By Representatives Lerner, Sobel, Ritter, Rich, Joyner, Peterman, Detert, Barreiro and Heyman

A bill to be entitled 1 An act relating to children's medical services; 2 providing legislative intent with respect to 3 4 the licensure and regulation of facilities that provide care for medically fragile or 5 technologically dependent children; providing 6 7 definitions; providing requirements for the 8 licensure of subacute pediatric prescribed 9 extended alternative care centers; providing for the licensing of such facilities by the 10 Agency for Health Care Administration; 11 providing for fees; providing requirements for 12 13 applicants for licensure; providing 14 requirements for a licensee in administering and managing a SPPEAC center; requiring that 15 each center have an advisory board; providing 16 for membership on the advisory board; providing 17 requirements for the admission of a child to a 18 19 SPPEAC center; requiring each center to maintain policies for child care; requiring 20 that a board-certified pediatrician serve as 21 2.2 the medical director of a center; providing requirements for the nursing services provided 23 24 at a SPPEAC center; providing requirements for 25 the qualifications and experience of nursing 26 personnel; specifying the minimum staff-to-child ratio for a center; providing 27 requirements for ancillary professional staff; 28 requiring that a SPPEAC center provide certain 29 educational services for children admitted to 30 the center; requiring inservice training for 31

center staff and family members of children admitted to the center; requiring that the center maintain certain medical records; requiring that a center have a committee to conduct reviews for quality assurance; providing requirements for dietary services provided at a center; providing requirements for the physical environment of a SPPEAC center; requiring that a center maintain certain specified safety, medical, and emergency equipment; providing requirements for infection control; providing requirements for transportation services provided by a center; requiring that a center conform to certain minimum emergency standards; providing an effective date.

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

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Section 1. Purpose.--It is the intent of the Legislature to provide for the licensure and regulation of facilities that provide care for medically fragile or technologically dependent children.

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Section 2. <u>Definitions.--As used in this act, the term:</u>

(1) "Advisory board" means a group of health care

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professionals and at least one consumer approved by the SPPEAC medical and nursing directors to serve each SPPEAC center to review policies, procedures, and licensure requirements and to provide consultation to the administrators of the center.

- (3) "Basic services" includes, but is not limited to, development, implementation, and monitoring of a comprehensive plan of care, developed in conjunction with a child's parent or guardian, which specifies the medical, nursing, psychosocial, and developmental therapies required by the medically fragile or technologically dependent child served, as well as the caregiver-training needs of the child's parent or guardian.
- (4) "Medical director" means a physician who is licensed under chapter 458 or chapter 459, Florida Statutes, who is certified by the American Board of Pediatrics or the American Osteopathic Board of Pediatrics, and who serves as the liaison between the SPPEAC and the medical community.
- (5) "Medical records" means the medical records
 maintained by a SPPEAC center in accordance with accepted
 professional standards and practices.
- (6) "Medically fragile or technologically dependent child" means a child who, because of a medical condition, requires continuous therapeutic interventions or skilled nursing supervision that is prescribed by a licensed physician or advanced registered nurse practitioner and administered by or under the direct, onsite supervision of a licensed registered nurse.
- (7) "Nursing director" means a registered nurse who is licensed under chapter 464, Florida Statutes, and who is responsible for providing continuous supervision of services provided by a SPPEAC center and managing the daily operations of the center.

- (8) "Owner" or "operator" means an individual who has general administrative charge of a SPPEAC center.
- (9) "Plan of care" means the comprehensive plan for implementing the medical, nursing, psychosocial, developmental, and educational therapies provided by a SPPEAC center.
- (10) "Premises" means the buildings, beds, and facilities located at the main address of the licensee.
- (11) "Prescribing physician" or "prescribing advanced registered nurse practitioner" means the physician licensed under chapter 458 or chapter 459, Florida Statutes, or the advanced registered nurse practitioner licensed under chapter 464, Florida Statutes, who signs the order admitting a child to a SPPEAC.
- registered nurse practitioner" means the physician licensed under chapter 458 or chapter 459, Florida Statutes, or the licensed advanced registered nurse practitioner licensed under chapter 464, Florida Statutes, who maintains overall responsibility for a child's medical management and who is available for consultation and collaboration with the staff of the SPPEAC center.
- (13) "Quality assurance" means the mandatory program that all SPPEAC centers must have to assure periodic review of medical records at least annually and the determination of the quality and appropriateness of care rendered by the center.
- (14) "Quality assurance committee" means a group of health care professionals and at least one consumer approved by the SPPEAC medical and nursing directors to serve each SPPEAC center to review SPPEAC medical records and treatment

 procedures to evaluate the quality of care provided to each child.

