Florida Senate - 2002

By Senator Silver

38-308A-02 A bill to be entitled 1 2 An act relating to children's medical services; 3 providing legislative intent with respect to the licensure and regulation of facilities that 4 5 provide care for medically fragile or technologically dependent children; providing б 7 definitions; providing requirements for the licensure of subacute pediatric prescribed 8 extended alternative care centers; providing 9 for the licensing of such facilities by the 10 Agency for Health Care Administration; 11 prescribing a license fee; providing 12 13 requirements for applicants for licensure; providing requirements for a licensee in 14 15 administering and managing a SPPEAC center; 16 requiring that each center have an advisory 17 board; providing for membership on the advisory 18 board; providing requirements for the admission 19 of a child to a SPPEAC center; requiring each 20 center to maintain policies for child care; requiring that a board-certified pediatrician 21 serve as the medical director of a center; 22 providing requirements for the nursing services 23 24 provided at a SPPEAC center; providing 25 requirements for the qualifications and 26 experience of nursing personnel; specifying the minimum staff-to-child ratio for a center; 27 providing requirements for ancillary 28 29 professional staff; requiring that a SPPEAC center provide certain educational services for 30 31 children admitted to the center; requiring

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1	in-service training for center staff and family
2	members of children admitted to the center;
3	requiring that the center maintain certain
4	medical records; requiring that a center have a
5	committee to conduct reviews for quality
6	assurance; providing requirements for dietary
7	services provided at a center; providing
8	requirements for the physical environment of a
9	SPPEAC center; requiring that a center maintain
10	certain specified safety, medical, and
11	emergency equipment; providing requirements for
12	infection control; providing requirements for
13	transportation services provided by a center;
14	requiring that a center conform to certain
15	minimum emergency standards; providing an
16	effective date.
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18	Be It Enacted by the Legislature of the State of Florida:
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20	Section 1. PurposeIt is the intent of the
21	Legislature to provide for the licensure and regulation of
22	facilities that provide care for medically fragile or
23	technologically dependent children.
24	Section 2. DefinitionsAs used in this act, the
25	term:
26	(1) "Advisory board" means a group of health care
27	professionals and at least one consumer approved by the SPPEAC
28	medical and nursing directors to serve each SPPEAC center to
29	review policies, procedures, and licensure requirements and to
30	provide consultation to the administrators of the center.
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1	(2) "Agency" means the Agency for Health Care
2	Administration.
3	(3) "Basic services" includes, but is not limited to,
4	development, implementation, and monitoring of a comprehensive
5	plan of care, developed in conjunction with a child's parent
6	or guardian, which specifies the medical, nursing,
7	psychosocial, and developmental therapies required by the
8	medically fragile or technologically dependent child served,
9	as well as the caregiver-training needs of the child's parent
10	or guardian.
11	(4) "Medical director" means a physician who is
12	licensed under chapter 458 or chapter 459, Florida Statutes,
13	who is certified by the American Board of Pediatrics or the
14	American Osteopathic Board of Pediatrics, and who serves as
15	the liaison between the SPPEAC and the medical community.
16	(5) "Medical records" means the medical records
17	maintained by a SPPEAC center in accordance with accepted
18	professional standards and practices.
19	(6) "Medically fragile or technologically dependent
20	child" means a child who, because of a medical condition,
21	requires continuous therapeutic interventions or skilled
22	nursing supervision that is prescribed by a licensed physician
23	or advanced registered nurse practitioner and administered by
24	or under the direct, on-site supervision of a licensed
25	registered nurse.
26	(7) "Nursing director" means a registered nurse who is
27	licensed under chapter 464, Florida Statutes, and who is
28	responsible for providing continuous supervision of services
29	provided by a SPPEAC center and managing the daily operations
30	of the center.
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1 (8) "Owner" or "operator" means an individual who has 2 general administrative charge of a SPPEAC center. 3 (9) "Plan of care" means the comprehensive plan for implementing the medical, nursing, psychosocial, 4 5 developmental, and education therapies provided by a SPPEAC б center. 7 (10) "Premises" means the buildings, beds, and 8 facilities located at the main address of the licensee. 9 (11) "Prescribing physician" or "prescribing advanced 10 registered nurse practitioner" means the physician licensed 11 under chapter 458 or chapter 459, Florida Statutes, or the advanced registered nurse practitioner licensed under chapter 12 464, Florida Statutes, who signs the order admitting a child 13 14 to a SPPEAC. (12) "Primary physician" or "primary advanced 15 registered nurse practitioner" means the physician licensed 16 17 under chapter 458 or chapter 459, Florida Statutes, or the 18 licensed advanced registered nurse practitioner licensed under 19 chapter 464, Florida Statutes, who maintains overall responsibility for a child's medical management and who is 20 21 available for consultation and collaboration with the staff of 22 the SPPEAC center. "Quality assurance" means the mandatory program 23 (13)24 that all SPPEAC centers must have to assure periodic review of medical records at least annually and the determination of the 25 quality and appropriateness of care rendered by the center. 26 27 "Quality assurance committee" means a group of (14)health care professionals and at least one consumer approved 28 29 by the SPPEAC medical and nursing directors to serve each 30 SPPEAC center to review SPPEAC medical records and treatment 31

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1 procedures to evaluate the quality of care provided to each 2 child. 3 (15) "Subacute pediatric prescribed extended alternative care center" or "SPPEAC center" means any building 4 5 or other place, whether operated for profit or not, which б provides basic services to three or more medically fragile or 7 technologically dependent children who are not related to the 8 owner or operator by blood, marriage, or adoption and who 9 require such services. Infants and children considered for admission to a SPPEAC center must have a complex medical 10 11 condition that requires daily care, transitional care, or continual care. The prerequisite for admission is a 12 prescription from the child's attending physician or advanced 13 registered nurse practitioner and consent of the child's 14 15 parent or guardian. Section 3. License required. --16 (1) A person, firm, association, partnership, or 17 corporation may not directly or indirectly operate a SPPEAC 18 19 center in this state without first applying for and receiving 20 a license from the agency to operate the facility. 21 (2) Any person operating a facility in this state is 22 subject to the requirements of this act. 23 (3) An applicant for licensure must submit a separate 24 application for each building of a facility if the buildings 25 are located on separate premises. 26 (4) A licensee may not operate a facility at a 27 capacity greater than the number of clients indicated on the face of the license. 28 29 (5) A license issued for the operation of a SPPEAC 30 center expires 1 year following the date of issuance, unless 31

