of
99 Alzheimer's disease and related disorders and person-centered
100 care, assessment and care planning, activities of daily living,
101 and dementia-related behaviors and communication for clients,
102 patients, and residents with Alzheimer's disease or a related
103 disorder. Each calendar year thereafter, the licensee must
104 require all of its direct care workers to receive at least 4
105 hours of continuing education, approved by the department, on
106 these topics and any related changes in state or federal law.

107 (4) If a licensee advertises that it provides special care
108 for individuals with Alzheimer's disease or a related disorder
109 which includes direct care to such individuals, the licensee
110 must require its direct care workers to complete 4 hours of
111 training developed or approved by the department. This training
112 is in addition to the training requirements of subsections (2)
113 and (3) and must be completed within 4 months after employment
114 begins.

115 (5) Completion of the 4 hours of training developed or
116 approved by the department under subsection (4) shall count

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117 toward a certified nursing assistant's annual training
118 requirements.

119 (6) If a health care practitioner as defined in s. 456.001
120 completes continuing education hours as required by that
121 practitioner's licensing board, he or she may count those
122 continuing education hours toward satisfaction of the training
123 requirements of subsections (3) and (4) if the course curriculum
124 covers the topics required under those subsections. The
125 department must approve such continuing education hours for
126 purposes of satisfying the training requirements of subsections
127 (3) and (4).

128 (7) The department or its designee shall develop a process
129 for registering training providers and maintain a list of those
130 providers approved to provide training required under this
131 section. To be approved, a training provider must have at least
132 2 years of experience related to Alzheimer's disease or related
133 disorders, gerontology, health care, or a related field. The
134 department or its designee shall issue each approved training
135 provider a unique registration identifier.

136 (8) The department or its designee shall approve the
137 courses that licensees may use to satisfy the training
138 requirements under this section. The department or its designee
139 must approve training offered in a variety of formats,
140 including, but not limited to, Internet-based training, videos,
141 teleconferencing, and classroom instruction.

142 (9) For each training topic required under this section,
143 the training provider shall develop an assessment that measures
144 an individual's understanding of the topic and indicate a
145 minimum required score to pass the assessment. Upon completion

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146 of any training under this section, the employee or direct care
147 worker must pass the related assessment. If an employee or a
148 direct care worker completes a training and passes the related
149 assessment, the training provider must issue the employee or
150 direct care worker a certificate that includes the training
151 provider's name and unique identifier, the topic covered in the
152 training, the date of completion, and the signature of the
153 training provider. The certificate is evidence of completion of
154 the training and assessment in the identified topic, and the
155 employee or direct care worker is not required to repeat
156 training in that topic if he or she changes employment to a
157 different licensee, but he or she must comply with any
158 applicable continuing education requirements under this section.
159 Licensees must maintain copies of certificates issued to each of
160 their employees or direct care workers under this section and
161 must make them available for inspection to meet the requirements
162 of licensure.

163 (10) The department shall adopt rules to implement this
164 section.

165 Section 3. Section 400.1755, Florida Statutes, is amended
166 to read:

167 400.1755 Care for persons with Alzheimer's disease or
168 related disorders; staff training requirements.-

169 ~~(1) As a condition of licensure, facilities licensed under~~
170 ~~this part must provide to each of their employees training as~~
171 ~~required in s. 430.5025, upon beginning employment, basic~~
172 ~~written information about interacting with persons with~~
173 ~~Alzheimer's disease or a related disorder.~~

174 ~~(2) All employees who are expected to, or whose~~

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175 ~~responsibilities require them to, have direct contact with~~
176 ~~residents with Alzheimer's disease or a related disorder must,~~
177 ~~in addition to being provided the information required in~~
178 ~~subsection (1), also have an initial training of at least 1 hour~~
179 ~~completed in the first 3 months after beginning employment. This~~
180 ~~training must include, but is not limited to, an overview of~~
181 ~~dementias and must provide basic skills in communicating with~~
182 ~~persons with dementia.~~

183 ~~(3) An individual who provides direct care shall be~~
184 ~~considered a direct caregiver and must complete the required~~
185 ~~initial training and an additional 3 hours of training within 9~~
186 ~~months after beginning employment. This training shall include,~~
187 ~~but is not limited to, managing problem behaviors, promoting the~~
188 ~~resident's independence in activities of daily living, and~~
189 ~~skills in working with families and caregivers.~~

190 ~~(a) The required 4 hours of training for certified nursing~~
191 ~~assistants are part of the total hours of training required~~
192 ~~annually.~~

193 ~~(b) For a health care practitioner as defined in s.~~
194 ~~456.001, continuing education hours taken as required by that~~
195 ~~practitioner's licensing board shall be counted toward this~~
196 ~~total of 4 hours.~~

197 ~~(4) For an employee who is a licensed health care~~
198 ~~practitioner as defined in s. 456.001, training that is~~
199 ~~sanctioned by that practitioner's licensing board shall be~~
200 ~~considered to be approved by the Department of Elderly Affairs.~~

201 ~~(5) The Department of Elderly Affairs or its designee must~~
202 ~~approve the initial and continuing training provided in the~~
203 ~~facilities. The department must approve training offered in a~~

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204 ~~variety of formats, including, but not limited to, Internet-~~
205 ~~based training, videos, teleconferencing, and classroom~~
206 ~~instruction. The department shall keep a list of current~~
207 ~~providers who are approved to provide initial and continuing~~
208 ~~training. The department shall adopt rules to establish~~
209 ~~standards for the trainers and the training required in this~~
210 ~~section.~~

211 ~~(6) Upon completing any training listed in this section,~~
212 ~~the employee or direct caregiver shall be issued a certificate~~
213 ~~that includes the name of the training provider, the topic~~
214 ~~covered, and the date and signature of the training provider.~~
215 ~~The certificate is evidence of completion of training in the~~
216 ~~identified topic, and the employee or direct caregiver is not~~
217 ~~required to repeat training in that topic if the employee or~~
218 ~~direct caregiver changes employment to a different facility or~~
219 ~~to an assisted living facility, home health agency, adult day~~
220 ~~care center, or adult family care home. The direct caregiver~~
221 ~~must comply with other applicable continuing education~~
222 ~~requirements.~~

223 Section 4. Section 400.4785, Florida Statutes, is amended
224 to read:

225 400.4785 Patients with Alzheimer's disease or other related
226 disorders; staff training requirements; certain disclosures.-

227 (1) A home health agency must provide ~~the following~~ staff
228 training as required in s. 430.5025:-

229 ~~(a) Upon beginning employment with the agency, each~~
230 ~~employee must receive basic written information about~~
231 ~~interacting with participants who have Alzheimer's disease or~~
232 ~~dementia-related disorders.~~

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233 ~~(b) In addition to the information provided under paragraph~~
234 ~~(a), newly hired home health agency personnel who will be~~
235 ~~providing direct care to patients must complete 2 hours of~~
236 ~~training in Alzheimer's disease and dementia-related disorders~~
237 ~~within 9 months after beginning employment with the agency. This~~
238 ~~training must include, but is not limited to, an overview of~~
239 ~~dementia, a demonstration of basic skills in communicating with~~
240 ~~persons who have dementia, the management of problem behaviors,~~
241 ~~information about promoting the client's independence in~~
242 ~~activities of daily living, and instruction in skills for~~
243 ~~working with families and caregivers.~~

244 ~~(c) For certified nursing assistants, the required 2 hours~~
245 ~~of training shall be part of the total hours of training~~
246 ~~required annually.~~

247 ~~(d) For a health care practitioner as defined in s.~~
248 ~~456.001, continuing education hours taken as required by that~~
249 ~~practitioner's licensing board shall be counted toward the total~~
250 ~~of 2 hours.~~

251 ~~(e) For an employee who is a licensed health care~~
252 ~~practitioner as defined in s. 456.001, training that is~~
253 ~~sanctioned by that practitioner's licensing board shall be~~
254 ~~considered to be approved by the Department of Elderly Affairs.~~

255 ~~(f) The Department of Elderly Affairs, or its designee,~~
256 ~~must approve the required training. The department must consider~~
257 ~~for approval training offered in a variety of formats. The~~
258 ~~department shall keep a list of current providers who are~~
259 ~~approved to provide the 2-hour training. The department shall~~
260 ~~adopt rules to establish standards for the employees who are~~
261 ~~subject to this training, for the trainers, and for the training~~

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262 ~~required in this section.~~

263 ~~(g) Upon completing the training listed in this section,~~
264 ~~the employee shall be issued a certificate that states that the~~
265 ~~training mandated under this section has been received. The~~
266 ~~certificate shall be dated and signed by the training provider.~~
267 ~~The certificate is evidence of completion of this training, and~~
268 ~~the employee is not required to repeat this training if the~~
269 ~~employee changes employment to a different home health agency.~~

270 ~~(2)(h)~~ A licensed home health agency whose unduplicated
271 census during the most recent calendar year was composed
272 ~~comprised~~ of at least 90 percent of individuals aged 21 years or
273 younger at the date of admission is exempt from the training
274 requirements in this section.

275 ~~(3)(2)~~ An agency licensed under this part which claims that
276 it provides special care for persons who have Alzheimer's
277 disease or other related disorders must disclose in its
278 advertisements or in a separate document those services that
279 distinguish the care as being especially applicable to, or
280 suitable for, such persons. The agency must give a copy of all
281 such advertisements or a copy of the document to each person who
282 requests information about the agency and must maintain a copy
283 of all such advertisements and documents in its records. The
284 Agency for Health Care Administration shall examine all such
285 advertisements and documents in the agency's records as part of
286 the license renewal procedure.

287 Section 5. Subsection (1) of section 400.6045, Florida
288 Statutes, is amended to read:

289 400.6045 Patients with Alzheimer's disease or other related
290 disorders; staff training requirements; certain disclosures.-

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291 (1) A hospice licensed under this part must provide ~~the~~
292 ~~following~~ staff training as required in s. 430.5025;

293 ~~(a) Upon beginning employment with the agency, each~~
294 ~~employee must receive basic written information about~~
295 ~~interacting with persons who have Alzheimer's disease or~~
296 ~~dementia-related disorders.~~

297 ~~(b) In addition to the information provided under paragraph~~
298 ~~(a), employees who are expected to, or whose responsibilities~~
299 ~~require them to, have direct contact with participants who have~~
300 ~~Alzheimer's disease or dementia-related disorders must complete~~
301 ~~initial training of at least 1 hour within the first 3 months~~
302 ~~after beginning employment. The training must include an~~
303 ~~overview of dementias and must provide instruction in basic~~
304 ~~skills for communicating with persons who have dementia.~~

305 ~~(c) In addition to the requirements of paragraphs (a) and~~
306 ~~(b), an employee who will be providing direct care to a~~
307 ~~participant who has Alzheimer's disease or a dementia-related~~
308 ~~disorder must complete an additional 3 hours of training within~~
309 ~~9 months after beginning employment. This training must include,~~
310 ~~but is not limited to, the management of problem behaviors,~~
311 ~~information about promoting the patient's independence in~~
312 ~~activities of daily living, and instruction in skills for~~
313 ~~working with families and caregivers.~~

314 ~~(d) For certified nursing assistants, the required 4 hours~~
315 ~~of training shall be part of the total hours of training~~
316 ~~required annually.~~

317 ~~(e) For a health care practitioner as defined in s.~~
318 ~~456.001, continuing education hours taken as required by that~~
319 ~~practitioner's licensing board shall be counted toward the total~~

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320 of ~~4~~ hours.