alternative care center" or "SPPEAC center" means any building or other place, whether operated for profit or not, which provides basic services to three or more medically fragile or technologically dependent children who are not related to the owner or operator by blood, marriage, or adoption and who require such services. Infants and children considered for admission to a SPPEAC center must have a complex medical condition that requires daily care, transitional care, or continual care. The prerequisite for admission is a prescription from the child's attending physician or advanced registered nurse practitioner and consent of the child's parent or guardian.

Section 3. License required.--

- (1) A person, firm, association, partnership, or corporation may not directly or indirectly operate a SPPEAC center in this state without first applying for and receiving a license from the agency to operate the facility.
- (2) Any person operating a facility in this state is subject to the requirements of this act.
- (3) An applicant for licensure must submit a separate application for each building of a facility if the buildings are located on separate premises.
- (4) A licensee may not operate a facility at a capacity greater than the number of clients indicated on the face of the license.
- (5) A license issued for the operation of a SPPEAC center expires 1 year following the date of issuance, unless

sooner suspended or revoked. An applicant for license renewal must comply with the provisions of this act.

(6) Another licensed entity may not collocate with a SPPEAC center.

Section 4. Licensure procedure.--

- (1) Application for a license to operate a SPPEAC center must be made on a form prescribed by the agency and must be submitted to the agency under oath by the owner or administrator of the center.
- (2) Except for a county or municipality, each applicant must submit a license fee of \$650 to the Agency for Health Care Administration, along with the application for licensure.
- (3) All information provided on the application forms, or by a request for additional information, must be accurate and current at the time of filing.
- information required to be submitted to the agency by an applicant for a license to operate a SPPEAC center which concerns aspects, qualifications, or characteristics personal to the applicant, including age, moral character, affiliation through ownership or employment with other SPPEAC centers, and the applicant's criminal record, the term "applicant" means the individual applicant, if the applicant is an individual, and the term "applicant" means all members of the board of directors and all officers, if the applicant is a firm, partnership, association, or corporation.
- (5) For purposes of this section, with respect to information required to be submitted to the agency by an applicant for a license to operate a SPPEAC center which concerns qualifications or characteristics personal to the

administrator, manager, or supervisor, including age, moral character, affiliation through ownership or employment with other SPPEAC centers, and the applicant's criminal record, the terms "administrator," "manager," and "supervisor" include the manager, the supervisor, and all members of the board of directors and all officers of any firm, partnership, association, or corporation with which the applicant may contract to provide for the management or supervision of the SPPEAC center.

- (6) An applicant for an initial license to operate a SPPEAC center shall submit an application providing all of the information required by the agency, which must include:
- (a) The number of clients for which the license is being requested.
- (b) The name of the SPPEAC center's administrator, manager, or supervisor; the name and license number of the director of nursing and all other currently employed licensed personnel; and the number of currently employed supportive personnel having responsibility for any part of the care given to clients.
- (c) A listing of the number of dietary, housekeeping, maintenance, and other personnel who are available on a daily basis.
- (d) Certificates of approval from the local zoning authority indicating that the location of the facility conforms to local zoning ordinances.
- (e) Proof of financial ability to operate the facility in accordance with the requirements of this act, which must be documented as follows:
- 1. A projection of revenue and expenses for the first
 12 months of operation, including a conversion of the

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

The interest rate;

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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.