1 sooner suspended or revoked. An applicant for license renewal must comply with the provisions of this act. 2 3 (6) Another licensed entity may not collocate with a 4 SPPEAC center. 5 Section 4. Licensure procedure. -б (1) Application for a license to operate a SPPEAC 7 center must be made on a form prescribed by the agency and 8 must be submitted to the agency under oath by the owner or 9 administrator of the center. 10 (2) Except for a county or municipality, each 11 applicant must submit a license fee of \$650 to the Agency for Health Care Administration, along with the application for 12 13 licensure. (3) All information provided on the application forms, 14 or by a request for additional information, must be accurate 15 and current at the time of filing. 16 (4) For purposes of this section, with respect to 17 18 information required to be submitted to the agency by an 19 applicant for a license to operate a SPPEAC center which concerns aspects, qualifications, or characteristics personal 20 21 to the applicant, including age, moral character, affiliation through ownership or employment with other SPPEAC centers, and 22 the applicant's criminal record, the term "applicant" means 23 24 the individual applicant, if the applicant is an individual, and the term "applicant" means all members of the board of 25 26 directors and all officers, if the applicant is a firm, 27 partnership, association, or corporation. 28 (5) For purposes of this section, with respect to 29 information required to be submitted to the agency by an 30 applicant for a license to operate a SPPEAC center which 31 concerns qualifications or characteristics personal to the

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1 administrator, manager, or supervisor, including age, moral character, affiliation through ownership or employment with 2 3 other SPPEAC centers, and the applicant's criminal record, the terms "administrator," "manager," or "supervisor" include the 4 5 manager, the supervisor, and all members of the board of б directors and all officers of any firm, partnership, 7 association, or corporation with which the applicant may 8 contract to provide for the management or supervision of the SPPEAC center. 9 10 (6) An applicant for an initial license to operate a 11 SPPEAC center shall submit an application providing all of the information required by the agency, which must include: 12 (a) The number of clients for which the license is 13 14 being requested. The name of the SPPEAC center's administrator, 15 (b) manager, or supervisor; the name and license number of the 16 17 director of nursing and all other currently employed licensed personnel; and the number of currently employed supportive 18 19 personnel having responsibility for any part of the care given 20 to clients. 21 (c) A listing of the number of dietary, housekeeping, maintenance, and other personnel who are available on a daily 22 23 basis. 24 (d) Certificates of approval from the local zoning 25 authority indicating that the location of the facility 26 conforms to local zoning ordinances. 27 (e) Proof of financial ability to operate the facility 28 in accordance with the requirements of this act, which must be 29 documented as follows: 30 1. A projection of revenue and expenses for the first 12 months of operation, including a conversion of the 31 7

1 projection to a cash-flow analysis, a balance sheet as of the beginning of the reporting period, and a proforma balance 2 3 sheet as of the end of the reporting period. These documents 4 must be prepared in accordance with generally accepted 5 accounting principles; б 2. A copy of all deeds, contracts for sale, and 7 leases, whether existing or proposed, showing that the 8 applicant is responsible for the operation of the facility; 9 3. A contingency plan that demonstrates the ability of the applicant to handle extraordinary occurrences that would 10 11 have a financial impact, such as major repairs, purchase of capital equipment, or decrease in paid children's days. An 12 applicant meets this requirement if necessary contingency 13 funds are guaranteed from within the applicant's organization 14 or from proprietors, partners, or stockholders, or are 15 evidenced as available from commitments from lending 16 institutions, a line of credit, a letter of credit, or similar 17 evidence. If the contingency funds are guaranteed by the 18 19 applicant's organization, a proprietor, partners, or stockholders, the guarantors must submit a signed statement 20 that the required funds shall be made available when 21 necessary. The applicant must have a positive cash flow, 22 including contingency funding, for each of the first 12 months 23 24 of operation and must have a contingency plan for an amount not less than 80 percent of the total expenses detailed in the 25 operating budget for the first 12 months of operation. If a 26 27 line of credit exists, a letter from the lending institution 28 must be submitted which states: 29 The amount; a. 30 The terms and conditions; b. The interest rate; 31 с.

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1	d. The repayment schedule;
2	e. The collateral;
3	f. The guarantors; and
4	g. The balance available on the date of license
5	application;
6	4. The names of proprietors, partners, or stockholders
7	owning at least a 10-percent interest, and the officers of:
8	a. The applicant;
9	b. The lessor;
10	c. The management company; and
11	d. The seller.
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13	The financial information submitted by the applicant for
14	compliance with requirements for proof of financial ability
15	must be prepared in accordance with generally accepted
16	accounting principles. The financial information must be
17	reviewed by the agency, and a decision shall be made regarding
18	the applicant's financial ability to operate a SPPEAC center.
19	All financial statements, other then projections, must be
20	certified as true and correct by a corporate officer, all
21	partners of a partnership, or an individual delegated by the
22	owner to do so, as appropriate.
23	(f) For new construction or new operations:
24	1. Certificates of zoning approval from the county or
25	the municipality if the facility is located within municipal
26	limits; and
27	2. Proof of approval for occupancy.
28	(g) For a change of the licensed operator, proof of
29	compliance with applicable provisions of this act.
30	(h) Any other additional information the agency finds
31	necessary in order to act upon the application.
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1 (7) An applicant for renewal of a license to operate a 2 facility must submit an application that includes: 3 (a) All of the information required by paragraphs (6)(a), (d), (e), and (f); and 4 5 The information required by paragraph (6)(b) for (b) б each of the new personnel, if there has been a change of 7 administrator, manager, supervisor, medical director, director 8 of nursing services, or any licensed nurse during the 9 preceding year. 10 (8) If the licensee of a facility seeks to increase 11 the number of children for which the facility is licensed, the licensee must: 12 (a) Provide certificates of approval from the local 13 zoning authority indicating that the location of the facility 14 conforms to local zoning ordinances as to capacity; and 15 (b) Submit an application as required by subsection 16 17 (7) to modify the license accordingly. Each applicant for a license to operate a 18 (9) 19 facility, whether for initial licensure or for renewal, and the administrator, manager, or supervisor of the facility 20 21 must: 22 (a) Be 18 years of age or older; 23 (b) Be of good moral character; and 24 (c) Have not been convicted or found guilty, 25 regardless of adjudication, in any jurisdiction, of any felony 26 involving fraud, embezzlement, fraudulent conversion, 27 misappropriation of property, violence against a person, or 28 moral turpitude. 29 (10) Documentation for the agency showing compliance 30 with subsection (9), whether for initial licensure or for 31

