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A bill to be entitled An act relating to assisted living facilities; amending s. 400.4178, F.S.; revising training requirements for staff that provide special care for residents who have Alzheimer's disease or related disorders; amending s. 400.424, F.S.; amending provisions relating to contracts between the facilities and their residents; amending s. 400.4255, F.S.; revising guidelines for providing nursing services to residents; allowing facilities to honor do-not-resuscitate orders; amending s. 400.427, F.S.; prohibiting a staff member's acting as a resident's attorney-in-fact, with exceptions; amending s. 400.441, F.S., relating to rulemaking authority; deleting firesafety requirements from the rulemaking authority of the Department of Elderly Affairs; providing authority to make rules pertaining to advertising, nursing services, and security; deleting authority to dispose of fees and fines; removing from the facilities the responsibility for the medical regulation of chemical restraints; deleting a requirement to send proposed rule drafts to the Legislature; allowing the Department of Elderly Affairs, rather than the Agency for Health Care Administration, to provide waivers from department rules; requiring the department, rather than the agency, to develop abbreviated inspection procedures and standards; deleting a requirement of an annual report; creating s.

1 400.4411, F.S.; providing firesafety standards; amending s. 400.452, F.S., relating to 2 3 departmental training requirements; allowing the department to charge a fee for approving 4 5 training curricula and training providers; 6 providing an effective date. 7 8 Be It Enacted by the Legislature of the State of Florida: 9 10 Section 1. Section 400.4178, Florida Statutes, is 11 amended to read: 400.4178 Special care for persons with Alzheimer's 12 disease or other related disorders.--13 14 (1) A facility that which advertises that it provides 15 special care for persons who have with Alzheimer's disease or 16 other related disorders must meet the following standards of 17 operation: (a) 1. If the facility has 17 or more residents, have 18 19 an awake staff member on duty at all hours of the day and 20 night.; or (b)2. If the facility has fewer than 17 residents, 21 have an awake staff member on duty at all hours of the day and 22 night or have mechanisms in place to monitor and ensure the 23 24 safety of the facility's residents. (c)(b) Offer activities specifically designed for 25 persons who are cognitively impaired. 26 (d)(c) Have a physical environment that provides for 27 28 the safety and welfare of the facility's residents. 29 (e) (d) Employ staff or contract with staff who 30 complete have completed the training and continuing education 31 required in subsection (2).

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- Staff of assisted living facilities that provide special care for residents who have Alzheimer's disease or related disorders must complete the following training and continuing education requirements:
- Facility staff who have An individual who is employed by a facility that provides special care for residents with Alzheimer's disease or other related disorders, and who has regular contact with such residents, must complete up to 4 hours of initial dementia-specific training developed or approved by the department. The training shall be completed within 3 months after beginning employment. Completion of and shall satisfy the core training program under s. 400.452 satisfies this requirement requirements of s. 400.452(2)(q).
- (b) In addition to satisfying the training requirements of paragraph (a), facility staff who provide A direct caregiver who is employed by a facility that provides special care for residents with Alzheimer's disease or other related disorders, and who provides direct care to such residents, must complete the required initial training and 4 additional hours of training developed or approved by the department. The training shall be completed within 9 months after beginning employment and shall satisfy the core training requirements of s. 400.452(2)(g).
- (c) Facility staff who have only An individual who is employed by a facility that provides special care for residents with Alzheimer's disease or other related disorders, but who only has incidental contact with such residents, must be given, at a minimum, general information on interacting with individuals who have with Alzheimer's disease or other related disorders, within 3 months after beginning employment. Such information may be provided by the facility.

- In addition to the training required under 2. subsection (2), a direct caregiver must participate in a minimum of 4 contact hours of continuing education during each calendar year following the year in which the caregiver obtains the initial training in topics relating to dementia. The continuing education must include one or more topics included in the dementia-specific training developed or approved by the department, in which the caregiver has not received previous training.
 - subsection (2) need not repeat that training upon changing Upon completing any training listed in subsection (2), the employee or direct caregiver shall 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. However, direct care staff must continue to The employee or direct caregiver must comply with other applicable continuing education requirements.
 - (5) The department, or its designee, shall approve the initial and continuing education courses and providers for training required under subsection (2). The department may charge a reasonable fee to review the curriculum and qualifications of anyone who seeks to provide training courses approved under this section and adopted by rule.
 - (6) The department shall keep a current list of approved training courses and providers who are approved to provide initial and continuing education for staff of

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facilities that provide special care for persons with Alzheimer's disease or other related disorders.

(6)(7) Any facility more than 90 percent of whose residents receive monthly optional supplementation payments is not required to pay for the training and education programs required under this section. A facility that has one or more such residents shall pay a reduced fee that is proportional to the percentage of such residents in the facility. A facility that does not have any residents who receive monthly optional supplementation payments must pay a reasonable fee, as established by the department by rule, for such training and continuing education programs provided by the department. A facility that has one or more such residents shall pay a reduced fee that is proportional to the percentage of residents in the facility. If 90 percent or more of the residents of a facility receive monthly optional supplementation payments, the facility is not required to pay for the training and continuing education programs required under this section.

(7)(8) The department shall adopt rules to establish standards for trainers and training courses, to set fee schedules, and to implement facility standards established by this section.

Section 2. Section 400.424, Florida Statutes, is amended to read:

400.424 Contracts.--

(1) The presence of each resident in a facility shall be covered by a contract, executed at the time of admission or prior thereto, between the licensee and the resident or, if applicable, the resident's his or her designee or legal representative. Each party to the contract shall be provided

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with a duplicate original thereof, and the licensee shall keep on file in the facility all such contracts. The licensee may not destroy or otherwise dispose of any such contract until 5 years after its expiration.