321 ~~(f) For an employee who is a licensed health care~~
322 ~~practitioner as defined in s. 456.001, training that is~~
323 ~~sanctioned by that practitioner's licensing board shall be~~
324 ~~considered to be approved by the Department of Elderly Affairs.~~

325 ~~(g) The Department of Elderly Affairs or its designee must~~
326 ~~approve the required 1-hour and 3-hour training provided to~~
327 ~~employees or direct caregivers under this section. The~~
328 ~~department must consider for approval training offered in a~~
329 ~~variety of formats. The department shall keep a list of current~~
330 ~~providers who are approved to provide the 1-hour and 3-hour~~
331 ~~training. The department shall adopt rules to establish~~
332 ~~standards for the employees who are subject to this training,~~
333 ~~for the trainers, and for the training required in this section.~~

334 ~~(h) Upon completing any training described in this section,~~
335 ~~the employee or direct caregiver shall be issued a certificate~~
336 ~~that includes the name of the training provider, the topic~~
337 ~~covered, and the date and signature of the training provider.~~
338 ~~The certificate is evidence of completion of training in the~~
339 ~~identified topic, and the employee or direct caregiver is not~~
340 ~~required to repeat training in that topic if the employee or~~
341 ~~direct caregiver changes employment to a different hospice or to~~
342 ~~a home health agency, assisted living facility, nursing home, or~~
343 ~~adult day care center.~~

344 Section 6. Subsections (2) through (8) of section 429.178,
345 Florida Statutes, are amended to read:

346 429.178 Special care for persons with Alzheimer's disease
347 or other related disorders.-

348 (2) ~~(a)~~ An individual who is employed by a facility that

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349 provides special care for residents who have Alzheimer's disease
350 or other related disorders, ~~and who has regular contact with~~
351 ~~such residents,~~ must complete the ~~up to 4 hours of initial~~
352 ~~dementia-specific training as required in s. 430.5025 developed~~
353 ~~or approved by the department. The training must be completed~~
354 ~~within 3 months after beginning employment and satisfy the core~~
355 ~~training requirements of s. 429.52(3)(g).~~

356 (b) ~~A direct caregiver who is employed by a facility that~~
357 ~~provides special care for residents who have Alzheimer's disease~~
358 ~~or other related disorders and provides direct care to such~~
359 ~~residents must complete the required initial training and 4~~
360 ~~additional hours of training developed or approved by the~~
361 ~~department. The training must be completed within 9 months after~~
362 ~~beginning employment and satisfy the core training requirements~~
363 ~~of s. 429.52(3)(g).~~

364 (c) ~~An individual who is employed by a facility that~~
365 ~~provides special care for residents with Alzheimer's disease or~~
366 ~~other related disorders, but who only has incidental contact~~
367 ~~with such residents, must be given, at a minimum, general~~
368 ~~information on interacting with individuals with Alzheimer's~~
369 ~~disease or other related disorders, within 3 months after~~
370 ~~beginning employment.~~

371 (3) ~~In addition to the training required under subsection~~
372 ~~(2), a direct caregiver must participate in a minimum of 4~~
373 ~~contact hours of continuing education each calendar year. The~~
374 ~~continuing education must include one or more topics included in~~
375 ~~the dementia-specific training developed or approved by the~~
376 ~~department, in which the caregiver has not received previous~~
377 ~~training.~~

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378 ~~(4) Upon completing any training listed in subsection (2),~~
379 ~~the employee or direct caregiver shall be issued a certificate~~
380 ~~that includes the name of the training provider, the topic~~
381 ~~covered, and the date and signature of the training provider.~~
382 ~~The certificate is evidence of completion of training in the~~
383 ~~identified topic, and the employee or direct caregiver is not~~
384 ~~required to repeat training in that topic if the employee or~~
385 ~~direct caregiver changes employment to a different facility. The~~
386 ~~employee or direct caregiver must comply with other applicable~~
387 ~~continuing education requirements.~~

388 ~~(5) The department, or its designee, shall approve the~~
389 ~~initial and continuing education courses and providers.~~

390 ~~(6) The department shall keep a current list of providers~~
391 ~~who are approved to provide initial and continuing education for~~
392 ~~staff of facilities that provide special care for persons with~~
393 ~~Alzheimer's disease or other related disorders.~~

394 (3)~~(7)~~ Any facility more than 90 percent of whose residents
395 receive monthly optional supplementation payments is not
396 required to pay for the training and education programs required
397 under this section. A facility that has one or more such
398 residents must ~~shall~~ pay a reduced fee that is proportional to
399 the percentage of such residents in the facility. A facility
400 that does not have any residents who receive monthly optional
401 supplementation payments must pay a reasonable fee, as
402 established by the department, for such training and education
403 programs.

404 (4)~~(8)~~ The department shall adopt rules to establish
405 standards for trainers and training and to implement this
406 section.

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407 Section 7. Subsection (1) of section 429.52, Florida
408 Statutes, is amended to read:

409 429.52 Staff training and educational requirements.—

410 (1) Each new assisted living facility employee who has not
411 previously completed core training must attend a preservice
412 orientation provided by the facility before interacting with
413 residents. The preservice orientation must be at least 2 hours
414 in duration and cover topics that help the employee provide
415 responsible care and respond to the needs of facility residents.
416 Upon completion, the employee and the administrator of the
417 facility must sign a statement that the employee completed the
418 required preservice orientation. The facility must keep the
419 signed statement in the employee's personnel record. Each
420 assisted living facility shall provide staff training as
421 required in s. 430.5025.

422 Section 8. Section 429.83, Florida Statutes, is amended to
423 read:

424 429.83 Residents with Alzheimer's disease or other related
425 disorders; training; certain disclosures.—

426 (1) An adult family-care home licensed under this part must
427 provide staff training as required in s. 430.5025.

428 (2) An adult family-care home licensed under this part
429 which claims that it provides special care for persons who have
430 Alzheimer's disease or other related disorders must Disclose in
431 its advertisements or in a separate document those services that
432 distinguish the care as being especially applicable to, or
433 suitable for, such persons. The home must give a copy of all
434 such advertisements or a copy of the document to each person who
435 requests information about programs and services for persons

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436 with Alzheimer's disease or other related disorders offered by
437 the home and must maintain a copy of all such advertisements and
438 documents in its records. The agency shall examine all such
439 advertisements and documents in the home's records as part of
440 the license renewal procedure.

441 Section 9. Subsection (1) of section 429.917, Florida
442 Statutes, is amended to read:

443 429.917 Patients with Alzheimer's disease or other related
444 disorders; staff training requirements; certain disclosures.—

445 (1) An adult day care center licensed under this part must
446 provide ~~the following~~ staff training as required in s. 430.5025+

447 ~~(a) Upon beginning employment with the facility, each~~
448 ~~employee must receive basic written information about~~
449 ~~interacting with participants who have Alzheimer's disease or~~
450 ~~dementia-related disorders.~~

451 ~~(b) In addition to the information provided under paragraph~~
452 ~~(a), newly hired adult day care center personnel who are~~
453 ~~expected to, or whose responsibilities require them to, have~~
454 ~~direct contact with participants who have Alzheimer's disease or~~
455 ~~dementia-related disorders must complete initial training of at~~
456 ~~least 1 hour within the first 3 months after beginning~~
457 ~~employment. The training must include an overview of dementias~~
458 ~~and must provide instruction in basic skills for communicating~~
459 ~~with persons who have dementia.~~

460 ~~(c) In addition to the requirements of paragraphs (a) and~~
461 ~~(b), an employee who will be providing direct care to a~~
462 ~~participant who has Alzheimer's disease or a dementia-related~~
463 ~~disorder must complete an additional 3 hours of training within~~
464 ~~9 months after beginning employment. This training must include,~~

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465 ~~but is not limited to, the management of problem behaviors,~~
466 ~~information about promoting the participant's independence in~~
467 ~~activities of daily living, and instruction in skills for~~
468 ~~working with families and caregivers.~~

469 ~~(d) For certified nursing assistants, the required 4 hours~~
470 ~~of training shall be part of the total hours of training~~
471 ~~required annually.~~

472 ~~(e) For a health care practitioner as defined in s.~~
473 ~~456.001, continuing education hours taken as required by that~~
474 ~~practitioner's licensing board shall be counted toward the total~~
475 ~~of 4 hours.~~

476 ~~(f) For an employee who is a licensed health care~~
477 ~~practitioner as defined in s. 456.001, training that is~~
478 ~~sanctioned by that practitioner's licensing board shall be~~
479 ~~considered to be approved by the Department of Elderly Affairs.~~

480 ~~(g) The Department of Elderly Affairs or its designee must~~
481 ~~approve the 1-hour and 3-hour training provided to employees and~~
482 ~~direct caregivers under this section. The department must~~
483 ~~consider for approval training offered in a variety of formats.~~
484 ~~The department shall keep a list of current providers who are~~
485 ~~approved to provide the 1-hour and 3-hour training. The~~
486 ~~department shall adopt rules to establish standards for the~~
487 ~~employees who are subject to this training, for the trainers,~~
488 ~~and for the training required in this section.~~

489 ~~(h) Upon completing any training described in this section,~~
490 ~~the employee or direct caregiver shall be issued a certificate~~
491 ~~that includes the name of the training provider, the topic~~
492 ~~covered, and the date and signature of the training provider.~~
493 ~~The certificate is evidence of completion of training in the~~

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494 ~~identified topic, and the employee or direct caregiver is not~~
495 ~~required to repeat training in that topic if the employee or~~
496 ~~direct caregiver changes employment to a different adult day~~
497 ~~care center or to an assisted living facility, nursing home,~~
498 ~~home health agency, or hospice. The direct caregiver must comply~~
499 ~~with other applicable continuing education requirements.~~

500 ~~(i) An employee who is hired on or after July 1, 2004, must~~
501 ~~complete the training required by this section.~~

502 Section 10. This act shall take effect July 1, 2021.

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Committee on Children, Families, and Elder Affairs

BILL: CS/SB 634

INTRODUCER: Health Policy Committee and Senator Gibson and others

SUBJECT: Dementia-related Staff Training

DATE: March 22, 2021 **REVISED:** _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Looke</u>	<u>Brown</u>	<u>HP</u>	<u>Fav/CS</u>
2.	<u>Moody</u>	<u>Cox</u>	<u>CF</u>	<u>Pre-meeting</u>
3.	_____	_____	<u>AP</u>	_____

Please see Section IX. for Additional Information:
COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

CS/SB 634 creates s. 430.5025, F.S., to establish the Florida Alzheimer’s Disease and Dementia Training Act. The bill establishes universal Alzheimer’s disease and related disorder (ADRD) training requirements to be used by nursing homes, home health agencies, hospice providers, assisted living facilities, adult family-care homes, and adult day care centers to replace each license type’s individual training requirements on that topic.

The bill requires a licensee, as defined in the bill, to provide each of its employees one hour of dementia-related training within 30 days of his or her employment. Additionally, each licensee must require employees who are direct care workers, as defined by the bill, and who are expected to or required to have direct contact with clients, patients, or residents with ADRD to receive at least three hours of initial training within the first three months of employment and four hours of continuing education annually. If the licensee advertises that it provides special care for individuals with Alzheimer’s disease, the licensee must require each of its direct care workers to complete four additional hours of training.