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							
4	(6)(a), (d), (e), and (f); and							
5	(b) The information required by paragraph (6)(b) for							
6	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							
12	licensee must:							
13	(a) Provide certificates of approval from the local							
14	zoning authority indicating that the location of the facility							
15	conforms to local zoning ordinances as to capacity; and							
16	(b) Submit an application as required by subsection							
17	(7) to modify the license accordingly.							
18	(9) Each applicant for a license to operate a							
19	facility, whether for initial licensure or for renewal, and							
20	the administrator, manager, or supervisor of the facility							
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							
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 $\frac{\text{renewal, must be submitted with the application and must}}{\underline{\text{include:}}}$

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

bodily injury and \$150,000 per occurrence for the vehicles if 1 2 transportation services are provided by the center. 3 Section 5. Administration and management. --4 (1) The licensee of each SPPEAC center has full legal 5 authority and responsibility for operating the facility. 6 Responsibilities of the licensee include, but are not limited 7 to: 8 (a) Employing or otherwise arranging for the services 9 of personnel required to properly staff the center in 10 accordance with chapter 391, Florida Statutes, and this act; 11 (b) Adopting and making public a statement of the 12 children's rights in accordance with chapter 391, Florida 13 Statutes; 14 (c) Making application for a license to operate the 15 center in accordance with chapter 391, Florida Statutes, and 16 this act; (d) Providing equipment and supplies required to meet 17 the needs of the children; 18 19 Ensuring that the center is operated in compliance (e) 20 with chapter 391, Florida Statutes, and this act; 21 (f) Ensuring that services identified as required to 22 meet the needs of the children are provided directly by center 23 personnel or secured from outside sources; and 24 (g) Ensuring that a copy of chapter 391, Florida 25 Statutes, a copy of rules 59A-13 and 10D-13, Florida 26 Administrative Code, a medical dictionary, the current year's 27 copy of the American Academy of Pediatrics Red Book, and the

(2) The licensee shall manage the center on a sound

current year's drug reference book are available in the

financial basis and shall have the financial ability to

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center.

operate the facility in accordance with the requirements of chapter 391, Florida Statutes, and this act. A violation of this standard includes issuing bad checks; failing to make timely tax and payroll deposits; or failing to meet financial obligations for food, shelter, care, and utilities when due.

- (3) Each SPPEAC center shall be organized in accordance with a written table of organization which describes the lines of authority and communication down to the child-care level. The organizational structure must be designed to ensure an integrated continuum of services to the clients.
- (4)(a) The licensee of each center shall designate one person as administrator who is responsible and accountable for the overall management of the center.
- (b) The center administrator shall designate, in writing or per organizational chart, a person who is responsible for operating the center when the administrator is absent from the center for 24 hours or longer.
- (c) Responsibilities of the center administrator
 include, but are not limited to:
- 1. Maintaining or causing to be maintained the following written records and any other records required by chapter 391, Florida Statutes, and this act, which records must be kept in a place, form, and system ordinarily employed in acceptable medical and business practices and must be available in the center for inspection by the agency during normal business hours:
- a. A census record that indicates the number of children currently receiving services in the center;
- b. A record of all accidents or unusual incidents
 involving any child or staff member which caused, or had the

 potential to cause, injury or harm to any person or property within the center. Such records must contain a clear description of each accident or incident, the names of the persons involved, a description of all medical or other services provided to these persons, who provided such services, and the steps taken, if any, to prevent recurrence of such accident or incidents in the future;

- c. A copy of current agreements with third-party providers;
- d. A copy of current agreements with each consultant employed by the center and documentation of each consultant's visits and required written, dated reports;
- e. A personnel record for each employee, including the employee's current license or certificate number, as applicable; the original employment application and references furnished from the most recent health care employer and employment history for the preceding 5 years; and a copy of all job performance evaluations; and
 - f. Fiscal records in accordance with subsection (5).
- 2. Ensuring the development and maintenance of a current job description for each employee.
- 3. Ensuring that each employee is furnished with a copy of written personnel policies governing conditions of employment, including the job description for the employee's own position.
- 4. Ensuring that each employee receives at least a yearly written job-performance evaluation that is discussed with the employee, notes job performance strengths and weaknesses, and discusses plans to correct any weaknesses in job performance.