1 renewal, must be submitted with the application and must include: 2 3 (a) Three character references for the applicant and for the administrator, manager, or supervisor of the facility, 4 5 except on renewal if previously provided to the department; б The criminal record, if any, for the applicant and (b) 7 for the administrator, manager, or supervisor of the facility, 8 listing the court, the date of conviction, the offense, and the penalty imposed for each conviction regardless of 9 10 adjudication; and 11 (c) A copy of any injunctive or restrictive order or federal or state administrative order relating to business 12 activity or health care services as a result of an action 13 brought by a public agency or department, including, without 14 limitation, an action affecting a licensee under chapter 391, 15 Florida Statutes, which is currently in effect with respect to 16 17 the applicant or the administrator, manager, or supervisor of 18 the facility. 19 (11)(a) Each facility must obtain and keep in force liability insurance. Proof of liability insurance must be 20 21 submitted at the time of application. Liability insurance is insurance against legal liability for death, injury, or 22 disability of any human being, or for damage to property, with 23 provision for medical, hospital, and surgical benefits to the 24 injured person, irrespective of the legal disability of the 25 insured, when issued as a part of a liability insurance 26 27 contract. 28 (b) Minimum liability insurance coverage shall be at 29 least \$50,000 per child for bodily injury and \$150,000 per 30 occurrence for the center, and \$50,000 per child for the 31

1 bodily injury and \$150,000 per occurrence for the vehicles if 2 transportation services are provided by the center. 3 Section 5. Administration and management. --(1) The licensee of each SPPEAC center has full legal 4 5 authority and responsibility for operating the facility. б Responsibilities of the licensee include, but are not limited 7 to: 8 Employing or otherwise arranging for the services (a) of personnel required to properly staff the center in 9 10 accordance with chapter 391, Florida Statutes, and this act; 11 (b) Adopting and making public a statement of the children's rights in accordance with chapter 391, Florida 12 13 Statutes; (c) Making application for a license to operate the 14 center in accordance with chapter 391, Florida Statutes, and 15 16 this act; 17 (d) Providing equipment and supplies required to meet 18 the needs of the children; 19 (e) Ensuring that the center is operated in compliance with chapter 391, Florida Statutes, and this act; 20 21 (f) Ensuring that services identified as required to 22 meet the needs of the children are provided directly by center personnel or secured from outside sources; and 23 24 (g) Ensuring that a copy of chapter 391, Florida Statutes, a copy of rule 59A-13 and 10D-13, Florida 25 Administrative Code, a medical dictionary, the current year's 26 27 copy of the American Academy of Pediatrics Red Book, and the 28 current year's drug reference book are available in the 29 center. 30 (2) The licensee shall manage the center on a sound financial basis and shall have the financial ability to 31 12

1 operate the facility in accordance with the requirements of chapter 391, Florida Statutes, and this act. A violation of 2 3 this standard includes issuing bad checks; failing to make timely tax and payroll deposits; or failing to meet financial 4 5 obligations for food, shelter, care, and utilities when due. б (3) Each SPPEAC center shall be organized in 7 accordance with a written table of organization which 8 describes the lines of authority and communication down to the child-care level. The organizational structure must be 9 10 designed to ensure an integrated continuum of services to the 11 clients. (4)(a) The licensee of each center shall designate one 12 person as administrator who is responsible and accountable for 13 14 the overall management of the center. The center administrator shall designate, in 15 (b) writing or per organizational chart, a person who is 16 17 responsible for operating the center when the administrator is absent from the center for 24 hours or longer. 18 19 (c) Responsibilities of the center administrator include, but are not limited to: 20 21 1. Maintaining or causing to be maintained the 22 following written records and any other records required by chapter 391, Florida Statutes, and this act. The records must 23 be kept in a place, form, and system ordinarily employed in 24 25 acceptable medical and business practices and must be available in the center for inspection by the agency during 26 27 normal business hours. 28 a. A census record that indicates the number of 29 children currently receiving services in the center; 30 b. A record of all accidents or unusual incidents involving any child or staff member which caused, or had the 31 13

1 potential to cause, injury or harm to any person or property within the center. Such records must contain a clear 2 3 description of each accident or incident, the names of the persons involved, a description of all medical or other 4 5 services provided to these persons, who provided such б services, and the steps taken, if any, to prevent recurrence of such accident or incidents in the future; 7 8 c. A copy of current agreements with third-party providers; 9 10 d. A copy of current agreements with each consultant 11 employed by the center and documentation of each consultant's visits and required written, dated reports; 12 e. A personnel record for each employee, including the 13 employee's current license or certificate number, as 14 applicable; the original employment application and references 15 furnished from the most recent health care employer and 16 employment history for the preceding 5 years; and a copy of 17 18 all job performance evaluations; and 19 f. Fiscal records in accordance with subsection (5). Ensuring the development and maintenance of a 20 2. 21 current job description for each employee. 22 3. Ensuring that each employee is furnished with a copy of written personnel policies governing conditions of 23 24 employment, including the job description for the employee's 25 own position. Ensuring that each employee receives at least a 26 4. 27 yearly written job-performance evaluation that is discussed 28 with the employee, notes job performance strengths and 29 weaknesses, and discusses plans to correct any weaknesses in 30 job performance. 31