The bill requires the Department of Elder Affairs (DOEA) or its designee to approve the courses that may be used to satisfy the training requirements in the bill and to develop an assessment for each required topic. The DOEA is required to adopt rules for implementation.

The bill also amends ss. 400.1755, 400.4785, 400.6045, 429.178, 429.52, 429.83, and 429.917, F.S., to eliminate individual ADRD training requirements for nursing homes, home health service providers, hospice providers, assisted living facilities (ALF), adult family-care homes, and adult day care centers in favor of the uniform requirements established by the bill.

The bill provides an effective date of July 1, 2021.

II. Present Situation:

Dementia and Alzheimer's Disease

Dementia is the loss of cognitive functioning—thinking, remembering, and reasoning—and behavioral abilities to such an extent that it interferes with a person's daily life and activities. These functions include memory, language skills, visual perception, problem solving, self-management, and the ability to focus and pay attention. Some people with dementia cannot control their emotions, and their personalities may change. Dementia ranges in severity from the mildest stage, when it is just beginning to affect a person's functioning, to the most severe stage, when the person must depend completely on others for basic activities of living.¹

Alzheimer's disease is the most common type of dementia. It is a progressive disease that begins with mild memory loss and can lead to loss of the ability to carry on a conversation and respond to one's environment. Alzheimer's disease affects parts of the brain that control thought, memory, and language. It can seriously affect a person's ability to carry out daily activities. Although scientists are studying the disease, what causes Alzheimer's disease is unknown.²

There are an estimated 580,000 individuals living with Alzheimer's disease in the state of Florida.³ By 2025, it is projected that 720,000 Floridians will have Alzheimer's disease.⁴ Most individuals with Alzheimer's can live in the community with support, often provided by spouses or other family members. In the late stages of the disease, many patients require care 24 hours per day and are often served in long-term care facilities.

¹ National Institute on Aging, *What is Dementia? Symptoms, Types, and Diagnosis*, available at <https://www.nia.nih.gov/health/what-dementia-symptoms-types-and-diagnosis>, (last visited on March 22, 2021).

² Centers for Disease Control and Prevention, *Alzheimer's Disease and Healthy Aging*, available at <https://www.cdc.gov/aging/aginginfo/alzheimers.htm#AlzheimersDisease>, (last visited March 22, 2021).

³ Alzheimer's Association, *Alzheimer's Statistics Florida*, available at <https://www.alz.org/media/Documents/florida-alzheimers-facts-figures-2018.pdf>, (last visited March 22, 2021).

⁴ *Id.*

Dementia and Alzheimer’s Disease Training

Overview by Facility Type

	All Employees	Employees with Expected or Required Direct Contact	Employees Providing Direct Care	Health Care Practitioner Continuing Education Sufficient?	Training Approved?	Additional Reqs.
Nursing Homes	Provided with basic written information about interacting with persons with ADRD upon beginning employment.	1 hour of training within the first 3 months of employment.	Additional 3 hours of training within the first 9 months of employment.	Yes	By DOEA.	
Home Health Agencies		Not specified.	2 hours of training within the first 9 months of employment.	Yes	By DOEA.	HHA’s that serve 90% individuals under age 21 are exempt.
Hospice Providers	ADRD upon beginning employment.	1 hour of training within the first 3 months of employment.	Additional 3 hours of training within the first 9 months of employment.	Yes	By DOEA.	
ALFs⁵	Employees with incidental contact must be given information within 3 months.	4 hours within 3 months of employment	4 additional hours within 9 months of employment + 4 hours CE annually	Not specified.	By DOEA	
Adult Day Care Centers	Same as nursing homes, home health agencies, and Hospice.	1 hour of training within the first 3 months of employment.	Additional 3 hours of training within the first 9 months of employment.	Yes	By DOEA	
Adult Family-Care Homes	None	None	None	Not Specified	By the Agency for Health Care Administration (AHCA)	

Details for each facility type are below:

⁵ Training is required if the ALF advertises that it provides special care for persons with Alzheimer’s disease or related disorders. Section 429.178, F.S.

Nursing Homes

Section 400.1755, F.S., requires each nursing home to provide the following training:

- Provide each of its employee's basic written information about interacting with persons with ADRD upon beginning employment.
- All employees who are expected to, or whose responsibilities require them to, have direct contact with residents with ADRD must also have an initial training of at least one hour completed in the first three months after beginning employment. This training must include, but is not limited to, an overview of dementias and must provide basic skills in communicating with persons with dementia.
- An individual who provides direct care must complete the required initial training and an additional three hours of training within nine months after beginning employment. This training must include, but is not limited to, managing problem behaviors, promoting the resident's independence in activities of daily living, and skills in working with families and caregivers. Health care practitioners' continuing education can be counted toward the required training hours.
- The DOEA or its designee must approve the initial and continuing training provided in the facilities. The DOEA must approve training offered in a variety of formats, including, but not limited to, Internet-based training, videos, teleconferencing, and classroom instruction. The DOEA must keep a list of current providers who are approved to provide initial and continuing training. The DOEA must adopt rules to establish standards for the trainers and the training required in this section of statute.
- Upon completing any training listed in the section, the employee or direct caregiver must be issued a certificate that includes the name of the training provider, the topic covered, and the date and signature of the training provider. The certificate is evidence of completion of training in the identified topic, and the employee or direct caregiver is not required to repeat training in that topic if the employee or direct caregiver changes employment to a different facility or to an assisted living facility, home health agency, adult day care center, or adult family-care home. The direct caregiver must comply with other applicable continuing education requirements.

Home Health Agencies

Section 400.4785, F.S., requires a home health agency to provide the following staff training:

- Upon beginning employment with the agency, each employee must receive basic written information about interacting with participants who have ADRD.
- Newly-hired home health agency personnel who will be providing direct care to patients must complete two hours of training in ADRD within nine months after beginning employment with the agency. This training must include, but is not limited to, an overview of dementia, a demonstration of basic skills in communicating with persons who have dementia, the management of problem behaviors, information about promoting the client's independence in activities of daily living, and instruction in skills for working with families and caregivers.
- For certified nursing assistants, the required two hours of training are part of the total hours of training required annually.

- For a health care practitioner, as defined in s. 456.001, F.S.,⁶ continuing education hours taken as required by that practitioner's licensing board are counted toward the total of two hours.
- For an employee who is a licensed health care practitioner, training that is sanctioned by that practitioner's licensing board must be considered to be approved by the DOEA.
- The DOEA, or its designee, must approve the required training. The DOEA must consider for approval training offered in a variety of formats. The DOEA must keep a list of current providers who are approved to provide the two-hour training. The DOEA must adopt rules to establish standards for the employees who are subject to this training, for the trainers, and for the training required in this section of statute.
- Upon completing the training listed in the section, the employee must be issued a certificate that states that the training mandated under the section has been received. The certificate must be dated and signed by the training provider. The certificate is evidence of completion of this training, and the employee is not required to repeat this training if the employee changes employment to a different home health agency.
- A licensed home health agency whose unduplicated census during the most recent calendar year was composed of at least 90 percent of individuals aged 21 years or younger at the date of admission, is exempt from the training requirements in this section of statute.

Hospice Providers

Section 400.6045, F.S., requires a hospice provider to provide the following staff training:

- Upon beginning employment with the agency, each employee must receive basic written information about interacting with persons who have ADRD.
- Employees who are expected to, or whose responsibilities require them to, have direct contact with participants who have ADRD must complete initial training of at least one hour within the first three months after beginning employment. The training must include an overview of dementias and must provide instruction in basic skills for communicating with persons who have dementia.
- In addition, an employee who will be providing direct care to a participant who has ADRD must complete an additional three hours of training within nine months after beginning employment. This training must include, but is not limited to, the management of problem behaviors, information about promoting the patient's independence in activities of daily living, and instruction in skills for working with families and caregivers.
- For certified nursing assistants, the required four hours of training is part of the total hours of training required annually.
- For a health care practitioner as defined in s. 456.001, F.S., continuing education hours taken as required by that practitioner's licensing board are counted toward the total of four hours.
- For an employee who is a licensed health care practitioner as defined in s. 456.001, F.S., training that is sanctioned by that practitioner's licensing board is considered to be approved by the DOEA.

⁶ Section 456.001(4), F.S., defines "health care practitioner" as any person licensed under ch. 457, F.S.; ch. 458, F.S.; ch. 459, F.S.; ch. 460, F.S.; ch. 461, F.S.; ch. 462, F.S.; ch. 463, F.S.; ch. 464, F.S.; ch. 465, F.S.; ch. 466, F.S.; ch. 467, F.S.; part I, part II, part III, part V, part X, part XII, or part XIV of ch. 468, F.S.; ch. 478, F.S.; ch. 480, F.S.; part I or part II of ch. 483, F.S.; ch. 484, F.S.; ch. 486, F.S.; ch. 490, F.S.; or ch. 491, F.S.

- The DOEA or its designee must approve the required one-hour and three-hour training provided to employees or direct caregivers under this section of statute. The DOEA must consider for approval training offered in a variety of formats. The DOEA must keep a list of current providers who are approved to provide the one-hour and three-hour training. The DOEA must adopt rules to establish standards for the employees who are subject to this training, for the trainers, and for the training required in this section of statute.
- Upon completing any training described in the section, the employee or direct caregiver must be issued a certificate that includes the name of the training provider, the topic covered, and the date and signature of the training provider. The certificate is evidence of completion of training in the identified topic, and the employee or direct caregiver is not required to repeat training in that topic if the employee or direct caregiver changes employment to a different hospice or to a home health agency, assisted living facility, nursing home, or adult day care center.
- A hospice that claims it provides special care for persons who have ADRD must disclose in its advertisements or in a separate document those services that distinguish the care as being especially applicable to, or suitable for, such persons. The hospice must give a copy of all such advertisements or a copy of the document to each person who requests information about programs and services for persons with ADRD offered by the hospice and must maintain a copy of all such advertisements and documents in its records. The Agency for Health Care Administration (AHCA) must examine all such advertisements and documents in the hospice's records as part of the license renewal procedure.

Assisted Living Facilities

Section 429.178, F.S., requires an ALF that advertises it provides special care for persons with ADRD to provide the following training:

- An employee who has regular contact with such residents must complete up to four hours of initial dementia-specific training developed or approved by the DOEA. The training must be completed within three months after beginning employment and satisfy the core training requirements of s. 429.52(3)(g), F.S.
- A direct caregiver who provides direct care to such residents must complete the required initial training and four additional hours of training developed or approved by the DOEA. The training must be completed within nine months after beginning employment and satisfy the core training requirements of s. 429.52(3)(g), F.S.
- An individual who is employed by a facility that provides special care for residents with ADRD, but who only has incidental contact with such residents, must be given, at a minimum, general information on interacting with individuals with ADRD, within three months after beginning employment.
- A direct caregiver must also participate in a minimum of four contact hours of continuing education each calendar year. The continuing education must include one or more topics included in the dementia-specific training, developed or approved by the DOEA, in which the caregiver has not received previous training.
- Upon completing any specified training, the employee or direct caregiver must be issued a certificate that includes the name of the training provider, the topic covered, and the date and signature of the training provider. The certificate is evidence of completion of training in the identified topic, and the employee or direct caregiver is not required to repeat training in that topic if the employee or direct caregiver changes employment to a different facility. The

employee or direct caregiver must comply with other applicable continuing education requirements.