1	5. Ensuring that each employee is assigned duties that							
2	are consistent with the employee's job description and with							
3	the employee's level of education, preparation, and							
4	experience.							
5	(5)(a) The licensee for each SPPEAC center shall							
6	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.							
10	Records and accounts of transactions, general ledgers, or							
11	disbursement journals must be posted at least quarterly and							
12	must be available for review by the agency.							
13	Section 6. Advisory board							
14	(1) Each SPPEAC center must have an advisory board.							
15	Membership on the advisory board must include, but need not be							
16	limited to:							
17	(a) A physician or an advanced registered nurse							
18	practitioner who is familiar with SPPEAC services;							
19	(b) A registered nurse who has experience in the care							
20	of medically fragile or technologically dependent children;							
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:							
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1	(a) Review the policy and procedure components of the
2	SPPEAC center to assure conformance with the standards for
3	licensure; and
4	(b) Provide consultation with respect to the
5	operational and programmatic components of the SPPEAC center.
6	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
10	children.
11	(2) The admission of each child to a SPPEAC center
12	must be under the supervision of the center nursing
13	administrator or his or her designee, and must be in
14	accordance with the center's policies and procedures.
15	(3) Each child admitted to a SPPEAC center shall be
16	admitted upon prescription of a prescribing physician or
17	advanced registered nurse practitioner and the child shall
18	remain under the care of the licensed primary physician or
19	advanced registered nurse practitioner for the duration of his
20	or her stay in the center.
21	(4) Each child admitted to a SPPEAC center must meet
22	at least the following criteria:
23	(a) The child must be medically fragile or
24	technologically dependent.
25	(b) The child may not, prior to admission, present
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
29	infectious disease to determine whether admission is

appropriate.

- (c) The child must be medically stabilized and require skilled nursing care or other interventions.
- (5) If the child meets the criteria specified in paragraphs (4)(a), (b), and (c), the medical director or nursing director of the SPPEAC center shall implement a preadmission plan that delineates services to be provided and appropriate sources for such services.
- (a) If the child is hospitalized at the time of referral, preadmission planning must include the participation of the child's parent or guardian and relevant medical, nursing, social services, and developmental staff to assure that the hospital's discharge plans will be implemented following the child's placement in the SPPEAC center.
- (b) A consent form, outlining the purpose of a SPPEAC center, family responsibilities, authorized treatment, appropriate release of liability, and emergency disposition plans must be signed by the parent or guardian and witnessed before the child is admitted to a SPPEAC center. The parent or guardian shall be provided a copy of the consent form.

 Confidentiality of SPPEAC records shall be maintained in accordance with section 456.057, Florida Statutes.

Section 8. Child care policies.--

- (1) Each SPPEAC center shall develop, implement, and maintain written policies and procedures governing all child care and related medical services or other services provided.
- (2) A group of professional staff from the SPPEAC center shall develop and maintain child care policies and procedures. The group shall include the medical director or medical consultant, the center administrator, and the director of nursing services. All child care policies and procedures must be reviewed annually and revised as needed.

1	(3) The child care policies and procedures developed
2	shall, at a minimum, ensure client care in compliance with
3	chapter 391, Florida Statutes, and the standards contained in
4	this act.
5	Section 9. Medical directorA board-certified
6	pediatrician shall serve as the medical director for a SPPEAC
7	center. Responsibilities of the medical director include:
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
12	new programs and modifications of existing programs;
13	(4) Ensuring that medical consultation will be
14	available in the event of the medical director's absence;
15	(5) Serving on committees as defined and required by
16	the center's policies;
17	(6) Consulting with the center administrator on the
18	health status of facility personnel;
19	(7) Reviewing reports of all accidents or unusual
20	incidents occurring on the premises and identifying to the
21	center administrator hazards to health and safety; and
22	(8) Ensuring the development of a policy and procedure
23	for delivering emergency services and regular services when a
24	child's attending physician, advanced registered nurse
25	practitioner, or designated alternate is not available.
26	Section 10. Nursing services
27	(1) A registered nurse shall serve full-time as the
28	director of nursing at each SPPEAC center. The director of
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 of experience in caring
27	for 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 nurs	sing assistant must work under the
supervision of a lic	censed nurse and may provide direct care to
children in the SPPE	MAC center.
(5) Total sta	affing for nursing services shall be, at a
minimum, in the foll	lowing ratios, but at least two staff
members including a	at least one registered nurse must be on