1 5. Ensuring that each employee is assigned duties that are consistent with the employee's job description and with 2 3 the employee's level of education, preparation, and 4 experience. 5 (5)(a) The licensee for each SPPEAC center shall б maintain fiscal records in accordance with the requirements of 7 chapter 391, Florida Statutes, and this act. 8 (b) Each center shall use an accrual or cash system of 9 accounting which reflects transactions of the business. Records and accounts of transactions, general ledgers, or 10 11 disbursement journals must be posted at least quarterly and must be available for review by the agency. 12 Section 6. Advisory board .--13 (1) Each SPPEAC center must have an advisory board. 14 Membership on the advisory board must include, but need not be 15 limited to: 16 17 (a) A physician or an advanced registered nurse practitioner who is familiar with SPPEAC services; 18 19 (b) A registered nurse who has experience in the care of medically fragile or technologically dependent children; 20 21 (c) A developmentalist or child life specialist who 22 has experience in the care of medically fragile or 23 technologically dependent children and their families; 24 (d) A social worker who has experience in the care of 25 medically fragile or technologically dependent children and 26 their families; and 27 (e) A consumer representative who is a parent or 28 guardian of a child placed in the SPPEAC center. 29 (2) The advisory board shall: 30 31

1 (a) Review the policy and procedure components of the SPPEAC center to assure conformance with the standards for 2 3 licensure; and (b) Provide consultation with respect to the 4 5 operational and programmatic components of the SPPEAC center. б Section 7. Admission, transfer, and discharge 7 policies.--8 (1) Each SPPEAC center must have written policies and 9 procedures governing the admission, transfer, and discharge of children. 10 11 (2) The admission of each child to a SPPEAC center must be under the supervision of the center nursing 12 administrator or his or her designee, and must be in 13 accordance with the center's policies and procedures. 14 Each child admitted to a SPPEAC center shall be 15 (3) admitted upon prescription of a prescribing physician or 16 17 advanced registered nurse practitioner and the child shall remain under the care of the licensed primary physician or 18 19 advanced registered nurse practitioner for the duration of his 20 or her stay in the center. (4) Each child admitted to a SPPEAC center must meet 21 22 at least the following criteria: 23 (a) The child must be medically fragile or 24 technologically dependent. (b) The child may not, prior to admission, present 25 26 significant risk of infection to other children or personnel. 27 The medical and nursing directors shall review, on a 28 case-by-case basis, any child who is suspected of having an infectious disease to determine whether admission is 29 30 appropriate. 31

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1	(c) The child must be medically stabilized and require
2	skilled nursing care or other interventions.
3	(5) If the child meets the criteria specified in
4	paragraphs (4)(a), (b), and (c), the medical director or
5	nursing director of the SPPEAC center shall implement a
6	preadmission plan that delineates services to be provided and
7	appropriate sources for such services.
8	(a) If the child is hospitalized at the time of
9	referral, preadmission planning must include the participation
10	of the child's parent or guardian and relevant medical,
11	nursing, social services, and developmental staff to assure
12	that the hospital's discharge plans will be implemented
13	following the child's placement in the SPPEAC center.
14	(b) A consent form, outlining the purpose of a SPPEAC
15	center, family responsibilities, authorized treatment,
16	appropriate release of liability, and emergency disposition
17	plans must be signed by the parent or guardian and witnessed
18	before the child is admitted to a SPPEAC center. The parent or
19	guardian shall be provided a copy of the consent form.
20	Confidentiality of SPPEAC records shall be maintained in
21	accordance with section 456.057, Florida Statutes.
22	Section 8. Child care policies
23	(1) Each SPPEAC center shall develop, implement, and
24	maintain written policies and procedures governing all child
25	care and related medical services or other services provided.
26	(2) A group of professional staff from the SPPEAC
27	center shall develop and maintain child care policies and
28	procedures. The group shall include the medical director or
29	medical consultant, the center administrator, and the director
30	of nursing services. All child care policies and procedures
31	must be reviewed annually and revised as needed.
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1 (3) The child care policies and procedures developed shall, at a minimum, ensure client care in compliance with 2 3 chapter 391, Florida Statutes, and the standards contained in 4 this act. 5 Section 9. Medical director.--A board-certified pediatrician shall serve as the medical director for a SPPEAC б center. Responsibilities of the medical director include: 7 8 (1) Periodically reviewing services in order to assure 9 acceptable levels of quality; 10 (2) Maintaining a liaison with the medical community; 11 (3) Advising center personnel of the development of new programs and modifications of existing programs; 12 Ensuring that medical consultation will be 13 (4) available in the event of the medical director's absence; 14 Serving on committees as defined and required by 15 (5) 16 the center's policies; 17 (6) Consulting with the center administrator on the health status of facility personnel; 18 19 (7) Reviewing reports of all accidents or unusual incidents occurring on the premises and identifying to the 20 21 center administrator hazards to health and safety; and Ensuring the development of a policy and procedure 22 (8) for delivering emergency services and regular services when a 23 child's attending physician, advanced registered nurse 24 25 practitioner, or designated alternate is not available. Section 10. Nursing services .--26 27 (1) A registered nurse shall serve full-time as the director of nursing at each SPPEAC center. The director of 28 29 nursing must: 30 (a) Hold a baccalaureate degree in nursing; 31 (b) Be licensed in this state as a registered nurse;