- The DOEA, or its designee, must approve the initial and continuing education courses and providers.
- The DOEA must keep a current list of providers who are approved to provide initial and continuing education for staff of facilities that provide special care for persons with ADRD.

Adult Family-Care Homes

Adult family-care home providers are required to undergo 12 hours of training some of which must be related to Identifying and meeting the special needs of disabled adults and frail elders. However, providers are not currently required to undergo training specific to ADRD.⁷

Adult Day Care Centers

Section 429.917, F.S., requires an adult day care center to provide the following staff training:

- Upon beginning employment with the facility, each employee must receive basic written information about interacting with participants who have ADRD.
- In addition to the information provided, newly-hired adult day care center personnel who are expected to, or whose responsibilities require them to, have direct contact with participants who have ADRD must complete initial training of at least one hour within the first three months after beginning employment. The training must include an overview of dementias and must provide instruction in basic skills for communicating with persons who have dementia.
- In addition to the previous requirements, an employee who will be providing direct care to a participant who has ADRD must complete an additional three hours of training within nine months after beginning employment. This training must include, but is not limited to, the management of problem behaviors, information about promoting the participant's independence in activities of daily living, and instruction in skills for working with families and caregivers.
- For certified nursing assistants, the required four hours of training is part of the total hours of training required annually.
- For a health care practitioner as defined in s. 456.001, F.S., continuing education hours taken as required by that practitioner's licensing board are counted toward the total of four hours.
- For an employee who is a licensed health care practitioner as defined in s. 456.001, F.S., training that is sanctioned by that practitioner's licensing board is considered to be approved by the DOEA.
- The DOEA or its designee must approve the one-hour and three-hour training provided to employees and direct caregivers under this section of statute. The DOEA must consider for approval training offered in a variety of formats. The DOEA must keep a list of current providers who are approved to provide the one-hour and three-hour training. The DOEA must adopt rules to establish standards for the employees who are subject to this training, for the trainers, and for the training required in this section of statute.
- Upon completing any training described in the section, the employee or direct caregiver must be issued a certificate that includes the name of the training provider, the topic covered, and

⁷ See s. 429.75, F.S., and Fla. Admin. Code R. 59A-37.007 (2020).

the date and signature of the training provider. The certificate is evidence of completion of training in the identified topic, and the employee or direct caregiver is not required to repeat training in that topic if the employee or direct caregiver changes employment to a different adult day care center or to an assisted living facility, nursing home, home health agency, or hospice. The direct caregiver must comply with other applicable continuing education requirements.

Current Administration of ADRD Training

The DOEA has authority for administering the existing ADRD training⁸ and currently does so through a contract with the University of South Florida (USF).⁹ USF, through its Training Academy on Aging, reviews and approves ADRD Training Providers and Training Curriculum Programs for the DOEA. The mission of the ADRD training program is to improve the care of individuals with ADRDs who receive services from nursing homes, assisted living facilities, home health agencies, adult day care centers, and hospice care facilities. The ADRD training program is designed to ensure that agency and facility staff members who have regular contact with or provide direct care to, persons with ADRD receive the relevant ADRD training.¹⁰

III. Effect of Proposed Changes:

Sections 1 and 2 of CS/SB 634 establish the Florida Alzheimer’s Disease and Dementia Training Act. The bill creates s. 430.5025, F.S., to establish universal ADRD training requirements for nursing homes, home health agencies, hospice providers, ALFs, and adult day care centers. The bill defines the following terms:

- “Department” means the Department of Elderly Affairs.¹¹
- “Direct care worker” means an individual who, as part of his or her employment duties, provides or has access to provide direct contact assistance with personal care or activities of daily living to clients, patients, or residents of any facility licensed under part II, part III, or part IV of ch. 400, F.S., or part I or part III of ch. 429, F.S.
- “Employee” means any staff member who has regular contact or incidental contact on a recurring basis with clients, patients, or residents of a facility licensed under part II, part III, or part IV of ch. 400, F.S., or part I or part III of ch. 429, F.S. The term includes, but is not limited to, direct care workers; staff responsible for housekeeping, the front desk, maintenance, and other administrative functions; and any other individuals who may have regular contact or incidental contact on a recurring basis with clients, patients, or residents.
- “Licensee” means a person or an entity licensed under part II, part III, or part IV of ch. 400, F.S., or part I or part III of ch. 429, F.S.

The bill requires that, as a condition of licensure, each licensee must provide one hour of dementia-related training to each of its employees within 30 days of their employment. The

⁸ Fla. Admin. Code R. 58A-5.0194 (2020).

⁹ Contract XQ092, effective July 1, 2020, and AHCA Agreement AA412, effective July 21, 2020, between Department of Elder Affairs, USF Board of Trustees, and the Agency for Health Care Administration (Agency).

¹⁰ Department of Elder Affairs, *Senate Bill 634 Fiscal Analysis* (February 2, 2021) (on file with the Senate Committee on Health Policy).

¹¹ Also known as the Department of Elder Affairs (DOEA).

training must include methods for interacting with persons with ADRD and for identifying warning signs of dementia.

Any employee who is a direct care worker, as defined, must receive at least three hours of additional training within the first three months of employment if the direct care worker is expected or required to have direct contact with clients, patients, or residents with ADRD or with populations that are at a greater risk for ADRD. The three hours of training must include, but need not be limited to, an overview of ADRDs and person-centered care, assessment and care planning, activities of daily living, and dementia-related behaviors and communication for clients, patients, and residents with ADRD. Each such employee must also receive at least four hours of continuing education, approved by the DOEA, annually on the above topics and any related changes in state or federal law.

If the licensee advertises that it provides special care for individuals with ADRD, the licensee must require its direct care workers to complete four additional hours of initial training with a curriculum developed or approved by the DOEA. This training will count toward a certified nursing assistant's annual training requirements.

If the employee is a health care practitioner, as defined in 456.001, F.S., the employee may count his or her continuing education hours for licensure to satisfy the three-hour and four-hour training requirements if his or her continuing education covers the required topics and the hours are approved by the DOEA.

The DOEA or its designee is required to approve the courses that licensees may use to satisfy the training requirements in the bill, and the approved courses must be in a variety of formats, including but not limited to, Internet-based training, videos, teleconferencing, and classroom instruction. The DOEA or its designee must develop a process for registering training providers and maintaining a list of those providers approved to provide training required under the bill. To be approved, a training provider must have at least two years of experience related to ADRD, gerontology, health care, or a related field. The DOEA or its designee must issue each approved training provider a unique registration identifier.

The DOEA or its designee is also required to develop an assessment for each training topic required by the bill. Upon completion of any such training, the employee or direct care worker must pass the related assessment. If an employee or a direct care worker completes a training and passes the related assessment, the training provider must issue the employee or direct care worker a certificate that includes the training provider's name and unique identifier, the topic covered in the training, the date of completion, and the signature of the training provider. The certificate is evidence of completion of the training and assessment in the identified topic, and the employee or direct care worker is not required to repeat training in that topic if he or she changes employment to a different licensee, but he or she must comply with any applicable continuing education requirements.

The DOEA is required to adopt rules to implement section 2 of the bill.

Sections 7 and 8 amend ss. 429.52 and 429.83, F.S., to require all adult family-care homes and ALFs to provide ADRD staff training pursuant to the requirements established in the bill.

Currently, no adult family-care homes and only ALFs who advertise they provide special care for patients with ADRD are required to provide such training.

Sections 3 through 6 and section 9 amend ss. 400.1755, 400.4785, 400.6045, 429.178, and 429.917, F.S., respectively, to repeal the individual ADRD training requirements in the licensure statutes for nursing homes, home health agencies, hospice providers, ALFs, and adult day care centers in favor of the uniform training requirements established by the bill.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None identified.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

CS/SB 634 may have an indeterminate negative fiscal impact on a facility required to provide ADRD training by the bill if such training is more extensive than what is required to be provided by the facility under current law.

C. Government Sector Impact:

The DOEA reports that the bill does not have any fiscal impact to local or state government.¹²

¹² The DOEA, *Agency Analysis for SB 634*, p. 4, February 11, 2021 (on file with Senate Committee on Children, Families, and Elder Affairs).

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 400.1755, 400.4785, 400.6045, 429.178, 429.52, 429.83, and 429.917.

This bill creates section 430.5025 of the Florida Statutes.

IX. Additional Information:

- A. **Committee Substitute – Statement of Substantial Changes:**
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Health Policy on March 10, 2021:

The CS adds adult family-care homes to the list of providers who are required to comply with the ADRD training requirements established by the bill and removes the authority for the DOEA to establish a uniform curriculum for ADRD training.

- B. **Amendments:**

None.



601850

LEGISLATIVE ACTION

Senate

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. .

House

The Committee on Children, Families, and Elder Affairs (Baxley) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause
and insert:

Section 1. Present subsections (2) through (8) of section 465.189, Florida Statutes, are redesignated as subsections (3) through (9), respectively, a new subsection (2) is added to that section, and subsection (1) and present subsection (6) are amended, to read:

465.189 Administration of vaccines and epinephrine



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11 autoinjection.—

12 (1) In accordance with guidelines of the Centers for
13 Disease Control and Prevention for each recommended immunization
14 or vaccine, a pharmacist, or a registered intern under the
15 supervision of a pharmacist who is certified under subsection
16 ~~(7)(6)~~, may administer the following immunizations or vaccines
17 to an adult within the framework of an established protocol
18 under a supervising physician licensed under chapter 458 or
19 chapter 459:

20 (a) Immunizations or vaccines listed in the ~~Adult~~
21 ~~Immunization Schedule as of February 1, 2015, by the United~~
22 ~~States Centers for Disease Control and Prevention's Recommended~~
23 ~~Immunization Schedule, the United States Centers for Disease~~
24 ~~Control and Prevention's Health Information for International~~
25 ~~Travel, or the United States Food and Drug Administration's~~
26 ~~Vaccines Licensed for Use in the United States or vaccines~~
27 ~~authorized for emergency use by the United States Food and Drug~~
28 ~~Administration Prevention.~~ The board may authorize, by rule,
29 additional immunizations or vaccines as they are added to the
30 United States Centers for Disease Control and Prevention's
31 Recommended Immunization Schedule, the United States Centers for
32 Disease Control and Prevention's Health Information for
33 International Travel, or the United States Food and Drug
34 Administration's Vaccines Licensed for Use in the United States
35 or additional vaccines authorized for emergency use by the
36 United States Food and Drug Administration ~~Adult Immunization~~
37 ~~Schedule.~~

38 (b) ~~Immunizations or vaccines recommended by the United~~
39 ~~States Centers for Disease Control and Prevention for~~



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40 ~~international travel as of July 1, 2015. The board may~~
41 ~~authorize, by rule, additional immunizations or vaccines as they~~
42 ~~are recommended by the United States Centers for Disease Control~~
43 ~~and Prevention for international travel.~~

44 ~~(e)~~ Immunizations or vaccines approved by the board in
45 response to a state of emergency declared by the Governor
46 pursuant to s. 252.36.

47
48 A registered intern who administers an immunization or vaccine
49 under this subsection must be supervised by a certified
50 pharmacist at a ratio of one pharmacist to one registered
51 intern.