- (2) Each contract must contain express provisions specifically setting forth the services and accommodations to be provided by the facility; the rates or charges; provision for at least 30 days' written notice of a rate increase; the rights, duties, and obligations of the residents, other than those specified in s. 400.428; and other matters that the parties deem appropriate.
- (3) Whenever money is deposited or advanced by a resident on in a contract as security for performance of the contract agreement or as advance rent for other than the next immediate rental period:
 - (a) The licensee shall either:
- 1. Hold the total amount of money in a separate
 non-interest-bearing account in a Florida banking institution
 for the benefit of the resident or residents. The licensee may
 not commingle such moneys with any other funds of the facility
 nor in any other way make use of such moneys until the moneys
 are actually due; or
- 2. Hold the total amount of such money in a separate interest-bearing account in a Florida banking institution for the benefit of the resident or residents, in which case the resident shall receive and collect interest at a rate of at least 75 percent of the annualized average interest rate payable on the account or at the rate of 5 percent per year, simple interest, whichever the licensee elects. The licensee may not commingle such moneys with any other funds of the facility nor in any other way make use of such moneys until

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 the moneys are actually due. At least once a year, the licensee shall pay directly to the resident, or credit against the current month's rent, the interest due the resident. Such funds shall be deposited in a banking institution in this state that is located, if possible, in the same community in which the facility is located; shall be kept separate from the funds and property of the facility; may not be represented as part of the assets of the facility on financial statements; and shall be used, or otherwise expended, only for the account of the resident.

- (b) The licensee shall, within 30 days after receiving of receipt of advance rent or a security deposit, notify the resident or residents in writing of the manner in which the licensee is holding the advance rent or security deposit and the rate of interest, if any, which the resident is to receive and the time of interest payments to the resident. Such written notice must:
 - 1. Be given in person or by mail to the resident; and
- 2. State the name and address of the depository where the advance rent or security deposit is moneys are being held. The licensee shall notify residents of the facility's policy on advance deposits.

(4)(3)(a) The contract shall include a refund policy to be implemented at the time of a resident's transfer, discharge, or death. The refund policy shall provide that the resident or responsible party is entitled to a prorated refund based on the daily rate for any unused portion of payment beyond the termination date after all charges, including the cost of damages to the residential unit resulting from circumstances other than normal use, have been paid to the licensee. For the purpose of this <u>subsection paragraph</u>, the

termination date shall be the date the unit is vacated by the 2 resident and cleared of all personal belongings. 3 amount of belongings does not preclude renting the unit, the 4 facility may clear the unit and charge the resident or his or 5 her estate for moving and storing the items at a rate equal to 6 the actual cost to the facility, not to exceed 20 percent of 7 the regular rate for the unit, provided that 14 days' advance written notification is given. If the resident's possessions 8 9 are not claimed within 45 days after notification, the 10 facility may dispose of them. The contract shall also specify 11 any other conditions under which claims will be made against the refund due the resident. Except in the case of death or a 12 discharge due to medical reasons, the refunds shall be 13 computed in accordance with the notice of relocation 14 requirements specified in the contract. However, a resident 15 may not be required to provide the licensee with more than 30 16 17 days' notice of termination. If after a contract is 18 terminated, the facility intends to make a claim against a 19 refund due the resident, the facility shall notify the 20 resident or responsible party in writing of the claim and shall provide said party with a reasonable time period of no 21 22 less than 14 calendar days to respond. The facility shall provide a refund to the resident or responsible party within 23 24 45 days after the transfer, discharge, or death of the 25 resident. The agency shall impose a fine upon a facility that fails to comply with the refund provisions of the paragraph, 26 which fine shall be equal to three times the amount due to the 27 resident. One-half of the fine shall be remitted to the 28 29 resident or his or her estate, and the other half to the Health Care Trust Fund to be used for the purpose specified in 30 31 s. 400.418.

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(5)(b) If a licensee agrees to reserve a bed for a resident who is admitted to a medical facility, including, but not limited to, a nursing home, health care facility, or psychiatric facility, the resident or his or her responsible party shall notify the licensee of any change in status that would prevent the resident from returning to the facility. Until such notice is received, the agreed-upon daily rate may be charged by the licensee.

(6)(c) The purpose of any advance payment and a refund policy for such payment, including any advance payment for housing, meals, or personal services, shall be covered in the contract.

(7) The contract shall state whether or not the facility is affiliated with any religious organization and, if so, which organization and its general responsibility to the facility.

(8) In order to avoid duplication of services, the contract must include a provision permitting the facility to disclose the services covered by the contract to home health agencies or hospices contracting with the resident to provide services that are covered by Medicare or Medicaid or any other publicly funded insurance program.

(9) (9) (5) Neither the contract nor any provision thereof relieves any licensee of any requirement or obligation imposed upon it by this part or rules adopted under this part.

(10)(6) In lieu of the provisions of this section, facilities certified under chapter 651 shall comply with the requirements of s. 651.055.

(11) (7) Notwithstanding the provisions of this section, facilities which consist of 60 or more apartments may 31 require refund policies and termination notices in accordance

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with the provisions of part II of chapter 83, provided that the lease is terminated automatically without financial penalty in the event of a resident's death or relocation due to psychiatric hospitalization or to medical reasons which necessitate services or care beyond which the facility is licensed to provide. The date of termination in such instances shall be the date the unit is fully vacated. A lease may be substituted for the contract if it meets the disclosure requirements of this section. For the purpose of this section, the term "apartment" means a room or set of rooms with a kitchen or kitchenette and lavatory located within one or more buildings containing other similar or like residential units.

(12)(8) The department may by rule clarify terms, establish procedures, clarify refund policies and contract provisions, and specify documentation as necessary to administer this section.

Section 3. Section 400.4255, Florida Statutes, is amended to read:

400.4255 Use of licensed personnel; emergency care.--

employed by, under contract to, or volunteers in an assisted living facility may administer medications to residents, manage individual weekly pill organizers for residents, give prepackaged enemas ordered by a physician, and provide such other nursing services as the department by rule authorizes them to provide. Persons who are exempt from nursing licensure under s. 464.022(1) and third parties who are contracting directly with a resident or the resident's representative may provide additional nursing services, provided that the resident continues to meet the criteria for appropriate

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placement established under s. 400.426 and by rule. Persons under contract to the facility, facility staff, or volunteers, who are licensed according to chapter 464, or those persons exempt under s. 464.022(1), and others as defined by rule, may administer medications to residents, take residents' vital signs, manage individual weekly pill organizers for residents who self-administer medication, give prepackaged enemas ordered by a physician, observe residents, document observations on the appropriate resident's record, report observations to the resident's physician, and contract or allow residents or a resident's representative, designee, surrogate, guardian, or attorney in fact to contract with a third party, provided residents meet the criteria for appropriate placement as defined in s. 400.426. Nursing assistants certified pursuant to s. 400.211 may take residents' vital signs as directed by a licensed nurse or physician.