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1	(c) Have successfully completed a certification course
2	in pediatric basic cardiac life support and advanced cardiac
3	life support, with biennial recertification; and
4	(d) Have at least 2 years of experience in general
5	pediatric care, including at least 6 months of experience in
6	pediatric acute care during the previous 5 years.
7	(2) The director of nursing is responsible for the
8	daily operation of the SPPEAC center, including:
9	(a) Ensuring that qualified personnel and ancillary
10	services are available as necessary to assure the health,
11	safety, and proper care of children; and
12	(b) Ensuring that policies and procedures to control
13	infection are included in the center's policy manual.
14	(3)(a) Each SPPEAC center must have a minimum of one
15	full-time equivalent registered nurse and one full-time
16	equivalent licensed practical nurse on site at all times.
17	(b) The registered nurse must:
18	1. Hold a baccalaureate degree in nursing;
19	2. Be licensed in this state as a registered nurse;
20	3. Have at least 2 years of experience in pediatric
21	specialty care;
22	4. Receive biennial certification in pediatric basic
23	cardiac life support and pediatric advanced life support; and
24	5. Have at least 2 years of experience in general
25	pediatrics, including at least 6 months of experience caring
26	for medically fragile or technologically dependent children.
27	(c) A licensed practical nurse must:
28	1. Be licensed in this state as a licensed practical
29	nurse;
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1	2. Have at least 2 years of experience in pediatric
2	nursing, including experience in caring for acutely ill or
3	chronically ill children within the previous 24 months;
4	3. Receive biennial certification in pediatric basic
5	cardiac life support and pediatric advance life support; and
6	4. Have at least 2 years of experience in general
7	pediatrics, including at least 6 months of experience caring
8	for medically fragile or technologically dependent children.
9	(d) The registered nurses and licensed practical
10	nurses of a SPPEAC center are responsible for:
11	1. Providing nursing interventions, providing
12	educational services to increase the family's confidence and
13	competence in caring for the child with special needs,
14	providing assistance to facilitate coping with the effects of
15	chronic illness on the child and family, supporting effective
16	relationships among siblings and the ill child, and providing
17	interventions to foster normal development and psychosocial
18	adaptation;
19	2. Possessing a knowledge of the availability of and
20	requirements for accessing community resources; and
21	3. Fostering and maintaining a collaborative
22	relationship with the interdisciplinary health team.
23	(4)(a) If nursing assistants are used to augment
24	licensed nurse staff, each nursing assistant must:
25	1. Be certified as a nurse assistant;
26	2. Have a minimum of 2 years' experience in caring for
27	infants and toddlers;
28	3. Provide references documenting his or her skill in
29	caring for infants and children; and
30	4. Receive annual certification in basic cardiac life
31	support.
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1 (b) Each nursing assistant must work under the 2 supervision of a licensed nurse and may provide direct care to 3 children in the SPPEAC center. (5) Total staffing for nursing services shall be, at a 4 5 minimum, in the following ratios, but at least two staff б members, including at least one registered nurse, must be on 7 duty at all times and at least one staff member per three 8 children must be on duty at all times: 9 (a) One to three children - one registered nurse and 10 one other. 11 (b) Four to six children - one registered nurse and 12 two others. (c) Seven to nine children - one registered nurse, one 13 licensed practical nurse, and one other. 14 15 (d) Ten to 12 children - two registered nurses, and two others; or one registered nurse, two licensed practical 16 17 nurses, and one other. (e) Thirteen to 15 children - two registered nurses, 18 19 one licensed practical nurse, and two others. (f) Sixteen to 18 children - two registered nurses, 20 21 two licensed practical nurses, and two others. Nineteen to 21 children - two registered nurses, 22 (q) three licensed practical nurses, and two others. 23 24 (h) Twenty-two to 24 children - two registered nurses, three licensed practical nurses, and three others. 25 26 Twenty-five children to 28 children - three (i) 27 registered nurses, three licensed practical nurses, and three others. 28 29 Section 11. Ancillary professional staffing 30 standards. -- Each SPPEAC center shall have available on at 31 least a consultant basis:

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1 (1) A child development specialist who shall: 2 (a) Serve as a resource for SPPEAC center staff and 3 parents of children served; and 4 (b) Evaluate the developmental status of children 5 using standardized and nonstandardized procedures. 6 (2) A child life specialist who has a baccalaureate 7 degree in child life, early childhood education, or a related 8 field, and at least 1 year of experience in planning and 1 (a) Plan and conduct individualized child development 11 (a) Plan and conduct individualized child development 12 and play programs; and 13 (b) Serve as a resource for SPPEAC center staff and 14 parents of children served. 15 (3) An occupational therapist who is licensed under 16 chapter 468, Florida Statutes, is registered with the American 17 Occupational Therapy Association, and has at least 1 year of 18 (a) Evaluate a child following referral by a physician 19 with neuromuscular and developmental needs. The occupational 12 (a) Evaluate a child following referral by a physician 10 or advanced registered nurse practitioner to determine <th>-</th> <th></th>	-	
3parents of children served; and4(b) Evaluate the developmental status of children5using standardized and nonstandardized procedures.6(2) A child life specialist who has a baccalaureate7degree in child life, early childhood education, or a related8field, and at least 1 year of experience in planning and9implementing developmental stimulation programs for children.10The child life specialist shall:11(a) Plan and conduct individualized child development12and play programs; and13(b) Serve as a resource for SPPEAC center staff and14parents of children served.15(3) An occupational therapist who is licensed under16chapter 468, Florida Statutes, is registered with the American17Occupational Therapy Association, and has at least 1 year of18experience in evaluating and planning treatment for children19with neuromuscular and developmental needs. The occupational10therapist shall:11(a) Evaluate a child following referral by a physician12or advanced registered nurse practitioner to determine13neuromuscular status, developmental level, perceptual motor14functioning, need for adaptive equipment or appliances,15abilities for self-care, and the plan of care:16(b) Design and implement a therapeutic program to meet17the needs of each individual child:18(c) Maintain records documenting a child's therapy19program and	1	(1) A child development specialist who shall:
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23 <u>neuromuscular status, developmental level, perceptual motor</u> 24 <u>functioning, need for adaptive equipment or appliances,</u> 25 <u>abilities for self-care, and the plan of care;</u> 26 <u>(b) Design and implement a therapeutic program to meet</u> 27 <u>the needs of each individual child;</u> 28 <u>(c) Maintain records documenting a child's therapy</u> 29 <u>program and progress; and</u> 30 <u>(d) Serve as a resource for SPPEAC center staff.</u>	21	(a) Evaluate a child following referral by a physician
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27 <u>the needs of each individual child;</u> 28 <u>(c) Maintain records documenting a child's therapy</u> 29 <u>program and progress; and</u> 30 <u>(d) Serve as a resource for SPPEAC center staff.</u>	25	abilities for self-care, and the plan of care;
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29 program and progress; and 30 (d) Serve as a resource for SPPEAC center staff.	27	the needs of each individual child;
30 (d) Serve as a resource for SPPEAC center staff.	28	(c) Maintain records documenting a child's therapy
	29	program and progress; and
21	30	(d) Serve as a resource for SPPEAC center staff.
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1	(4) A physical therapist who is licensed under chapter
2	468, Florida Statutes, is a graduate of a program approved by
3	the American Physical Therapy Association, and has at least 1
4	year of experience in evaluating and designing therapeutic
5	programs for children with developmental disabilities. The
6	physical therapist shall:
7	(a) Evaluate a child referred by a physician or
8	advanced registered nurse practitioner to determine the
9	child's neuromuscular status, including the child's
10	developmental level, gait, posture, and necessary adaptive
11	equipment;
12	(b) Design and implement a therapeutic program to meet
13	the needs of each individual child;
14	(c) Maintain records documenting a child's therapy
15	program and progress, as approved by the attending physician
16	or advanced registered nurse practitioner; and
17	(d) Serve as a resource for SPPEAC center staff and
18	parents of children served.
19	(5) A speech pathologist who is certified by the
20	American Speech, Hearing, and Language Association and has at
21	least 1 year of experience in evaluating and treating children
22	at risk for, or experiencing problems with, communications
23	skills. The speech pathologist shall:
24	(a) Perform evaluations, including evaluation of a
25	child's prespeech, feeding, respiration, language, speech,
26	communication, and play, using formal and informal tests and
27	observations;
28	(b) Design and implement individualized therapeutic
29	programs for each child, including recommendations for
30	communication devices;
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1 (c) Maintain records documenting the child's therapy 2 programs and progress; and 3 (d) Serve as a resource for SPPEAC center staff and 4 parents of children served. 5 (6) A respiratory therapist who shall: 6 (a) Evaluate a child following referral by a physician 7 or advanced registered nurse practitioner, including an 8 evaluation of the child's respiratory condition; 9 (b) Perform diagnostic monitoring; (c) Deliver aerosolized medications, bronchial hygiene 10 11 therapy, chest physiotherapy, pulmonary lung-expansion therapy, and oxygen therapy; 12 (d) Monitor ventilator-dependent children; 13 (e) Maintain records documenting a child's therapy 14 programs and progress; and 15 Serve as a resource for SPPEAC center staff and 16 (f) 17 parents of children served. (7) A social worker who is licensed under chapter 490, 18 19 Florida Statutes, or chapter 491, Florida Statutes; holds a master's degree in social work; and has at least 1 year of 20 21 experience in assessing, counseling, and planning interventions for children and their families or guardians. 22 The social worker shall: 23 24 (a) Conduct family psychosocial assessments, as requested by the medical or nursing director; 25 26 Provide counseling, including emotional support (b) 27 and grief resolution, as requested by the medical or nursing 28 director or family; 29 (c) Perform family advocacy and coordinate SPPEAC 30 services with community resources; 31