- minimum, in the following ratios, but at least two staff
 members, including at least one registered nurse, must be on
 duty at all times and at least one staff member per three
 children must be on duty at all times:
- $\underline{\mbox{(a)}}$ One to three children one registered nurse and one other.
- (b) Four to six children one registered nurse and two others.
- (c) Seven to nine children one registered nurse, one licensed practical nurse, and one other.
- (d) Ten to 12 children two registered nurses, and two others; or one registered nurse, two licensed practical nurses, and one other.
- (e) Thirteen to 15 children two registered nurses, one licensed practical nurse, and two others.
- (f) Sixteen to 18 children two registered nurses, two licensed practical nurses, and two others.
- (g) Nineteen to 21 children two registered nurses, three licensed practical nurses, and two others.
- (h) Twenty-two to 24 children two registered nurses, three licensed practical nurses, and three others.
- (i) Twenty-five to 28 children three registered nurses, three licensed practical nurses, and three others.

 Section 11. Ancillary professional staffing
- 29 standards.--Each SPPEAC center shall have available on at
 30 least a consultant basis:
 - (1) A child development specialist who shall:

1	(a) Serve as a resource for SPPEAC center staff and
2	parents of children served; and
3	(b) Evaluate the developmental status of children
4	using standardized and nonstandardized procedures.
5	(2) A child life specialist who has a baccalaureate
6	degree in child life, early childhood education, or a related
7	field, and at least 1 year of experience in planning and
8	implementing developmental stimulation programs for children.
9	The child life specialist shall:
10	(a) Plan and conduct individualized child development
11	and play programs; and
12	(b) Serve as a resource for SPPEAC center staff and
13	parents of children served.
14	(3) An occupational therapist who is licensed under
15	chapter 468, Florida Statutes, is registered with the American
16	Occupational Therapy Association, and has at least 1 year of
17	experience in evaluating and planning treatment for children
18	with neuromuscular and developmental needs. The occupational
19	therapist shall:
20	(a) Evaluate a child following referral by a physician
21	or advanced registered nurse practitioner to determine
22	neuromuscular status, developmental level, perceptual motor
23	functioning, need for adaptive equipment or appliances,
24	abilities for self-care, and the plan of care;
25	(b) Design and implement a therapeutic program to meet
26	the needs of each individual child;
27	(c) Maintain records documenting a child's therapy

(d) Serve as a resource for SPPEAC center staff.

(4) A physical therapist who is licensed under chapter

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program and progress; and

the American Physical Therapy Association, and has at least 1 year of experience in evaluating and designing therapeutic programs for children with developmental disabilities. The physical therapist shall:

- (a) Evaluate a child referred by a physician or advanced registered nurse practitioner to determine the child's neuromuscular status, including the child's developmental level, gait, posture, and necessary adaptive equipment;
- (b) Design and implement a therapeutic program to meet the needs of each individual child;
- (c) Maintain records documenting a child's therapy program and progress, as approved by the attending physician or advanced registered nurse practitioner; and
- (d) Serve as a resource for SPPEAC center staff and parents of children served.
- (5) A speech pathologist who is certified by the

 American Speech, Hearing, and Language Association and has at

 least 1 year of experience in evaluating and treating children

 at risk for, or experiencing problems with, communications

 skills. The speech pathologist shall:
- (a) Perform evaluations, including evaluation of a child's prespeech, feeding, respiration, language, speech, communication, and play, using formal and informal tests and observations;
- (b) Design and implement individualized therapeutic programs for each child, including recommendations for communication devices;
- (c) Maintain records documenting the child's therapy programs and progress; and

1	(d) Serve as a resource for SPPEAC center staff and
2	parents of children served.
3	(6) A respiratory therapist who shall:
4	(a) Evaluate a child following referral by a physician
5	or advanced registered nurse practitioner, including an
6	evaluation of the child's respiratory condition;
7	(b) Perform diagnostic monitoring;
8	(c) Deliver aerosolized medications, bronchial hygiene
9	therapy, chest physiotherapy, pulmonary lung-expansion
10	therapy, and oxygen therapy;
11	(d) Monitor ventilator-dependent children;
12	(e) Maintain records documenting a child's therapy
13	programs and progress; and
14	(f) Serve as a resource for SPPEAC center staff and
15	parents of children served.
16	(7) A social worker who is licensed under chapter 490
17	or chapter 491, Florida Statutes; holds a master's degree in
18	social work; and has at least 1 year of experience in
19	assessing, counseling, and planning interventions for children
20	and their families or guardians. The social worker shall:
21	(a) Conduct family psychosocial assessments, as
22	requested by the medical or nursing director;
23	(b) Provide counseling, including emotional support
24	and grief resolution, as requested by the medical or nursing
25	director or family;
26	(c) Perform family advocacy and coordinate SPPEAC
27	services with community resources;
28	(d) Maintain records documenting social-work
29	<pre>intervention;</pre>
30	(e) Conduct home visits and home evaluations, as
31	requested by the medical director or nursing director; and