- (b) All staff in facilities licensed under this part shall exercise their professional responsibility to observe residents, to document observations on the appropriate resident's record, and to report the observations to the resident's physician. However, the owner or administrator of the facility shall be responsible for determining that the resident receiving services is appropriate for residence in the facility.
- (c) In an emergency situation, licensed personnel may carry out their professional duties pursuant to chapter 464 until emergency medical personnel assume responsibility for care.
- (2) In facilities licensed to provide extended congregate care, persons licensed under chapter 464, or

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certified under s. 400.211, who are under contract to, employed by, or volunteers in an assisted living facility licensed to provide extended congregate care may perform all duties within the scope of their respective license or certification if approved by the administrator of the facility.under contract to the facility, facility staff, or volunteers, who are licensed according to chapter 464, or those persons exempt under s. 464.022(1), or those persons certified as nursing assistants pursuant to s. 400.211, may also perform all duties within the scope of their license or certification, as approved by the facility administrator and pursuant to this part.

(3) Notwithstanding any limitations imposed by this
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- (3) Notwithstanding any limitations imposed by this section or by rule, personnel in an assisted living facility may, in an emergency, while awaiting the arrival of emergency personnel, provide any service permitted within the scope of their respective license or certification.
- (4) Facility staff may withhold or withdraw cardiopulmonary resuscitation if presented with an order not to resuscitate which is executed under s. 401.45. The department shall adopt rules that provide for the implementation of such orders. Facility staff are not subject to criminal prosecution or civil liability, and may not be considered to have engaged in negligent or unprofessional conduct, for withholding or withdrawing cardiopulmonary resuscitation pursuant to such an order and rules adopted by the department.

Section 4. Section 400.427, Florida Statutes, 1998 Supplement, is amended to read:

400.427 Property and personal affairs of residents.--

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(1)(a) A resident shall be given the option of using his or her own belongings, as space permits; choosing his or her roommate; and, whenever possible, unless the resident is adjudicated incompetent or incapacitated under state law, managing his or her own affairs.

- (1) (b) The admission of a resident to a facility does and his or her presence therein shall not confer on the facility or its owner, administrator, employees, or representatives any authority to manage, use, or dispose of any funds or property of the resident; nor shall such admission or presence confer on any of such persons any authority or responsibility for the personal affairs of the resident, except that which may be necessary for the safe management of the facility or for the safety of the resident.
- (2) A facility, or an owner, administrator, employee, or representative thereof, may not act as the guardian, trustee, attorney-in-fact, or conservator for any resident of the assisted living facility or any of such resident's property unless the resident is a relative of the owner, administrator, employee, or representative. An owner, administrator, or staff member, or representative thereof, may not act as a competent resident's payee for social security, veteran's, or railroad benefits without the consent of the resident or the resident's representative. Any facility whose owner, administrator, or staff, or representative thereof, serves as representative payee for any resident of the facility shall post file a surety bond, a copy of which must be filed with the agency, in an amount equal to twice the average monthly aggregate income or personal funds due to residents, or expendable for their account, which are received 31 by a facility. Any facility whose owner, administrator, or

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staff, or a representative thereof, is granted power of attorney for any resident of the facility shall file a surety bond with the agency for each resident for whom such power of attorney is granted. The surety bond shall be in an amount equal to twice the average monthly income of the resident, plus the value of any resident's property under the control of the attorney in fact. The bond shall be executed by the facility as principal and a licensed surety company authorized and licensed to do business in this state as surety. The bond shall be conditioned upon the faithful compliance of the facility with this section and shall run to the agency for the benefit of any resident who suffers a financial loss as a result of the misuse or misappropriation by a facility of funds held pursuant to this subsection. Any surety company that cancels or does not renew the bond of any licensee shall notify the agency in writing not less than 30 days in advance of such action, giving the reason for the cancellation or nonrenewal. Any facility owner, administrator, or staff, or representative thereof, who is granted power of attorney for any resident of the facility shall, on a monthly basis, be required to provide the resident a written statement of any transaction made on behalf of the resident pursuant to this subsection, and a copy of such statement given to the resident shall be retained in each resident's file and available for agency inspection.

or the resident's representative, shall provide for the safekeeping in the facility of personal effects not in excess of \$500 and funds of the resident not in excess of \$200 cash, and shall keep complete and accurate records of all such funds and personal effects received. If a resident is absent from a

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facility for 24 hours or more, the facility may provide for the safekeeping of the resident's personal effects in excess of \$500.

- (4) Any funds or other property belonging to or due to a resident, or expendable for his or her account, which is received by a facility shall be held in trust and expended only for the account of the resident. Resident funds must which shall be kept separate from the funds and property of the facility; however, a resident's funds may be held in one account with other residents' funds if a separate written accounting of each person's funds is maintained. and other residents or shall be specifically credited to such resident. Such trust funds shall be used or otherwise expended only for the account of the resident. At least quarterly, and upon the discharge or transfer of the resident or upon the transfer of facility ownership once every 3 months, unless upon order of a court of competent jurisdiction, the facility shall furnish to the resident or the resident's representative and his or her guardian, trustee, or conservator, if any, a complete and verified statement of all funds and other property to which this subsection applies, detailing the amount and items received, together with their sources and disposition. In any event, the facility shall furnish such statement annually and upon the discharge or transfer of a resident. Any governmental agency or private charitable agency contributing funds or other property to the account of a resident shall also be entitled to receive such statement annually and upon the discharge or transfer of the resident or upon the transfer of facility ownership.
- (5) Any personal funds available to facility residents 31 may be used by residents as they choose to obtain clothing,

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personal items, leisure activities, and other supplies and services for their personal use which are not covered by the contract. A facility may not demand, require, or contract for payment of all or any part of the personal funds in satisfaction of the facility rate for supplies and services beyond that amount agreed to in writing and may not levy an additional charge to the individual or the account for any supplies or services that the facility has agreed by contract to provide as part of the standard monthly rate. Any additional services service or supplies provided by the facility which are charged separately to the resident individual or the resident's account and not covered by the contract rate may be provided only with the specific written consent of the individual, who shall be furnished in advance of the provision of the services or supplies with an itemized written statement to be attached to the contract setting forth the charges for the additional services or supplies.