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1	(d) Maintain records documenting social-work
2	intervention;
3	(e) Conduct home visits and home evaluations, as
4	requested by the medical director or nursing director; and
5	(f) Serve as a resource for SPPEAC center staff and
6	parents of children served.
7	(8) A licensed psychologist who has a doctoral degree
8	in child-development counseling, psychology, or a related
9	field and at least 1 year of experience in evaluating and
10	managing children. The licensed psychologist must be available
11	to the center as a consultant.
12	(9) A dietitian who is registered with the American
13	Dietetic Association. The dietitian must be available to the
14	center as a consultant.
15	Section 12. Educational servicesEach SPPEAC center
16	shall develop a cooperative program with the local school
17	system to provide a planned educational program, appropriate
18	to meet the needs of the individual child, or to provide a
19	board-certified instructor and planned educational program,
20	appropriate to meet the needs of the individual child.
21	Section 13. In-service training for all caregivers
22	(1) Each SPPEAC center shall develop a comprehensive
23	training program that is available to all caregivers and
24	includes:
25	(a) In-service training for all family members; and
26	(b) Quarterly staff-development programs, appropriate
27	to the category of personnel for which the programs are
28	conducted, for the purpose of maintaining quality patient
29	care.
30	(2) All staff-development programs must be documented.
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1	(3) Each new employee must participate in orientation
2	to acquaint the employee with the philosophy, organization,
3	program, practices, and goals of the SPPEAC center.
4	(4) At the time of the child's placement in the SPPEAC
5	center, the center shall provide a comprehensive orientation
6	to acquaint all family members with the philosophy and
7	services of the center.
8	Section 14. Medical recordsA medical record shall
9	be maintained for each child. The medical records must
10	<u>contain:</u>
11	(1) All details of the referral, admission,
12	correspondence, and papers concerning the child. Entries in
13	the medical record must be in ink and signed by authorized
14	personnel and include:
15	(a) Orders of the physician or advanced registered
16	nurse practitioner;
17	(b) Flow chart of medications and treatments
18	administered;
19	(c) Concise, accurate information and initialed case
20	notes reflecting progress toward plan-of-care goals and the
21	child's progress or reasons for lack of progress;
22	(d) Documentation of nutritional management and
23	special diets, as appropriate; and
24	(e) Documentation of physical, occupational, speech,
25	and other special therapies.
26	(2) An individualized plan of care developed within 10
27	working days after admission and revised to include
28	recommended changes in the therapeutic plans. The disposition
29	to be followed in the event of emergency situations must be
30	specified in the plan of care.
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1	(3) The medical history, including allergies and
2	special precautions.
3	(4) The immunization record.
4	(5) The quarterly review of the plan of care, which is
5	performed in consultation with other professionals involved in
б	the child's care.
7	(6) A discharge order written by the primary physician
8	or advanced registered nurse practitioner. The discharge order
9	must be documented and entered in the child's record. A
10	discharge summary that includes the reason for discharge must
11	also be included.
12	Section 15. Quality assurance committeeAll SPPEAC
13	centers must have a quality assurance program and conduct
14	quarterly reviews of the SPPEAC center's medical records for
15	at least half of the children served by the SPPEAC center at
16	the time of the review.
17	(1) The quality assurance review shall be conducted by
18	two members of the quality assurance committee. The
19	responsibilities for conducting quality assurance review shall
20	rotate among the members of the quality assurance committee
21	members at least annually. Within 15 working days after its
22	review, the quality assurance committee shall furnish copies
23	of its report to the medical and nursing directors of the
24	SPPEAC center.
25	(2)(a) Each quarterly quality assurance review must
26	include:
27	1. A review of the goals in each child's plan of care;
28	2. A review of the steps, process, and success in
29	achieving the goals; and
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1 3. Identification of goals not being achieved as 2 expected, reasons for lack of achievement, and plans to 3 promote achievement of goals. (b) Evidence that the plan of care has been revised to 4 5 accommodate the findings of a quality assurance report shall б be forwarded to the quality assurance committee within 10 7 working days after receipt of the report by the quality 8 assurance committee. 9 (c) Implementation of the revisions to the plan of 10 care must be documented on the child's medical record. 11 (3) The quality assurance committee shall also ascertain the presence of the following documents in each 12 child's medical record: 13 (a) A properly executed consent form; 14 A medical history for the child, including 15 (b) notations from visits to health care providers; and 16 17 (c) Immunization records, documentation of allergies, 18 and special precautions. 19 Section 16. Dietary services. -- A registered dietitian shall be available for consultation regarding the nutritional 20 21 needs and special diets of individual children. If food is prepared on-site, the center is subject to routine inspections 22 by the Department of Health and must conform to food service 23 24 standards for child care facilities adopted by the Department 25 of Health. Section 17. Physical environment.--The SPPEAC center's 26 27 physical location and building must comply with at least the 28 following minimum requirements: 29 (1) Each facility licensed as a SPPEAC center must be 30 able to accommodate at least three medically fragile or technologically dependent children. 31 28

1	(2) Specifications for a SPPEAC center include:
2	(a) Compliance with part V of chapter 553, Florida
3	Statutes, for accessibility of public buildings for
4	handicapped persons; and
5	(b) Adequate parking for staff and families to comply
6	with applicable local zoning requirements.
7	(3) Requirements for building space allocation
8	include:
9	(a) An isolation room with anteroom, a private
10	bathroom with shower or raised tub, and an individual air
11	conditioning and heating unit.
12	(b) A dining area large enough to accommodate at least
13	two-thirds of facility population at one time.
14	(c) A kitchen area that includes standard kitchen
15	equipment of stove, oven, refrigerator, dishwasher, and double
16	sink with disposal.
17	(d) An indoor play area, including accommodations for
18	mobile and nonmobile children.
19	(e) An outdoor play area, fenced and free of safety
20	hazards, with appropriate playground equipment and toys.
21	(f) Sleep rooms that comply with the following
22	requirements:
23	1. One appropriate bed or crib assigned per child;
24	2. A maximum of three children assigned to each sleep
25	room;
26	3. A minimum of 28 square feet per child;
27	4. Hanging closet space with drawers;
28	5. Direct access to a bathroom with shower or standard
29	tub;
30	6. A changing area with sink; and
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1	7. Adequate seating with a minimum of one chair per
2	child.
3	(g) A laundry room with washer and dryer or daily
4	linen service.
5	(h) A business office.
6	(i) A children's bathroom in the common area which has
7	one toilet, one basin, and one standard bathtub or shower.
8	(j) An adult bathroom that has one toilet and one
9	basin.
10	(k) A staff lounge that includes:
11	1. A bathroom, with one toilet, one basin, and one
12	shower stall with private changing area per 15 staff members;
13	2. Couches or seating to accommodate a minimum of
14	one-fourth of the staff at any time; and
15	3. Secure lockers for personal items.
16	(1) A nurses station and medication area that includes
17	a locked cabinet and emergency kit.
18	(m) An education room, including one area designated
19	for children 0-2 years of age.
20	(n) A gymnasium area for therapies, with a minimum of
21	one private speech room.
22	Section 18. Furniture and linensEach SPPEAC center
23	must provide an appropriate mix of cribs, beds, highchairs,
24	infant seats, and changing tables to meet the needs of the
25	children being served. All provided items must be maintained
26	in a safe and sanitary condition. A minimum of one bed or crib
27	per child is required, which may not be occupied by more than
28	one child at a time. Linens must be changed and mattresses
29	sanitized before use by another child.
30	Section 19. EquipmentEach SPPEAC center shall
31	provide safety, medical, and emergency equipment as described
	30