52 (2) A pharmacist who is certified under subsection (7) may
53 administer influenza vaccines to individuals 7 years of age or
54 older within the framework of an established protocol under a
55 supervising physician licensed under chapter 458 or chapter 459.

56 (7)~~(6)~~ Any pharmacist or registered intern seeking to
57 administer vaccines ~~to adults~~ under this section must be
58 certified to administer such vaccines pursuant to a
59 certification program approved by the Board of Pharmacy in
60 consultation with the Board of Medicine and the Board of
61 Osteopathic Medicine. The certification program shall, at a
62 minimum, require that the pharmacist attend at least 20 hours of
63 continuing education classes approved by the board and the
64 registered intern complete at least 20 hours of coursework
65 approved by the board. The program shall have a curriculum of
66 instruction concerning the safe and effective administration of
67 such vaccines, including, but not limited to, potential allergic
68 reactions to such vaccines.



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69 Section 2. This act shall take effect July 1, 2021.

70

71 ===== T I T L E A M E N D M E N T =====

72 And the title is amended as follows:

73 Delete everything before the enacting clause

74 and insert:

75 A bill to be entitled

76 An act relating to the administration of vaccines;

77 amending s. 465.189, F.S.; revising the specified

78 immunizations or vaccines that certified pharmacists

79 and registered interns may administer to adults;

80 authorizing certain pharmacists to administer

81 influenza vaccines to individuals 7 years of age or

82 older under certain circumstances; providing an

83 effective date.

By Senator Baxley

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1 A bill to be entitled
2 An act relating to immunizations; amending s. 381.003,
3 F.S.; requiring certain persons licensed to practice
4 pharmacy to report specified vaccination data to the
5 Department of Health's immunization registry, with
6 exceptions; amending s. 465.189, F.S.; authorizing
7 certain pharmacists and registered interns to
8 administer specified immunizations and vaccines to
9 children within a specified age range under certain
10 circumstances; revising the specified immunizations or
11 vaccines that such pharmacists and registered interns
12 may administer; requiring authorized pharmacists and
13 registered interns to obtain a certain medical consent
14 form before administering a vaccine to a child younger
15 than 18 years of age; specifying requirements for the
16 consent form; requiring the parent or guardian of such
17 child to provide a certain opt-out form to the
18 pharmacist or registered intern to exclude the minor
19 from the department's immunization registry; requiring
20 the pharmacist or registered intern to submit the opt-
21 out form to the department; requiring authorized
22 pharmacists and registered interns to submit
23 vaccination data to the department if an opt-out form
24 is not provided; amending s. 465.003, F.S.; conforming
25 a provision to changes made by the act; providing an
26 effective date.

27
28 Be It Enacted by the Legislature of the State of Florida:
29

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30 Section 1. Paragraph (e) of subsection (1) of section
31 381.003, Florida Statutes, is amended to read:

32 381.003 Communicable disease and AIDS prevention and
33 control.—

34 (1) The department shall conduct a communicable disease
35 prevention and control program as part of fulfilling its public
36 health mission. A communicable disease is any disease caused by
37 transmission of a specific infectious agent, or its toxic
38 products, from an infected person, an infected animal, or the
39 environment to a susceptible host, either directly or
40 indirectly. The communicable disease program must include, but
41 need not be limited to:

42 (e) Programs for the prevention and control of vaccine-
43 preventable diseases, including programs to immunize school
44 children as required by s. 1003.22(3)-(11) and the development
45 of an automated, electronic, and centralized database and
46 registry of immunizations. The department shall ensure that all
47 children in this state are immunized against vaccine-preventable
48 diseases. The immunization registry must allow the department to
49 enhance current immunization activities for the purpose of
50 improving the immunization of all children in this state.

51 1. Except as provided in subparagraph 2., the department
52 shall include all children born in this state in the
53 immunization registry by using the birth records from the Office
54 of Vital Statistics. The department shall add other children to
55 the registry as immunization services are provided.

56 2. The parent or guardian of a child may refuse to have the
57 child included in the immunization registry by signing a form
58 obtained from the department, or from the health care

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59 practitioner or entity that provides the immunization, which
60 indicates that the parent or guardian does not wish to have the
61 child included in the immunization registry. Each consent to
62 treatment form provided by a health care practitioner or by an
63 entity that administers vaccinations or causes vaccinations to
64 be administered to children from birth through 17 years of age
65 must contain a notice stating that the parent or guardian of a
66 child may refuse to have his or her child included in the
67 immunization registry. The parent or guardian must provide such
68 opt-out form to the health care practitioner or entity upon
69 administration of the vaccination. Such health care practitioner
70 or entity shall submit the form to the department. A parent or
71 guardian may submit the opt-out form directly to the department.
72 Any records or identifying information pertaining to the child
73 shall be removed from the registry, if the parent or guardian
74 has refused to have his or her child included in the
75 immunization registry.

76 3. A college or university student, from 18 years of age to
77 23 years of age, who obtains a vaccination from a college or
78 university student health center or clinic in the state may
79 refuse to be included in the immunization registry by signing a
80 form obtained from the department, health center, or clinic
81 which indicates that the student does not wish to be included in
82 the immunization registry. The student must provide such opt-out
83 form to the health center or clinic upon administration of the
84 vaccination. Such health center or clinic shall submit the form
85 to the department. A student may submit the opt-out form
86 directly to the department. Any records or identifying
87 information pertaining to the student shall be removed from the

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88 registry if the student has refused to be included in the
89 immunization registry.

90 4. The immunization registry shall allow for immunization
91 records to be electronically available to entities that are
92 required by law to have such records, including, but not limited
93 to, schools and licensed child care facilities.

94 5. A health care practitioner licensed under chapter 458,
95 chapter 459, ~~or~~ chapter 464, or chapter 465 in this state who
96 administers vaccinations or causes vaccinations to be
97 administered to children from birth through 17 years of age is
98 required to report vaccination data to the immunization
99 registry, unless a parent or guardian of a child has refused to
100 have the child included in the immunization registry by meeting
101 the requirements of subparagraph 2. A health care practitioner
102 licensed under chapter 458, chapter 459, ~~or~~ chapter 464, or
103 chapter 465 in this state who administers vaccinations or causes
104 vaccinations to be administered to college or university
105 students from 18 years of age to 23 years of age at a college or
106 university student health center or clinic is required to report
107 vaccination data to the immunization registry, unless the
108 student has refused to be included in the immunization registry
109 by meeting the requirements of subparagraph 3. Vaccination data
110 for students in other age ranges may be submitted to the
111 immunization registry only if the student consents to inclusion
112 in the immunization registry. The upload of data from existing
113 automated systems is an acceptable method for updating
114 immunization information in the immunization registry. The
115 information in the immunization registry must include the
116 child's name, date of birth, address, and any other unique

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117 identifier necessary to correctly identify the child; the
118 immunization record, including the date, type of administered
119 vaccine, and vaccine lot number; and the presence or absence of
120 any adverse reaction or contraindication related to the
121 immunization. Information received by the department for the
122 immunization registry retains its status as confidential medical
123 information and the department must maintain the confidentiality
124 of that information as otherwise required by law. A health care
125 practitioner or other agency that obtains information from the
126 immunization registry must maintain the confidentiality of any
127 medical records in accordance with s. 456.057 or as otherwise
128 required by law.

129 Section 2. Present subsections (2) through (8) of section
130 465.189, Florida Statutes, are redesignated as subsections (3)
131 through (9), respectively, a new subsection (2) is added to that
132 section, and subsection (1) and present subsection (6) are
133 amended, to read:

134 465.189 Administration of vaccines and epinephrine
135 autoinjection.—

136 (1) In accordance with guidelines of the United States
137 Centers for Disease Control and Prevention for each recommended
138 immunization or vaccine, a pharmacist~~,~~ or a registered intern
139 under the supervision of a pharmacist who is certified under
140 subsection (7)~~(6)~~, may administer the following immunizations or
141 vaccines to a person 6 years of age or older ~~an adult~~ within the
142 framework of an established protocol under a supervising
143 physician licensed under chapter 458 or chapter 459:

144 (a) Immunizations or vaccines listed in the Adult
145 Immunization Schedule ~~as of February 1, 2015,~~ by the United

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146 States Centers for Disease Control and Prevention. ~~The board may~~
147 ~~authorize, by rule, additional immunizations or vaccines as they~~
148 ~~are added to the Adult Immunization Schedule.~~

149 (b) Immunizations or vaccines listed in the Child and
150 Adolescent Immunization Schedule by the United States Centers
151 for Disease Control and Prevention.

152 (c) Immunizations or vaccines recommended by the United
153 States Centers for Disease Control and Prevention for
154 international travel as of July 1, 2015. The board may
155 ~~authorize, by rule, additional immunizations or vaccines as they~~
156 ~~are recommended by the United States Centers for Disease Control~~
157 ~~and Prevention for international travel.~~

158 (d) ~~(e)~~ Immunizations or vaccines approved by the board in
159 response to a state of emergency declared by the Governor
160 pursuant to s. 252.36.

161
162 A registered intern who administers an immunization or vaccine
163 under this subsection must be supervised by a certified
164 pharmacist at a ratio of one pharmacist to one registered
165 intern.

166 (2) To administer an immunization or vaccine to a child
167 younger than 18 years of age, a pharmacist or registered intern
168 certified under subsection (7) must first obtain a medical
169 consent form signed by a person who has the power to consent to
170 medical care or treatment on behalf of the child in accordance
171 with s. 743.0645. The medical consent form must contain a notice
172 stating that the parent or guardian of such child may refuse to
173 have the child included in the immunization registry under s.
174 381.003. If a parent or guardian does not want the child

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175 included in the immunization registry, he or she must provide to
176 the pharmacist or registered intern a completed opt-out form
177 approved by the department upon administration of the vaccine.
178 The pharmacist or registered intern shall submit the opt-out
179 form to the department. If a parent or guardian of a child
180 younger than 18 years of age does not provide an opt-out form,
181 the pharmacist or registered intern must report the vaccination
182 data for such child to the department in accordance with s.
183 381.003.

184 (7)~~(6)~~ Any pharmacist or registered intern seeking to
185 administer vaccines ~~to adults~~ under this section must be
186 certified to administer such vaccines pursuant to a
187 certification program approved by the Board of Pharmacy in
188 consultation with the Board of Medicine and the Board of
189 Osteopathic Medicine. The certification program shall, at a
190 minimum, require that the pharmacist attend at least 20 hours of
191 continuing education classes approved by the board and the
192 registered intern complete at least 20 hours of coursework
193 approved by the board. The program shall have a curriculum of
194 instruction concerning the safe and effective administration of
195 such vaccines, including, but not limited to, potential allergic
196 reactions to such vaccines.