(6)

(a) In addition to any damages or civil penalties provided by law to which a person is subject, any person who:

the intentionally withholds a resident's personal funds, personal property, or personal needs allowance: or who demands, beneficially receives, or contracts for payment of all or any part of a resident's personal property or personal needs allowance in satisfaction of the facility rate for supplies and services; or who

2. borrows from or pledges any personal funds of a resident, other than the amount agreed to by written contract under s. 400.424, commits a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.

1 2 representative thereof, who is granted power of attorney for 3

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any resident of the facility and who misuses or misappropriates funds obtained through this power commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. (7) In the event of the resident's death of a

(b) Any facility owner, administrator, or staff, or

- resident, a licensee shall return all refunds, funds, and property held in trust to the resident's personal representative, if one has been appointed, or at the time the facility disburses such funds, and, if not, to the resident's spouse or adult next of kin named in a beneficiary designation form provided by the facility to the resident. If the resident has no spouse or adult next of kin or such person cannot be located, funds due the resident shall be placed in an interest-bearing account, and all property held in trust by the facility shall be safeguarded until such time as the funds and property are disbursed pursuant to the Florida Probate Such funds shall be kept separate from the funds and property of the facility and other residents of the facility. If the funds of the deceased resident are not disbursed pursuant to the Florida Probate Code within 2 years after the resident's death, the funds shall be deposited in the Health Care Trust Fund administered by the agency.
- (8) The department may by rule clarify terms and specify procedures and documentation necessary to administer the provisions of this section relating to the proper management of residents' funds and personal property and the execution of surety bonds.

Section 5. Section 400.441, Florida Statutes, 1998 31 | Supplement, is amended to read:

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400.441 Rules establishing standards.--

- (1) It is the intent of the Legislature that rules published and enforced pursuant to this section shall include criteria by which a reasonable and consistent quality of resident care and quality of life may be ensured and the results of such resident care may be demonstrated. shall also ensure a safe and sanitary environment that is residential and noninstitutional in design or nature, accommodates. It is further intended that reasonable efforts be made to accommodate the needs and preferences of residents, and promotes the dignity, individuality, personal strengths, and decisionmaking ability of residents to enhance the quality of life in a facility. In order to provide safe and sanitary facilities and the highest quality of resident care accommodating the needs, and preferences, and independence of residents, the department, in consultation with the agency, the Department of Children and Family Services, and the Department of Health, shall adopt rules, policies, and procedures to implement administer this part, which must include reasonable and fair minimum standards and procedures relating in relation to:
- (a) The requirements for and maintenance of <u>assisted</u> <u>living</u> facilities, not in conflict with the provisions of chapter 553, relating to plumbing, heating, lighting, ventilation, living space, and other housing conditions, which will ensure the health, safety, <u>and</u> comfort, and independence of residents. and protection from fire hazard, including adequate provisions for fire alarm and other fire protection suitable to the size of the structure. Uniform firesafety standards shall be established and enforced by the State Fire

Marshal in cooperation with the agency, the department, and 2 the Department of Health. 3 1. Evacuation capability determination .-a. The provisions of the National Fire Protection 4 5 Association, NFPA 101A, Chapter 5, 1995 edition, shall be used for determining the ability of the residents, with or without 6 7 staff assistance, to relocate from or within a licensed facility to a point of safety as provided in the fire codes 9 adopted herein. An evacuation capability evaluation for initial licensure shall be conducted within 6 months after the 10 11 date of licensure. For existing licensed facilities that are not equipped with an automatic fire sprinkler system, the 12 administrator shall evaluate the evacuation capability of 13 residents at least annually. The evacuation capability 14 evaluation for each facility not equipped with an automatic 15 fire sprinkler system shall be validated, without liability, 16 17 by the State Fire Marshal, by the local fire marshal, or by the local authority having jurisdiction over firesafety, 18 19 before the license renewal date. If the State Fire Marshal, 20 local fire marshal, or local authority having jurisdiction 21 over firesafety has reason to believe that the evacuation capability of a facility as reported by the administrator may 22 have changed, it may, with assistance from the facility 23 24 administrator, reevaluate the evacuation capability through 25 timed exiting drills. Translation of timed fire exiting drills to evacuation capability may be determined: 26 2.7 (I) Three minutes or less: prompt. 28 (II) More than 3 minutes, but not more than 13 29 minutes: slow. 30 (III) More than 13 minutes: impractical. 31

b. The Office of the State Fire Marshal shall provide or cause the provision of training and education on the proper application of Chapter 5, NFPA 101A, 1995 edition, to its employees, to staff of the Agency for Health Care Administration who are responsible for regulating facilities under this part, and to local governmental inspectors. The Office of the State Fire Marshal shall provide or cause the provision of this training within its existing budget, but may charge a fee for this training to offset its costs. The initial training must be delivered within 6 months after July 1, 1995, and as needed thereafter.

c. The Office of the State Fire Marshal, in cooperation with provider associations, shall provide or cause the provision of a training program designed to inform facility operators on how to properly review bid documents relating to the installation of automatic fire sprinklers.

The Office of the State Fire Marshal shall provide or cause the provision of this training within its existing budget, but may charge a fee for this training to offset its costs. The initial training must be delivered within 6 months after July 1, 1995, and as needed thereafter.

d. The administrator of a licensed facility shall sign an affidavit verifying the number of residents occupying the facility at the time of the evacuation capability evaluation.