1 in this section. All equipment must be maintained in a safe, usable, and sanitary condition. 2 3 (1) The following items of safety equipment must be 4 available on the premises: 5 Extinguishers, alarms, and smoke detectors, as (a) б required by the Life Safety Code, NFPA-101, 1985 edition; 7 (b) Circuit interrupters; 8 Flush door openers; (C) 9 Child-proof safety latches on closets and (d) 10 cabinets; 11 Straps on all highchairs, swings, and infant (e) 12 seats; Locks on specific storage cabinets; 13 (f) 14 (q) Bumper pads on infant cribs; and Covers for electric outlets. 15 (h) The following items of medical equipment must be 16 (2) 17 available on the premises: 18 Suction machines - one per child requiring daily (a) 19 suctioning, plus one suction machine for emergency use; Mist tents - one per child with respiratory 20 (b) 21 diagnosis as prescribed; (c) Lockable narcotics cabinet; 22 (d) Mechanical percussors and hand percussors as 23 24 prescribed; 25 (e) Oxygen in two portable tanks, or piped in with appropriate tubing, pediatric manual resuscitation, and masks 26 27 for faces and tracheostomies; (f) Ventilator with provision for mixing gases to 28 29 provide prescribed oxygen concentration as specifically prescribed or to be used as a back-up unit when a 30 ventilator-dependent child is in the center; 31 31

1	(g) Thermometers, excluding glass thermometers;
2	(h) Sphygmomanometers, stethoscopes, osteoscopes, and
3	ophthalmoscopes;
4	(i) Apnea-monitoring supplies, including belts and
5	leads to apply to monitors brought from home; and
6	(j) Supplies of disposable equipment as needed.
7	(3) The following items of emergency equipment and
8	supplies must be available on the premises:
9	(a) An emergency power-generator system, with adequate
10	generating power to maintain medical equipment in the center
11	in case of power failure.
12	(b) Basic emergency equipment, including:
13	1. Airways, in a range of appropriate pediatric sizes;
14	2. Suction catheters, in a range of appropriate
15	pediatric sizes;
16	3. Pediatric manual resuscitator, self-inflating, with
17	premie, infant, and pediatric masks;
18	4. Infant oxygen masks;
19	5. Child oxygen masks;
20	6. Oxygen regulator with mist bottle and heating
21	element;
22	7. Flashlight with extra batteries in each room;
23	8. Stethoscope;
24	9. Feeding tubes in a range of appropriate pediatric
25	<u>sizes;</u>
26	10. Disposable plastic syringes and needles in a range
27	of appropriate pediatric sizes;
28	11. Intravenous catheter, angio-catheter, and scalp
29	vein needles in a range of appropriate pediatric sizes;
30	12. Tourniquets; armboards in premie, infant, and
31	child sizes; and adhesive tape of various sizes;
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1	13. Two-way stopcocks;
2	14. One electrical-outlet adapter for three-prong
3	outlets; and
4	15. Antiseptic preps and alcohol preps.
5	(c) Basic drugs and solutions, including:
6	1. Epinephrine ampules, two each of 1:1,000 and
7	<u>1:10,000;</u>
8	2. Dextrose in 25-percent solution and 50-percent
9	solution;
10	3. Ipecac, one 30cc bottle;
11	4. Sterile water, two vials;
12	5. Normal saline, two vials;
13	6. Dextrose 5 percent in water, one 500cc bag; and
14	7. Dextrose 5 percent in Lactated Ringer's, two 500cc
15	bags;
16	(d) If tank oxygen is used, two portable cylinders of
17	oxygen, properly secured.
18	(e) A suction machine with sterile suction catheters
19	<u>in pediatric sizes.</u>
20	(4) Emergency equipment must be checked daily for
21	expiration, contamination, or damage, and a log must be
22	maintained and signed every day by the nurse responsible for
23	verifying the examining of emergency equipment;
24	Section 20. Infection control
25	(1) Each SPPEAC center must have an isolation room
26	with one large glass area for observing the child.
27	(2) Isolation procedures must be used to prevent
28	cross-infections.
29	(3) All cribs and beds must be labeled with the
30	individual child's name. Linens may be removed from cribs only
31	for laundering purposes.
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1	(4) Bed linens must be changed at least once every
2	other day.
3	(5) Antimicrobial soap and disposable paper towels
4	must be provided at each sink.
5	(6) Children suspected of having a communicable
6	disease that may be transmitted through casual contact, as
7	determined by the facility's medical director, must be
8	isolated and the parents notified of the condition. Isolation
9	must be continued until a physician or advanced registered
10	nurse practitioner determines communicability has passed.
11	(7) SPPEAC center staff members suspected of having a
12	communicable disease may not return to the SPPEAC center until
13	the signs and symptoms that relate to the communicable disease
14	are no longer present, as evidenced by a written statement
15	from a physician or advanced registered nurse practitioner.
16	Section 21. <u>Transportation servicesIf</u>
17	transportation is provided by a SPPEAC center and prescribed
18	by the primary physician or advanced registered nurse
19	practitioner, a procedure delineating personnel and equipment
20	to accompany the child must be included in the procedure
21	manual of the SPPEAC center.
22	Section 22. Emergency procedures
23	(1) Each SPPEAC center shall conform to the minimum
24	standards for child care facilities adopted by the State Fire
25	Marshal and shall be inspected annually by a certified fire
26	inspector. The center must maintain a copy of the current
27	annual fire inspection report at the center.
28	(2) The center must have a working telephone that is
29	not locked and that is not a pay telephone.
30	(3) Emergency telephone numbers must be posted on or
31	in the immediate vicinity of all telephones.
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(4) Each center must have an emergency power source with sufficient generating power to continue the function of medical equipment in the event of a power failure. The emergency generator must be tested every 30 days and satisfactory mechanical operation must be documented on a log designed for that purpose. Emergency transportation of a child must be (5) performed by a licensed emergency medical services provider, with a SPPEAC center staff member accompanying the child. Section 23. This act shall take effect October 1, 2002. SENATE SUMMARY Requires the Agency for Health Care Administration to license subacute pediatric prescribed extended alternative care centers that provide care for medically fragile or technologically dependent children. Specifies requirements for obtaining and maintaining such a license. Provides requirements for the professional staff employed by a SPPEAC center. Provides requirements for qualify assurance for a center. Specifies minimum equipment and supplies that must be maintained by a center. (See bill for details.)