197 Section 3. Subsection (13) of section 465.003, Florida
198 Statutes, is amended to read:

199 465.003 Definitions.—As used in this chapter, the term:

200 (13) "Practice of the profession of pharmacy" includes
201 compounding, dispensing, and consulting concerning contents,
202 therapeutic values, and uses of any medicinal drug; consulting
203 concerning therapeutic values and interactions of patent or

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204 proprietary preparations, whether pursuant to prescriptions or
205 in the absence and entirely independent of such prescriptions or
206 orders; and conducting other pharmaceutical services. For
207 purposes of this subsection, the term "other pharmaceutical
208 services" means monitoring the patient's drug therapy and
209 assisting the patient in the management of his or her drug
210 therapy, and includes reviewing, and making recommendations
211 regarding, the patient's drug therapy and health care status in
212 communication with the patient's prescribing health care
213 provider as licensed under chapter 458, chapter 459, chapter
214 461, or chapter 466, or a similar statutory provision in another
215 jurisdiction, or such provider's agent or such other persons as
216 specifically authorized by the patient; and initiating,
217 modifying, or discontinuing drug therapy for a chronic health
218 condition under a collaborative pharmacy practice agreement.
219 This subsection may not be interpreted to permit an alteration
220 of a prescriber's directions, the diagnosis or treatment of any
221 disease, the initiation of any drug therapy, the practice of
222 medicine, or the practice of osteopathic medicine, unless
223 otherwise permitted by law or specifically authorized by s.
224 465.1865 or s. 465.1895. The term "practice of the profession of
225 pharmacy" also includes any other act, service, operation,
226 research, or transaction incidental to, or forming a part of,
227 any of the foregoing acts, requiring, involving, or employing
228 the science or art of any branch of the pharmaceutical
229 profession, study, or training, and shall expressly permit a
230 pharmacist to transmit information from persons authorized to
231 prescribe medicinal drugs to their patients. The practice of the
232 profession of pharmacy also includes the administration of

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233 vaccines to persons 6 years of age or older ~~adults~~ pursuant to
234 s. 465.189, the testing or screening for and treatment of minor,
235 nonchronic health conditions pursuant to s. 465.1895, and the
236 preparation of prepackaged drug products in facilities holding
237 Class III institutional pharmacy permits. The term also includes
238 the ordering and evaluating of any laboratory or clinical
239 testing; conducting patient assessments; and modifying,
240 discontinuing, or administering medicinal drugs pursuant to s.
241 465.0125 by a consultant pharmacist.

242 Section 4. This act shall take effect July 1, 2021.

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Committee on Health Policy

BILL: SB 768

INTRODUCER: Senator Baxley

SUBJECT: Immunizations

DATE: March 29, 2021

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Rossitto Van Winkle	Brown	HP	Favorable
2.	Moody	Cox	CF	Pre-meeting
3.			RC	

I. Summary:

SB 768 expands the scope of authority for certified pharmacists and pharmacy interns to administer vaccines within the framework of an established protocol with a supervising physician.

Under the bill, pharmacists and pharmacy interns are authorized to administer vaccines to persons six years of age or older, as opposed to current law which limits such administration to adults. To administer vaccines to children, the bill requires the pharmacist or intern to obtain a medical consent form for minors, with a notice that the parent or guardian may opt-out from the child's information being reported to the statewide immunization registry. The bill requires pharmacists and pharmacy interns to either report the child's vaccination data to the registry or send a completed opt-out form.

The bill authorizes pharmacists and pharmacy interns to administer to persons six years of age or older, under the protocol, any immunization or vaccine that is:

- Listed in the federal Centers for Disease Control and Prevention's (CDC) Adult Immunization Schedule, for adult patients;
- Listed in the CDC's Child and Adolescent Schedule, for patients who are children;
- Recommended by the CDC for international travel; or
- Approved by the Board of Pharmacy (BOP) in response to a state of emergency declared by the Governor.

The bill provides an effective date of July 1, 2021.

II. Present Situation:

Immunizations – U. S. Department of Health and Human Services

The Office of Infectious Disease and HIV/AIDS Policy (Office), in the U. S. Department of Health and Human Services (HHS), oversees the National Vaccine Program, which provides strategic leadership for vaccine and immunization activities among federal agencies and to the states and other stakeholders, to help reduce the burden of preventable infectious diseases. The Office's services include the National Vaccine Strategic Plans (NVSP) and National Vaccine Advisory Committee (NVAC).¹ The NVSP for 2021-2025, released January 19, 2021, is the newest roadmap to coordinate vaccine development and use and is based on the NVAC's recommendations that revise the Standards for Adult Immunization Practices.²

The Centers for Disease Control and Prevention's Immunization Recommendations

The CDC, under the Secretary of HHS,³ sets the adult and childhood immunization and vaccination schedules based on the recommendations from the Advisory Committee on Immunization Practices (ACIP).⁴ The ACIP works with professional organizations, such as the American Academy of Pediatrics, the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, and the American College of Physicians, to develop annual childhood and adult immunization schedules.⁵ The CDC reviews the ACIP's recommendations and, if approved, they are published as the CDC's official recommendations for immunizations for the population.⁶ The current recommended immunization schedule for persons 18 years of age and older includes:⁷

- Influenza (annually) (IIV, RIV or LAIV);
- Measles, mumps, rubella (MMR) (if patient is born in 1957 or later);
- Zoster (ZVL) or (RZV);
- Pneumococcal polysaccharide (PPSV23);
- Haemophilus influenza Type B (Hib);
- Hepatitis B (HepB);
- Varicella (VAR) (if patient is born 1980 or later);
- Tetanus, diphtheria, pertussis (Tdap or Td) (booster every 10 years);
- Human papillomavirus (HPV);

¹ U.S. Department of Health & Human Services, *Vaccines & Immunizations*, available at <https://www.hhs.gov/vaccines/index.html> (last visited Mar. 29, 2021).

² U.S. Department of Health & Human Services, *Vaccines National Strategic Plan*, available at <https://www.hhs.gov/vaccines/vaccines-national-strategic-plan/index.html> (last visited Mar. 29, 2021).

³ U.S. Department of Health & Human Service, HHS Leadership, *Office of the Secretary Leaders*, available at <https://www.hhs.gov/about/leadership/index.html#opdiv> (last visited Mar. 29, 2021).

⁴ Center for Disease Control and Prevention, Advisory Committee on Immunization Practices (ACIP), *Role of the Advisory Committee on Immunization Practices in CDC's Vaccine Recommendations*, available at <https://www.cdc.gov/vaccines/acip/committee/role-vaccine-recommendations.html> (last visited Mar. 29, 2021).

⁵ Centers for Disease Control and Prevention, Advisory Committee on Immunization Practices (ACIP), *ACIP Recommendations*, available at <https://www.cdc.gov/vaccines/acip/recommendations.html> (last visited Mar. 29, 2021).

⁶ *Id.*

⁷ Centers for Disease Control and Prevention, *Recommended Adult Immunization Schedule for Ages 19 Years or Older, United States, 2020*, available at <https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html> (last visited Mar. 29, 2021). The schedule provides the recommended age, as well as the administration intervals for vaccines that require multiple doses. Some vaccines are recommended only for populations with special situations that put those populations at higher risk.

- Pneumococcal conjugate (PCV13);
- Hepatitis A (HepA);
- Meningococcal A, C, W, Y (MenACWY); and
- Meningococcal B (MenB).

New vaccines are considered for addition to the schedule after being licensed by the Food and Drug Administration (FDA).⁸ Not all newly licensed vaccines are added to the schedule. Some licensed vaccines are only recommended for people who are traveling to areas where certain vaccine-preventable diseases occur, such as yellow fever, cholera, dengue, Japanese encephalitis, plague, rabies, smallpox, and typhoid.⁹

CDC Health Information for International Travel

The CDC's *Health Information for International Travel*, commonly called the Yellow Book, is published biennially by the CDC as a reference to advise international travelers about health risks.¹⁰ The Yellow Book includes the CDC's most current travel health guidelines, including pre-travel vaccine recommendations and destination-specific health advice. The Yellow Book is authored by subject-matter experts both within and outside the CDC and its guidelines are evidence-based and supported by best practices.¹¹

Certain vaccinations are recommended by the CDC to protect international travelers from illness and prevent the importation of infectious diseases across international borders. The Yellow Book recommends that persons traveling internationally should be up to date on all CDC-recommended vaccines.¹² Additionally, the Yellow Book recommends additional vaccinations based on a traveler's destination and other factors.

Florida's Immunization Policy

Communicable Disease Prevention and Control

The Department of Health (DOH) is responsible for the state's public health system.¹³ As part of fulfilling its public health mission, the DOH is responsible for conducting a communicable disease prevention and control program. A communicable disease is any disease caused by the transmission of a specific infectious agent, or its toxic products, from an infected person, animal, or the environment to a susceptible host, either directly or indirectly.¹⁴

⁸ College of Physicians of Philadelphia, *The History of Vaccines: The Development of the Immunization Schedule*, available at <http://www.historyofvaccines.org/content/articles/development-immunization-schedule> (last visited Mar. 29, 2021).

⁹ *Id.* For a complete list of FDA-licensed vaccines, see U.S. Food & Drug Administration, *Vaccines Licensed for Use in the United States*, (last rev. Feb. 10, 2021), available at <https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states> (last visited Mar. 29, 2021).

¹⁰ Centers for Disease Control and Prevention. *CDC Yellow Book 2020: Health Information for International Travel*, available at <https://wwwnc.cdc.gov/travel/page/yellowbook-home> (last visited Mar. 29, 2021) (hereinafter cited as "CDC Yellow Book").

¹¹ *Id.*

¹² CDC Yellow Book.

¹³ Section 381.001, F.S.

¹⁴ Section 381.003(1), F.S.

The DOH communicable disease program includes, but need not be limited to, programs for the prevention and control of:

- Tuberculosis;
- Human immunodeficiency virus (HIV) infection;
- Acquired Immune Deficiency Syndrome (AIDS);
- Sexually transmissible diseases;
- Communicable diseases of public health significance; and
- Vaccine-preventable diseases,¹⁵ including programs to immunize school children¹⁶ and the development of an automated, electronic, and centralized database or registry for immunization records.¹⁷

The DOH may adopt rules related to the prevention and control of communicable diseases and the administration of the immunization registry. Such rules may include procedures for:¹⁸

- Investigating disease;
- Timeframes for reporting disease;
- Definitions;
- Procedures for managing specific diseases;
- Requirements for follow-up reports on disease exposure; and
- Procedures for providing access to confidential information necessary for disease investigations.

Immunizations for Adults Recommended by the DOH

The DOH recommends the following vaccines for adults:¹⁹

- Human Papillomavirus (HPV);
- Tetanus-diphtheria-pertussis (Tdap);
- Tetanus-diphtheria (Td) booster every ten years;
- Hepatitis A;
- Meningococcal;
- Measles-mumps-rubella (MMR);
- Varicella (chickenpox);
- Seasonal influenza;
- Zoster (shingles); and
- Pneumococcal.

¹⁵ Measles, mumps, rubella, pertussis, diphtheria, tetanus, polio, varicella, pneumococcal disease, hepatitis A, hepatitis B, influenza, meningococcal and Haemophilus influenza type b (Hib) are all preventable by vaccine. See Department of Health, *Vaccine Preventable Diseases*, available at <http://www.floridahealth.gov/diseases-and-conditions/vaccine-preventable-disease/index.html> (last visited Mar. 29, 2021).

¹⁶ See s. 1003.22(3)-(11), F.S.

¹⁷ Section 381.003(1), F.S.

¹⁸ Section 381.003(2), F.S.

¹⁹ The Florida Department of Health, *Don't Miss Opportunities to Vaccinate!*, available at <http://www.floridahealth.gov/programs-and-services/immunization/publications/documents/opportunities-to-vaccinate-adult.pdf> (last visited Mar. 29, 2021).