2. Firesafety requirements.--

a. Except for the special applications provided herein, effective January 1, 1996, the provisions of the National Fire Protection Association, Life Safety Code, NFPA 101, 1994 edition, Chapter 22 for new facilities and Chapter 23 for existing facilities shall be the uniform fire code

applied by the State Fire Marshal for assisted living facilities, pursuant to s. 633.022.

b. Any new facility, regardless of size, that applies for a license on or after January 1, 1996, must be equipped with an automatic fire sprinkler system. The exceptions as provided in section 22-2.3.5.1, NFPA 101, 1994 edition, as adopted herein, apply to any new facility housing eight or fewer residents. On July 1, 1995, local governmental entities responsible for the issuance of permits for construction shall inform, without liability, any facility whose permit for construction is obtained prior to January 1, 1996, of this automatic fire sprinkler requirement. As used in this part, the term "a new facility" does not mean an existing facility that has undergone change of ownership.

c. Notwithstanding any provision of s. 633.022 or of the National Fire Protection Association, NFPA 101A, Chapter 5, 1995 edition, to the contrary, any existing facility housing eight or fewer residents is not required to install an automatic fire sprinkler system, nor to comply with any other requirement in Chapter 23 of NFPA 101, 1994 edition, that exceeds the firesafety requirements of NFPA 101, 1988 edition, that applies to this size facility, unless the facility has been classified as impractical to evacuate. Any existing facility housing eight or fewer residents that is classified as impractical to evacuate must install an automatic fire sprinkler system within the timeframes granted in this section.

d. Any existing facility that is required to install an automatic fire sprinkler system under this paragraph need not meet other firesafety requirements of Chapter 23, NFPA 101, 1994 edition, which exceed the provisions of NFPA 101,

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1988 edition. The mandate contained in this paragraph which requires certain facilities to install an automatic fire sprinkler system supersedes any other requirement.

- e. This paragraph does not supersede the exceptions granted in NFPA 101, 1988 edition or 1994 edition.
- f. This paragraph does not exempt facilities from other firesafety provisions adopted under s. 633.022 and local building code requirements in effect before July 1, 1995.
- g. A local government may charge fees only in an amount not to exceed the actual expenses incurred by local government relating to the installation and maintenance of an automatic fire sprinkler system in an existing and properly licensed assisted living facility structure as of January 1, 1996.
- h. If a licensed facility undergoes major reconstruction or addition to an existing building on or after January 1, 1996, the entire building must be equipped with an automatic fire sprinkler system. Major reconstruction of a building means repair or restoration that costs in excess of 50 percent of the value of the building as reported on the tax rolls, excluding land, before reconstruction. Multiple reconstruction projects within a 5-year period the total costs of which exceed 50 percent of the initial value of the building at the time the first reconstruction project was permitted are to be considered as major reconstruction. Application for a permit for an automatic fire sprinkler system is required upon application for a permit for a reconstruction project that creates costs that go over the 50-percent threshold.
- i. Any facility licensed before January 1, 1996, that 31 is required to install an automatic fire sprinkler system

shall ensure that the installation is completed within the 2 following timeframes based upon evacuation capability of the 3 facility as determined under subparagraph 1.: 4 (I) Impractical evacuation capability, 24 months. 5 (II) Slow evacuation capability, 48 months. 6 (III) Prompt evacuation capability, 60 months. 7 8 The beginning date from which the deadline for the automatic 9 fire sprinkler installation requirement must be calculated is 10 upon receipt of written notice from the local fire official 11 that an automatic fire sprinkler system must be installed. The local fire official shall send a copy of the document 12 indicating the requirement of a fire sprinkler system to the 13 Agency for Health Care Administration. 14 j. It is recognized that the installation of an 15 automatic fire sprinkler system may create financial hardship 16 17 for some facilities. The appropriate local fire official 18 shall, without liability, grant two 1-year extensions to the 19 timeframes for installation established herein, if an 20 automatic fire sprinkler installation cost estimate and proof 21 of denial from two financial institutions for a construction loan to install the automatic fire sprinkler system are 22 submitted. However, for any facility with a class I or class 23 24 II, or a history of uncorrected class III, firesafety 25 deficiencies, an extension must not be granted. The local fire official shall send a copy of the document granting the 26 27 time extension to the Agency for Health Care Administration. 28 k. A facility owner whose facility is required to be 29 equipped with an automatic fire sprinkler system under Chapter 23, NFPA 101, 1994 edition, as adopted herein, must disclose 30

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an automatic fire sprinkler requirement exists. The sale of 2 the facility does not alter the timeframe for the installation 3 of the automatic fire sprinkler system. 1. Existing facilities required to install an 4 5 automatic fire sprinkler system as a result of 6 construction-type restrictions in Chapter 23, NFPA 101, 1994 7 edition, as adopted herein, or evacuation capability requirements shall be notified by the local fire official in 9 writing of the automatic fire sprinkler requirement, as well 10 as the appropriate date for final compliance as provided in 11 this subparagraph. The local fire official shall send a copy of the document to the Agency for Health Care Administration. 12 m. Except in cases of life-threatening fire hazards, 13 if an existing facility experiences a change in the evacuation 14 capability, or if the local authority having jurisdiction 15 identifies a construction-type restriction, such that an 16 17 automatic fire sprinkler system is required, it shall be afforded time for installation as provided in this 18 19 subparagraph. 20 21 Facilities that are fully sprinkled and in compliance with other firesafety standards are not required to conduct more 22 23 than one of the required fire drills between the hours of 11 24 p.m. and 7 a.m., per year. In lieu of the remaining drills, 25 staff responsible for residents during such hours may be required to participate in a mock drill that includes a review 26 27 of evacuation procedures. Such standards must be included or

referenced in the rules adopted by the State Fire Marshal.

final administrative authority for firesafety standards

31 established and enforced pursuant to this section. All

Pursuant to s. 633.022(1)(b), the State Fire Marshal is the

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licensed facilities must have an annual fire inspection conducted by the local fire marshal or authority having jurisdiction.

