

Bill No. CS for SB 2348

Amendment No. 2

<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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The Committee on Health, Aging and Long-Term Care recommended the following amendment:

**Senate Amendment**

On page 11, line 8, through page 13, line 12, delete those lines

and insert:

(16) Each nurse registry shall prepare and maintain a comprehensive emergency management plan that is consistent with the criteria in this subsection and with the local special needs plan. The plan shall be updated annually. The plan shall specify how the nurse registry shall facilitate the provision of continuous care by persons referred for contract to persons who are registered pursuant to s. 252.355 during an emergency that interrupts the provision of care or services in private residencies.

(a) All persons referred for contract who care for persons registered pursuant to s. 252.355 must include in the patient record a description of how care will be continued during a disaster or emergency that interrupts the provision

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1 of care in the patient's home. It shall be the responsibility  
2 of the person referred for contract to ensure that continuous  
3 care is provided.

4 (b) Each nurse registry shall maintain a current  
5 prioritized list of patients in private residencies who are  
6 registered pursuant to s. 252.355 and are under the care of  
7 persons referred for contract and who need continued services  
8 during an emergency. This list shall indicate, for each  
9 patient, if the client is to be transported to a special needs  
10 shelter and if the patient is receiving skilled nursing  
11 services. Nurse registries shall make this list available to  
12 county health departments and to local emergency management  
13 agencies upon request.

14 (c) Each person referred for contract who is caring  
15 for a patient who is registered pursuant to s. 252.355 shall  
16 provide a list of their patient's medication and equipment  
17 needs to the nurse registry. Each person referred for contract  
18 shall make this information available to county health  
19 departments and to local emergency management agencies upon  
20 request.

21 (d) Each person referred for contract shall not be  
22 required to continue to provide care to patients in emergency  
23 situations that are beyond their control and that make it  
24 impossible to provide services, such as when roads are  
25 impassable or when patients do not go to the location  
26 specified in their patient records.

27 (e) The comprehensive emergency management plan  
28 required by this subsection is subject to review and approval  
29 by the county health department. During its review, the county  
30 health department shall ensure that, at a minimum, the local  
31 emergency management agency, the Agency for Health Care

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1 Administration and the local chapter of the American Red Cross  
 2 or other lead sheltering agency are given the opportunity to  
 3 review the plan. The county health department shall complete  
 4 its review within 60 days after receipt of the plan and shall  
 5 either approve the plan or advise the nurse registry of  
 6 necessary revisions.

7 (f) The Agency for Health Care Administration shall  
 8 adopt rules establishing minimum criteria for the  
 9 comprehensive emergency management plan and plan updates  
 10 required by this subsection, with the concurrency of the  
 11 Department of Health and in consultation with the Department  
 12 of Community Affairs.

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