Required Immunizations for Children

Each school district board and non-public school governing body is required to ensure that every child entering school in kindergarten through grade 12 must present or have on file a Florida Certificate of Immunization (FCI) before entering or enrolling in school.²⁰ Children entering, attending, or transferring to Florida public or non-public schools, kindergarten through grade 12, must have on file as part of their permanent school record²¹ an FCI documenting that they have had the following immunizations:²²

- Four or five doses of DTaP (Diphtheria-tetanus-acellular pertussis);
- Four or five doses of IPV (Inactivated polio vaccine);
- Two doses of MMR (Measles-mumps-rubella);
- Three doses of Hep B (Hepatitis B);
- One Tdap (Tetanus-diphtheria-acellular pertussis);
- Two doses of Varicella (unless there is a history of varicella disease documented by a health care provider); and
- If entering a public or non-public school in seventh grade or later, an additional dose of Tdap (Tetanus-diphtheria-acellular pertussis).

Private health care providers may grant a temporary medical exemption (TME), documented on the FCI form,²³ for those who are in the process of completing any necessary immunizations. The TME incorporates an expiration date after which the exemption is no longer valid, and the immunizations must be completed before or at that time. A permanent medical exemption may be granted if a child cannot be fully immunized due to medical reasons. In such case, the child's physician must state in writing the reasons for the exemption on the FCI form, based on valid clinical reasoning or evidence.²⁴

A request for a religious exemption from immunizations requires the parent or guardian to provide the school or facility with a religious exemption immunization form.²⁵ The form is issued only by county health departments and only for children who are not immunized because of the family's religious tenets or practices. Exemptions for personal or philosophical reasons are not permitted under Florida law.²⁶

²⁰ Section 1003.22(4), F.S.

²¹ *Id.*

²² See also Department of Health, *School Immunization Requirements* (last modified Mar. 8, 2021), available at <http://www.floridahealth.gov/programs-and-services/immunization/children-and-adolescents/school-immunization-requirements/index.html#childcare> (last visited Mar. 29, 2021).

²³ Department of Health, Form DH-680, *Florida Certification of Immunizations* (Jul. 2010) (on file with Senate Health Policy Committee).

²⁴ Department of Health, *Exemptions from Required Immunizations*, (last updated Sept. 18, 2019), available at <http://www.floridahealth.gov/programs-and-services/immunization/children-and-adolescents/immunization-exemptions/index.html> (last visited Mar. 29, 2021).

²⁵ Department of Health, Form DH 681, *Religious Exemption From Immunization*, (Jul. 2008) puts a parent or guardian on notice that any child not immunized against a communicable disease that has been declared a communicable disease emergency will be temporarily excluded from school until such time as the county health department says the child can return. (on file with the Senate Health Policy Committee).

²⁶ Department of Health, Immunization Section, Bureau of Communicable Diseases, *Immunization Guidelines, Florida Schools, Childcare Facilities and Family Daycare Homes* (Mar. 2013), available at <http://www.floridahealth.gov/%5C/programs-and-services/immunization/schoolguide.pdf> (last visited Mar. 29, 2021).

The DOH Immunization Registry (Florida SHOTS) for Children

The DOH must ensure that all children are immunized against vaccine-preventable diseases and be included in the immunization registry, for the purpose of enhancing the DOH's immunization activities and improve immunization for all children. Florida's State Health Online Tracking System (SHOTS) is the free, statewide, centralized online immunization registry that assists healthcare providers, schools, and parents keep track of immunization records.²⁷ The program seeks to ensure a cause-and-effect response by monitoring immunization levels in vulnerable populations throughout the state, thereby contributing to strategies to attain and sustain high immunization levels.

The DOH immunization registry allows for immunization records to be electronically available to entities that are required by law to have such records, including schools and licensed child care facilities.²⁸

Currently only allopathic and osteopathic physicians and nurses who administer vaccinations to children from birth to 18 years of age, or student health centers or clinics who administer vaccinations to college or university students who are 18 to 23 years of age, are required to report certain vaccination data to the immunization registry, unless the parents, guardian, or the college or university student opts-out.²⁹

To be excluded from the registry, the parent or guardian of the child birth through age 17, must sign a DOH form, obtained from the DOH or the child's health care provider. The parent or guardian must provide the opt-out form to the health care practitioner at the time of the immunization. The health care practitioner must then submit the form to the DOH; or the parent or guardian may submit the opt-out form directly. Any records or identifying information pertaining to the child must be removed from the registry if the parent or guardian opts-out. In addition, each consent form for the immunizations of the child must contain a notice stating that the parent or guardian may refuse to have the child included in the immunization registry.³⁰

A college or university student who is 18 to 23 years old, who obtains an immunization at a student health center or clinic, may also opt-out of the immunization registry by signing a form obtained from the DOH, health center, or clinic which indicates that he or she does not want to be included. The student must provide the opt-out form to the health center or clinic at the time of the immunization. The health center or clinic must submit the form to the DOH; or the student may submit the form directly. Any records or identifying information pertaining to the college or university student must be redacted from the registry if the student has opted-out of the immunization registry.³¹

Vaccination data for students in other age ranges may also be submitted to the immunization registry but only if the student consents to the data being included. The uploading of data from

²⁷ Department of Health, Providing Records to Patients, *Deliver Accurate, Timely Records*, (last modified Sept. 17, 2019), available at <http://www.floridahealth.gov/programs-and-services/immunization/information-for-healthcare-providers/providing-records-to-patients/> (last visited Mar. 29, 2021).

²⁸ Section 381.003(1)(e)4., F.S.

²⁹ Section 381.003(1)(e)5., F.S.

³⁰ Section 381.003 (1)(e)2., F.S.

³¹ Section 381.003(1)(e)3., F.S.

existing automated systems is an acceptable method for updating immunization information into the immunization registry. The information submitted to the immunization registry must include:³²

- The child's name;
- Date of birth;
- Address;
- Any unique identifier necessary to identify the child;
- The immunization record, including:
 - The date of the immunization;
 - Type of vaccine administered;
 - Vaccine lot number;
 - The presence or absence of any adverse reaction; and
 - Any contraindications noted to the immunization.

Information received by the DOH for the immunization registry is confidential medical information, and the DOH must maintain the confidentiality of that information. Health care practitioners who obtain information from the DOH immunization registry must also keep that information confidential.³³

The Practice of Pharmacy

The BOP, in conjunction with the DOH, regulates the practice of pharmacists and registered pharmacist interns pursuant to ch. 465, F.S.³⁴

Licensure

To be licensed as a pharmacist in Florida, a person must:³⁵

- Complete an application and remit an examination fee;
- Be at least 18 years of age;
- Hold a degree from an accredited and approved school or college of pharmacy;³⁶
- Have completed a BOP-approved internship; and
- Successfully complete the BOP-approved examination.

A pharmacist must complete at least 30 hours of BOP-approved continuing education during each biennial licensure renewal period.³⁷ Pharmacists who are certified to administer vaccines or epinephrine auto-injections must complete a three-hour continuing education course on the safe

³² *Id.*

³³ Sections 381.003(1)(e)5 and 456.057(9)(a), F.S.

³⁴ Sections 465.004 and 465.005, F.S.

³⁵ Section 465.007, F.S. The DOH may also issue a license by endorsement to a pharmacist who is licensed in another state upon meeting the applicable requirements set forth in law and rule. *See s. 465.0075, F.S.*

³⁶ If the applicant has graduated from a four-year undergraduate pharmacy program of a school or college of pharmacy located outside the United States, the applicant must demonstrate proficiency in English, pass the BOP-approved Foreign Pharmacy Graduate Equivalency Examination, and complete a minimum of 500 hours in a supervised work activity program within Florida under the supervision of a DOH-licensed pharmacist.

³⁷ Section 465.009, F.S.

and effective administration of vaccines and epinephrine injections, as a part of their licensure renewal.³⁸

Scope of Pharmacy Practice

In Florida, the practice of the profession of pharmacy includes:³⁹

- Compounding, dispensing, and consulting concerning the contents, therapeutic values, and uses of a medicinal drug;
- Consultation concerning therapeutic values and interactions of patented or proprietary preparations;
- Monitoring a patient's drug therapy and assisting the patient in the management of his or her drug therapy;
- Reviewing, and making recommendations regarding the patient's drug therapy and health care status in communication with the patient's prescribing health care provider as authorized by the patient;
- Initiating, modifying, or discontinuing drug therapy for a chronic health condition under a collaborative pharmacy practice agreement;⁴⁰
- Transmitting information from prescribers to their patients;
- Administering antipsychotropic medications by injection;⁴¹
- Preparing prepackaged drug products in facilities holding Class III institutional facility permits;⁴²
- Ordering and dispensing over-the-counter drugs approved by the FDA;⁴³
- Ordering and dispensing within his or her professional judgment, subject to specified conditions:⁴⁴
 - Certain oral analgesics for mild to moderate pain;
 - Anti-nausea preparations;
 - Certain antihistamines and decongestants;
 - Certain topical antifungal/antibacterial;
 - Topical anti-inflammatory preparations containing an amount of hydrocortisone not exceeding 2.5 percent;
 - Otic antifungal/antibacterial;
 - Salicylic acid;
 - Vitamins;
 - Ophthalmics;
 - Certain histamine H2 antagonists;
 - Acne products; and
 - Topical antivirals for herpes simplex infections of the lips.

³⁸ Section 465.009(6), F.S.

³⁹ Section 465.003(13), F.S.

⁴⁰ Section 465.1865, F.S.

⁴¹ Section 465.1893, F.S.

⁴² A Class III institutional pharmacy are those pharmacies affiliated with a hospital. *See s. 465.019(2)(d)*, F.S.

⁴³ Section 465.186, F.S.

⁴⁴ Fla. Admin. Code R. 64B16-27.220 (2020).

Pharmacist Authorization to Administer Immunizations and Epinephrine Auto-Injections

A pharmacist may be authorized to administer immunizations to adults, according to CDC guidelines, and epinephrine auto-injections to address unforeseen allergic reactions, within the framework of an established protocol with a supervising physician. A pharmacist must become certified to administer immunizations and vaccines that are:

- Listed in the CDC Adult Immunization Schedule as of February 1, 2015;
- Listed in the Adult Immunization Schedule after February 1, 2015, and authorized by BOP rule;
- Recommended by the CDC for international travel as of July 1, 2015;
- Recommended by the CDC for international travel after July 1, 2015, and authorized by BOP rule;⁴⁵ or
- Approved by the BOP in response to an emergency declared by the Governor.⁴⁶

To be certified to administer vaccines, a pharmacist must:

- Enter into a written protocol with a supervising medical or osteopathic physician, and the protocol must:⁴⁷
 - Specify the categories of patients and patient conditions for which the pharmacist may administer vaccines;
 - Be appropriate to the pharmacist's training and certification for administering the vaccine;
 - Outline the process and schedule for the review of the administration of vaccines by the pharmacist under the written protocol; and
 - Be submitted to the BOP;
- Successfully complete a BOP-approved vaccine administration certification program that consists of at least 20 hours of continuing education;⁴⁸
- Pass an examination and demonstrate vaccine administration technique;⁴⁹
- Maintain and make available patient records using the same standards for confidentiality and retention of such records as required by s. 456.057, F.S., and maintain the records for at least five years;⁵⁰ and
- Maintain at least \$200,000 of professional liability insurance.⁵¹

A pharmacist may also administer epinephrine using an auto-injector delivery system within the framework of the established protocol under a supervising physician in order to address any unforeseen allergic reactions.⁵²

⁴⁵ Section 465.189(1)(b), F.S.