- (b) The preparation and annual update of a comprehensive emergency management plan. Such standards must be included in the rules adopted by The department shall consult after consultation with the Department of Community Affairs in adopting rules regulating such plans. minimum, the plans rules must provide for plan components that address emergency evacuation transportation; adequate sheltering arrangements; postdisaster activities, including provision of emergency power, food, and water; postdisaster transportation; supplies; staffing; emergency equipment; individual identification of residents and transfer of records; communication with families; and responses to family inquiries. Each facility's The comprehensive emergency management plan is subject to review and approval by the local emergency management agency. During its review, the local emergency management agency shall ensure that the following agencies, at a minimum, are also given the opportunity to review the plan: the Department of Elderly Affairs, the Department of Health, the Agency for Health Care Administration, and the Department of Community Affairs, and-Also, appropriate volunteer organizations must be given the opportunity to review the plan. The local emergency management agency shall complete its review within 60 days and either approve the plan or advise the facility of necessary revisions.
- (c) The number, training, and qualifications of all personnel having responsibility for the care <u>and safety</u> of residents. The rules must require adequate staff to provide

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for the safety of all residents. Facilities licensed for 17 or more residents are required to maintain an alert staff for 24 hours per day.

- (d) All safety and sanitary conditions within the facility and its surroundings which will ensure the health, and comfort, and security of residents. The rules must clearly delineate the responsibilities of the agency's licensure and survey staff, the county health departments, and the local authority having jurisdiction over fire safety and ensure that regulatory jurisdiction does not conflict or overlap and that inspections are not duplicated duplicative. The agency may collect fees for food service inspections conducted by the county health departments and transfer such fees to the Department of Health.
- (e) License application and license renewal, advertising, transfer of ownership, proper management of resident funds and personal property, surety bonds, resident contracts, refund policies, financial ability to operate, and facility and staff records.
- (f) Inspections, complaint investigations, moratoriums, classification of deficiencies, and levying and enforcement of penalties, and use of income from fees and fines.
- (q) The enforcement of the resident bill of rights specified in s. 400.428.
- (h) The care and maintenance of residents, which must include, but is not limited to:
 - The supervision of residents;
 - The provision of personal and nursing services;
- The provision of, or arrangement for, social and 31 leisure activities;

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- 4. The arrangement for appointments and transportation to appropriate medical, dental, nursing, or mental health services, as needed by residents;
 - 5. The management of medication;
 - 6. The nutritional needs of residents; and
 - 7. Resident records.
- (i) Facilities holding a limited nursing, extended congregate care, or limited mental health license.
- (j) The establishment of specific criteria to define appropriateness of resident admission and continued residency in a facility holding a standard, limited nursing, extended congregate care, and limited mental health license.
- (k) The use of physical or chemical restraints. The use of physical restraints is limited to half-bed rails as prescribed and documented biannually by the resident's physician with the consent of the resident or, if applicable, the resident's representative or designee or the resident's surrogate, guardian, or attorney in fact. The use of chemical restraints is limited to prescribed dosages of medications evaluated and authorized by the resident's physician and must be consistent with the resident's diagnosis. Residents who are receiving medications that can serve as chemical restraints must be evaluated by their physician at least annually to assess:
 - 1. the continued need for the medication.
- 2. The level of the medication in the resident's blood.
 - 3. The need for adjustments in the prescription.
- (1) Facility and resident security, including security systems that ensure the residents' safety but maximize their access and independence.

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In adopting any rules pursuant to this part, the department, in conjunction with the agency, shall make distinct standards for facilities based upon facility size; the types of care provided; the physical and mental capabilities and needs of residents; the type, frequency, and amount of services and care offered; and the staffing characteristics of the facility; and any other factors that require allowances for differences. Rules developed pursuant to this section shall not restrict the use of shared staffing and shared programming in facilities that are part of retirement communities that provide multiple levels of care and otherwise meet the requirements of law and rule. Except for uniform firesafety standards, the department shall adopt by rule separate and distinct standards for facilities with 16 or fewer beds and for facilities with 17 or more beds. standards for facilities with 16 or fewer beds shall be appropriate for a noninstitutional residential environment, provided that the structure is no more than two stories in height and all persons who cannot exit the facility unassisted in an emergency reside on the first floor. The department, in conjunction with the agency, may make other distinctions among types of facilities as necessary to enforce the provisions of this part. Where appropriate, the agency shall offer alternate solutions for complying with established standards, based on distinctions made by the department and the agency relative to the physical characteristics of facilities and the types of care offered therein. (3) In addition to waivers granted under s. 120.542,

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30 31 Senate, and appropriate committees of substance for review and comment prior to the promulgation thereof.

- (a) Rules promulgated by the department shall encourage the development of homelike facilities which promote the dignity, individuality, personal strengths, and decisionmaking ability of residents.
- (b) The agency, in consultation with the department, in consultation with the agency, may waive rules adopted under promulgated pursuant to this part in order to demonstrate and evaluate innovative or cost-effective residential congregate care alternatives that which enable individuals to age in place. Such waivers may be granted only in instances where there is reasonable assurance that the health, safety, or welfare of residents will not be endangered. To apply for a waiver, the licensee shall submit to the department and the agency a written description of the concept to be demonstrated, including goals, objectives, and anticipated benefits; the number and types of residents who will be affected, if applicable; the rules for which a waiver is being requested; a brief description of how the demonstration will be evaluated; and any other information that the department considers deemed appropriate by the agency. Any facility granted a waiver shall submit a report of findings to the agency and the department and the agency within 12 months. such time, the department agency may renew or revoke the waiver or pursue any regulatory or statutory changes necessary to allow other facilities to adopt the same practices. The department may by rule clarify terms and establish waiver application procedures, criteria for reviewing waiver proposals, and procedures for reporting findings, and clarify terms as necessary to implement this subsection.

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The agency may use an abbreviated biennial inspection procedure, as established by rule, which consists of a review of key quality-of-care standards in lieu of a full inspection in facilities which have a good record of past performance as documented in the agency's last two survey reports. However, a full inspection shall be conducted in facilities that which have had a history of class I violations, uncorrected or class II or violations, uncorrected class III violations, confirmed ombudsman council complaints, or confirmed licensure complaints, within the previous licensure period immediately preceding the inspection or when a potentially serious problem is identified during the abbreviated inspection. The department agency, in consultation with the agency department, shall develop the key quality-of-care standards with input from the State Long-Term Care Ombudsman Council and representatives of provider groups for adoption by rule incorporation into its rules. on or before March 1, 1991, the department, in consultation with the agency, shall report annually to the Legislature concerning its implementation of this subsection. The report shall include, at a minimum, the key quality-of-care standards which have been developed; the number of facilities identified as being eligible for the abbreviated inspection; the number of facilities which have received the abbreviated inspection and, of those, the number that were converted to full inspection; the number and type of subsequent complaints received by the agency or department on facilities which have had abbreviated inspections; any recommendations for modification to this subsection; any plans by the agency to modify its implementation of this subsection; and any other 31 information which the department believes should be reported.

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(5) The department may charge a reasonable fee to cover the cost of duplication and postage for A fee shall be charged by the department to any person requesting a copy of this part or rules adopted promulgated under this part. Such fees shall not exceed the actual cost of duplication and postage.

Section 6. Section 400.4411, Florida Statutes, is created to read:

400.4411 Firesafety standards.--In accordance with s.
633.022 and this section, the State Fire Marshal, in
consultation with the department, the agency, and the
Department of Health, shall establish uniform firesafety
standards for assisted living facilities. The State Fire
Marshal is the final administrative authority for firesafety
standards established and enforced under this section.

- (1) EVALUATION CAPABILITY DETERMINATION.--The provisions of the National Fire Protection Association, NFPA 101A, chapter 5, 1995 edition, must be used to determine the ability of residents, with or without staff assistance, to be relocated from or within a facility to a point of safety as provided in the firesafety standards.
- (a) Each facility shall, within 6 months after the date of initial licensing, evaluate the facility's evacuation capability.
- (b) Any existing facility that is not fully equipped with an automatic fire sprinkler system shall evaluate its evacuation capability at least annually. The local authority that has jurisdiction over fire safety or the State Fire Marshal shall, without liability, validate the evacuation capability of such a facility before the facility's biennial license renewal date. However, if the local authority has

reason to believe that the facility's evacuation capability as reported by the facility may have changed, the local authority may, with the assistance of the facility administrator, reevaluate the evacuation capability through timed exiting drills according to the following criteria:

- 1. Three minutes or less: prompt.
- 2. More than 3 minutes but not more than 13 minutes: slow.
 - 3. More than 13 minutes: impractical.
- (c) A facility that is fully equipped with sprinklers and is otherwise in compliance with all firesafety standards is not required to conduct more than one of the required fire drills between the hours of 11 p.m. and 7 a.m., per year.

 Staff responsible for residents during those hours may be required to participate in a mock drill that includes a review of evacuation procedures. Such standards must be included or referenced in the rules adopted by the State Fire Marshal.
- (d) The administrator shall sign an affidavit verifying the number of residents occupying the facility at the time of the evacuation capability determination.
 - (2) FIRESAFETY REQUIREMENTS. --
- (a) Except for the modifications provided in this section, the provisions of the National Fire Protection

 Association, Life Safety Code, NFPA, 1994 edition, chapter 22 for new facilities and chapter 23 for existing facilities, shall be the firesafety standard for assisted living facilities, pursuant to s. 633.022.
- 28 (b) Any new facility that applies for a license after
 29 December 31, 1995, must be equipped with an automatic fire
 30 sprinkler system. The exceptions provided in section
 31 22-2.3.5.1 NFPA 101, 1994 edition, apply only to a new

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facility housing eight or fewer residents. As used in this section, the term "new facility" does not include an existing facility that has undergone a transfer of ownership.

- (c) Notwithstanding any provision of s. 633.022 or the National Fire Protection Association, NFPA 101A, chapter 5, 1995 edition, any existing facility housing eight or fewer residents is not required to install an automatic fire sprinkler system nor to comply with any other requirement in chapter 23 of NFPA 101, 1994 edition, which exceeds the firesafety requirements of NFPA 101, 1988 edition, except that a facility that has been classified as impractical to evacuate must install an automatic fire sprinkler system within the timeframes specified in this section.
- (d) Any existing facility that is required to install an automatic fire sprinkler system under this subsection need not meet other firesafety requirements of chapter 23, NFPA 101, 1994 edition, which exceed the provisions of NFPA 101, 1988 edition. The provisions of this subsection which require certain facilities to install an automatic fire sprinkler system supersede any other requirement.
- (e) This subsection does not supersede the exceptions granted in NFPA 101, 1988 or 1994 edition.
- (f) This subsection does not exempt facilities from other firesafety provisions adopted under s. 633.022 and local building code requirements in effect before July 1, 1995.
- (g) Fees charged by a local government may not exceed the actual expenses incurred by the local government in connection with the installation and maintenance of an automatic fire sprinkler system in an existing and properly licensed assisted living facility.

1 (h) If a licensed facility undergoes major reconstruction or addition to an existing building after 2 3 December 31, 1995, the entire building must be equipped with an automatic fire sprinkler system. Major reconstruction of a 4 5 building means addition, repair, or restoration that costs 6 more than 50 percent of the value of the building as reported 7 on the tax rolls, excluding land, before reconstruction. 8 Multiple reconstruction projects that take place within a 5-year period the total costs of which exceed 50 percent of 9 10 the initial value of the building at the time the first 11 reconstruction project was permitted are to be considered major reconstruction. 12 (i) Any facility licensed before January 1, 1996, 13 which is required to install an automatic fire sprinkler 14 system must complete the installation within the following 15 timeframes based upon the evacuation capability of the 16 17 facility as determined under subsection (1): Impractical evacuation capability: 24 months. 18 19 2. Slow evacuation capability: 48 months. Prompt evacuation capability: 60 months. 20 21 (j) Existing facilities that are required to install 22 an automatic fire sprinkler system as a result of construction-type restrictions in chapter 23, NFPA 101, 1994 23 24 edition, or evacuation capability requirements shall be notified by the local authority having jurisdiction, in 25 writing, of the automatic fire sprinkler requirement and of 26 27 the appropriate deadline date for final compliance. The beginning date from which the deadline for final compliance is 28 29 calculated is the date on which the facility receives the 30 written notice from the local authority. The local authority

shall send to the agency a copy of each such notice.