⁴⁶ Section 465.189, (1)(c), F.S.

⁴⁷ Section 465.189(7), F.S.

⁴⁸ Section 465.189(6), F.S., Fla. Admin. Code R. 64B16-26.1031 (2020), provides more detail regarding subject matter that must be included in the certification course.

⁴⁹ *Id.*

⁵⁰ Section 456.057, F.S., requires certain health care practitioners to develop and implement policies, standards, and procedures to protect the confidentiality and security of medical records, provides conditions under which a medical record may be disclosed without the express consent of the patient, provides procedures for disposing of records when a practice is closing or relocating, and provides for enforcement of its provisions.

⁵¹ Section 465.189(3), F.S.

⁵² Section 465.189(2), F.S. A certified registered pharmacy intern is not permitted to administer epinephrine auto-injections.

A certified pharmacist is not authorized under Florida Statutes to administer immunizations to children.

Pharmacy Interns

To become a pharmacy intern, a person must be certified by the BOP and enrolled in an intern program at an accredited school or college of pharmacy or as a graduate of an accredited school or college of pharmacy and not yet licensed as a pharmacist in Florida.⁵³ The BOP's rules outline the registration process for pharmacy interns and the internship program requirements for U.S. pharmacy students or graduates and foreign pharmacy graduates.⁵⁴

A pharmacist is responsible for any delegated act performed by a registered pharmacy intern employed or supervised by the pharmacist.⁵⁵

To administer vaccines, a registered pharmacy intern must complete the same BOP-approved vaccine administration certification program as the pharmacist and also be supervised by a certified pharmacist, at a ratio of one pharmacist to one certified registered intern. Like pharmacists, pharmacy interns are not authorized under Florida Statutes to administer immunizations to children.⁵⁶

Access to Vaccines During the COVID-19 Pandemic

On March 9, 2020, Governor DeSantis issued Executive Order 20-52 declaring a state of emergency for the entire state of Florida as a result of COVID-19, allowing for the suspension of certain statutes and rules that prevent, hinder, or delay any necessary action in dealing with the state of emergency caused by COVID-19.⁵⁷

Federal Action to Authorize Pharmacists to Vaccinate Children

On August 19, 2020, the HHS issued an amendment to the declaration published on March 17, 2020,⁵⁸ relating to the Public Readiness and Emergency Preparedness Act (PREP Act).⁵⁹ The amendment authorizes, effective August 24, 2020, state-licensed pharmacists (and pharmacy interns acting under their supervision) to order and administer vaccines to individuals ages three through 18 years, nationwide, subject to several requirements:⁶⁰

⁵³ Section 465.013, F.S.

⁵⁴ Fla. Admin. Code R. 64B16-26.2032 (U.S. pharmacy students/graduates); Fla. Admin. Code R. 64B16-26.2033 (foreign pharmacy graduates).

⁵⁵ Fla. Admin. Code R. 64B16-27.430 (2020).

⁵⁶ Section 465.189(6), F.S.

⁵⁷ State of Florida, Office of the Governor, *Executive Order*, Number 20-52, available at https://www.flgov.com/wp-content/uploads/orders/2020/EO_20-52.pdf (last visited Mar. 29, 2021).

⁵⁸ 85 Fed. Reg. 15198 (2020).

⁵⁹ The PREP Act authorizes the Secretary of Health and Human Services the Secretary to issue a Declaration to provide liability immunity to certain individuals and entities against any claim of loss caused by, arising out of, relating to, or resulting from the manufacture, distribution, administration, or use of medical countermeasures Covered Countermeasures, except for claims involving "willful misconduct" as defined in the PREP Act. Under the PREP Act, a Declaration may be amended as circumstances warrant. The PREP Act was enacted on December 30, 2005, as Public Law 109-148, Division C, section 2.

⁶⁰ 85 Fed. Reg. 136, 52136 - 52141 (2020); see <https://www.hhs.gov/about/news/2020/08/19/hhs-expands-access-childhood-vaccines-during-covid-19-pandemic.html> (last visited Mar. 29, 2021).

- The vaccine must be authorized or approved by the FDA.
- The vaccination must be ordered and administered according to the ACIP's standard immunization schedule.⁶¹
- The licensed pharmacist must complete a practical training program of at least 20 hours that is approved by the Accreditation Council for Pharmacy Education (ACPE).
- The licensed or registered pharmacy intern must complete a practical training program that is approved by the ACPE.
- The licensed pharmacist and licensed or registered pharmacy intern must have current certificates in basic cardiopulmonary resuscitation.

According to the announcement of the amendment, this federal action was for the purpose of increasing access to lifesaving childhood vaccines and decreasing the risk of vaccine-preventable disease outbreaks so children across the United States could return to daycare, preschool, and school.⁶²

State Emergency Action to Authorize Pharmacists to Vaccinate Children

On October 1, 2020, the State Surgeon General issued an emergency order,⁶³ pursuant to authority granted by Executive Order No. 20-52, suspending the provision of s. 465.189(1), F.S., to the extent necessary to authorize a certified pharmacist, or a certified, registered pharmacy intern, to administer vaccines approved or licensed by the FDA to individuals under 18 years of age if the vaccine is approved for use in individuals under 18 years of age and upon receipt of a medical consent for the minor signed by a person who has the power to consent to the minor's medical care or treatment.

The Surgeon General's emergency order also authorized such practitioners to order and administer vaccines according to the CDC's ACIP immunization schedules and any vaccine approved by the FDA to immunize individuals against COVID-19.

This emergency order remains in effect until Executive Order No. 20-52, including any extensions, expires or is otherwise modified by order of the State Surgeon General.

III. Effect of Proposed Changes:

SB 768 expands the scope of persons to whom certified pharmacists and pharmacy interns, under a protocol with a supervising physician, may administer CDC-listed and recommended

⁶¹ Centers for Disease Control and Prevention, *Immunization Schedules: For Health Care Providers*, available at <https://www.cdc.gov/vaccines/schedules/hcp/index.html> (last visited Mar. 29, 2021). The immunization schedule recommends that certain vaccines be administered only to children of a certain age. For example, the second dose of both the measles, mumps, and rubella vaccine, as well as the varicella vaccine, should not be administered until a child is between four and six years old. See *Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger*, United States, 2020, CDC (Jan. 29, 2020), available at <https://www.cdc.gov/vaccines/schedules/downloads/child/0-18yrs-child-combined-schedule.pdf> (last visited Mar. 29, 2021).

⁶² U.S. Department of Health and Human Services, *HHS Expands Access to Childhood Vaccines during COVID-19 Pandemic*, available at <https://www.hhs.gov/about/news/2020/08/19/hhs-expands-access-childhood-vaccines-during-covid-19-pandemic.html> (last visited Mar. 29, 2021).

⁶³ State of Florida, Department of Health, State Surgeon General, *Emergency Order*, (Oct. 1, 2020) DOH No. 20-014, available at <https://floridahealthcovid19.gov/wp-content/uploads/2020/10/DOH-Emergency-Order-No-20-014.pdf> (last visited Mar. 29, 2021).

immunizations and vaccines. Under the bill, pharmacists and pharmacy interns may vaccinate a person six years of age or older, instead of being limited to adults as under current law.

The bill requires that a certified pharmacist or pharmacy intern who administers an immunization or vaccine to a child under 18 years of age, must:

- Obtain a medical consent form that:
 - Contains an opt-out notice stating that a parent or guardian may opt-out of the DOH immunization registry; and
 - Is signed by a person who has the power to consent to medical care or treatment for the minor; which is defined as a natural or adoptive parent, legal custodian, or legal guardian; and, either
- Report vaccination data to the immunization registry; or
- Submit to DOH an opt-out immunization registry form that may be provided by the parent or guardian to the pharmacist or registered intern at the time the vaccine is administered.

The bill modifies the source list for immunizations and vaccines that certified pharmacists and pharmacy interns may administer. Currently, as mentioned above, pharmacists and pharmacy interns, under a protocol with a supervising physician, are limited to administering vaccines to adults that are:

- Listed in the CDC's Adult Immunization Schedule as of February 1, 2015;
- Recommended by the CDC for international travel as of July 1, 2015;
- Authorized by BOP rule if listed or recommended, respectively, by the CDC after those dates; or
- Approved by the BOP in response to a state of emergency declared by the Governor.

The bill authorizes certified pharmacists and certified registered pharmacy interns, still under a protocol with a supervising physician, to administer vaccines and immunizations to persons six years of age or older that are:

- Listed in the CDC's Adult Immunization Schedule, without reference to the date they were listed, if the vaccine recipient is an adult;
- Listed in the CDC's Child and Adolescent Schedule, if the vaccine recipient is a child;
- Recommended by the CDC for international travel, without reference to the date they were recommended; or
- Approved by the BOP in response to a state of emergency declared by the Governor.

Under the bill, immunizations and vaccines added to the Adult Immunization Schedule after February 1, 2015, or recommended by the CDC for international travel after July 1, 2015, would no longer need authorization by BOP rule to be available for administration to adults by pharmacists and pharmacy interns. *See* Section IV.E. of this analysis for information concerning the removal of these dates from statute.

The bill provides an effective date of July 1, 2021.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

Article II, Section 3, of the Florida Constitution has been interpreted by Florida courts to prohibit the Legislature from delegating its legislative power to others.⁶⁴ Under this non-delegation principle, Florida courts have held that the Legislature may enact laws that adopt federal statutes or other federal regulations in existence and in effect at the time the Legislature acts; however, if the Legislature incorporates into a Florida statute a *future* federal act or regulation, courts have held that such incorporation constitutes an unconstitutional delegation of legislative power.⁶⁵

The bill incorporates CDC vaccination schedules and recommendations into Florida Statutes by reference and deletes the current statute's references to CDC schedules and recommendations that were in effect on certain dates in the past. The removal of those dates from statute could be viewed as opening-up authorization of vaccines that pharmacists and pharmacy interns may administer to include those currently listed or recommended by the CDC and those that may be listed or recommended by the CDC in the future.

However, when a statute incorporates a federal law or regulation by reference, in order to avoid holding the subject statute unconstitutional, Florida courts generally interpret the statute as incorporating only the federal law or regulation in effect on the date of the Legislature's action to enact the Florida law, reasoning that the Legislature is presumed to have intended to enact a valid and constitutional law.⁶⁶

Under that premise, SB 768 may be interpreted by courts as authorizing pharmacists and pharmacy interns to administer vaccines that appear on the named CDC schedules or

⁶⁴*Abbott Laboratories v. Mylan Pharmaceuticals, Inc.*, 15 So.3d 642 (Fla. 1d DCA 2009), citing *Gallagher v. Motors Ins. Corp.*, 605 So.2d 62, 71 (Fla. 1992).

⁶⁵*State v. Rodriguez*, 365 So.2d 157, 160 (Fla.1978).

⁶⁶ *Id.*

recommended by the CDC for international travel as of the date of the bill's passage or enactment, not vaccines that may be added to the CDC schedules or recommended by the CDC afterwards.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

By making childhood vaccinations available to Medicaid recipients through additional providers, the bill may result in additional childhood vaccinations being administered in the Medicaid program, which may increase the program's vaccination costs. The fiscal impact is indeterminate at this time.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends sections 381.003, 465.189, and 465.003 of the Florida Statutes.

IX. Additional Information:

A. Committee Substitute – Statement of Changes:

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.