- (k) Except in case of life-threatening fire hazards, if an existing facility experiences a change in evacuation capability or if the local authority having jurisdiction identifies a construction-type restriction that requires the installation of an automatic fire sprinkler system, the facility must be given time for installation as provided in this subsection.
- automatic fire sprinkler system may create financial hardship for some facilities. The appropriate local authority having jurisdiction shall, without liability, grant two 1-year extensions if an automatic fire sprinkler installation cost estimate and proof of denial by two financial institutions of a construction loan to install the automatic fire sprinkler system are submitted. However, an extension may not be granted to any facility that has had a class I, an uncorrected class II, or a history of uncorrected class III firesafety violations. The local authority shall send to the agency a copy of each document granting a time extension.
- (m) A facility owner of an existing facility that is required to be equipped with an automatic fire sprinkler system must disclose the requirement to any potential buyer.

 The sale of the facility does not alter the timeframe for the installation of the automatic fire sprinkler system.
- (3) FIRESAFETY INSPECTIONS.--Each licensed facility must have an annual fire inspection conducted by the local authority having jurisdiction or the State Fire Marshal.
 - (4) TRAINING.--
- (a) The State Fire Marshal shall provide or cause to be provided training and education on the proper application of chapter 5, NFPA 101A, 1995 edition, to its employees, to

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agency staff who are responsible for regulating facilities
under this part, and to local government inspectors. The State
Fire Marshal may charge a fee to offset training costs.

(b) The State Fire Marshal, in cooperation with provider associations, shall provide or cause to be provided a training program designed to inform facility operators how to properly review bid documents relating to the installation of automatic fire sprinklers. The State Fire Marshal may charge a fee to offset training costs.

Section 7. Section 400.452, Florida Statutes, 1998 Supplement, is amended to read:

400.452 Staff training and educational programs; core educational requirement.--

- (1) The department shall provide, or cause to be provided, training and educational programs for the administrators and other assisted living facility staff to better enable them to appropriately respond to the needs of residents, to maintain resident care and facility standards, and to meet licensure requirements.
- living facility a core educational program requirement to be used in these programs. Successful completion of the core educational requirement must include successful completion of a competency test. The core training program must be available at least quarterly in each planning and service area of the department. A new facility administrator must complete the core educational requirement within 3 months after being employed as an administrator. Failure to complete the core educational requirement is a violation of this part and subjects the violator to a penalty as prescribed in s.

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486, part II, are exempt from this requirement. Programs must be provided by the department or by a provider approved by the department at least quarterly. The core training program educational requirement must, at a minimum, cover at least the following topics:

- (a) State law and rules relating to assisted living facilities.
- (b) Resident rights and identifying and reporting abuse, neglect, and exploitation.
- (c) Special needs of elderly persons, persons with mental illness, and persons with developmental disabilities and how to meet those needs.
- (d) Nutrition and food service, including acceptable sanitation practices for preparing, storing, and serving food.
- (e) Medication practice, management, and recordkeeping in an assisted living facility, and proper techniques for assisting residents with self-administered medication.
- (f) Firesafety requirements, including fire evacuation drill procedures and other emergency procedures.
- (g) Care of persons with Alzheimer's disease and related disorders.
- (3) Such a program must be available at least quarterly in each planning and service area of the department. The competency test must be developed by the department in conjunction with the agency and providers. A new facility administrator must complete the core educational requirement including the competency test within 3 months after being employed as an administrator. Failure to complete a core educational requirement specified in this subsection is a violation of this part and subjects the violator to an administrative fine as prescribed in s. 400.419.

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Administrators licensed in accordance with chapter 468, part II, are exempt from this requirement. Other licensed professionals may be exempted, as determined by the department by rule.

(3)(4) Administrators are required to participate in a minimum of 12 hours of continuing education for a minimum of 12 contact hours every 2 years.

(4) (5) Staff involved with the management of medications and assisting with the self-administration of medications under s. 400.4256 must complete a minimum of 4 hours of training pursuant to a curriculum developed by the department and provided by a registered nurse, licensed pharmacist, or department staff.

(5)(6) Other facility staff shall participate in training relevant to their job duties as specified by rule of the department.

(6) (6) (7) A facility that does not have any residents who receive monthly optional supplementation payments must pay a reasonable fee for such training and education programs. A facility that has one or more such residents shall pay a reduced fee that is proportional to the percentage of such residents in the facility. Any facility more than 90 percent of whose residents receive monthly optional state supplementation payments is not required to pay for the training and continuing education programs required under this section. Failure to pay training fees in accordance with this subsection is a violation of this part and subjects the violator to a penalty as prescribed in s. 400.419.

(7)(8) If the department or the agency determines that there are problems in a facility that could be reduced through 31 | specific staff training or education beyond that already

required under this section, the department or the agency may require, and provide, or cause to be provided, the training or education of any personal care staff in the facility.

(8)(9) The department shall adopt rules to establish training programs, standards and curriculum for training, staff training requirements, training fees, and procedures for approving training programs, and training fees. The department may charge a reasonable fee to review the curriculum and qualifications of anyone who seeks to provide approved training programs under this section and rules adopted under this section.

Section 8. This act shall take effect July 1, 1999.

SENATE SUMMARY

Revises provisions relating to assisted living facilities. Revises training requirements for staff that provide special care for residents who have Alzheimer's disease or related disorders. Amends provisions relating to contracts between the facilities and their residents. Revises guidelines for providing nursing services to residents. Allows facilities to honor do-not-resuscitate orders. Prohibits a staff member's acting as a resident's attorney-in-fact unless the two of them are relatives. Deletes firesafety requirements from the rulemaking authority of the Department of Elderly Affairs. Provides the authority to make rules pertaining to advertising, nursing services, and security. Deletes authority to dispose of fees and fines. Removes from the facilities the responsibility for the medical regulation of chemical restraints. Deletes a requirement to send proposed rule drafts to the Legislature. Allows the Department of Elderly Affairs, rather than the Agency for Health Care Administration, to provide waivers from department rules. Requires the department, rather than the agency, to develop abbreviated inspection procedures and standards. Deletes a requirement of an annual report. Revises departmental training requirements. Allows the department to charge a fee for approving training curricula and training providers.