	(f)	Serve a	as a	resource	for	SPPE	EAC	cent	er staf:	f and
paren	ts of	childre	en s	erved.						
	(8)	A licer	nsed	psycholog	gist	who	has	a d	octoral	degr

- (8) A licensed psychologist who has a doctoral degree in child-development counseling, psychology, or a related field and at least 1 year of experience in evaluating and managing children. The licensed psychologist must be available to the center as a consultant.
- (9) A dietitian who is registered with the American Dietetic Association. The dietitian must be available to the center as a consultant.

Section 12. Educational services.--Each SPPEAC center shall develop a cooperative program with the local school system to provide a planned educational program, appropriate to meet the needs of the individual child, or to provide a board-certified instructor and planned educational program, appropriate to meet the needs of the individual child.

Section 13. Inservice training for all caregivers.--

- (1) Each SPPEAC center shall develop a comprehensive training program that is available to all caregivers and includes:
 - (a) Inservice training for all family members; and
- (b) Quarterly staff-development programs, appropriate to the category of personnel for which the programs are conducted, for the purpose of maintaining quality patient care.
 - (2) All staff-development programs must be documented.
- (3) Each new employee must participate in orientation to acquaint the employee with the philosophy, organization, program, practices, and goals of the SPPEAC center.
- 30 (4) At the time of the child's placement in the SPPEAC
 31 center, the center shall provide a comprehensive orientation

1	to acquaint all family members with the philosophy and
2	services of the center.
3	Section 14. Medical recordsA medical record shall
4	be maintained for each child. The medical records must
5	contain:
6	(1) All details of the referral, admission,
7	correspondence, and papers concerning the child. Entries in
8	the medical record must be in ink and signed by authorized
9	personnel and include:
10	(a) Orders of the physician or advanced registered
11	nurse practitioner;
12	(b) Flow chart of medications and treatments
13	administered;
14	(c) Concise, accurate information and initialed case
15	notes reflecting progress toward plan-of-care goals and the
16	child's progress or reasons for lack of progress;
17	(d) Documentation of nutritional management and
18	special diets, as appropriate; and
19	(e) Documentation of physical, occupational, speech,
20	and other special therapies.
21	(2) An individualized plan of care developed within 10
22	working days after admission and revised to include
23	recommended changes in the therapeutic plans. The disposition
24	to be followed in the event of emergency situations must be
25	specified in the plan of care.
26	(3) The medical history, including allergies and
27	special precautions.
28	(4) The immunization record.
29	(5) The quarterly review of the plan of care, which is
30	performed in consultation with other professionals involved in
31	the child's care.

or advanced registered nurse practitioner. The discharge order must be documented and entered in the child's record. A discharge summary that includes the reason for discharge must also be included.

Section 15. Quality assurance committee.--All SPPEAC centers must have a quality assurance program and conduct quarterly reviews of the SPPEAC center's medical records for at least half of the children served by the SPPEAC center at the time of the review.

- (1) The quality assurance review shall be conducted by two members of the quality assurance committee. The responsibilities for conducting quality assurance review shall rotate among the members of the quality assurance committee members at least annually. Within 15 working days after its review, the quality assurance committee shall furnish copies of its report to the medical and nursing directors of the SPPEAC center.
- (2)(a) Each quarterly quality assurance review must include:
 - 1. A review of the goals in each child's plan of care;
- 2. A review of the steps, process, and success in achieving the goals; and
- 3. Identification of goals not being achieved as expected, reasons for lack of achievement, and plans to promote achievement of goals.
- (b) Evidence that the plan of care has been revised to accommodate the findings of a quality assurance report shall be forwarded to the quality assurance committee within 10 working days after receipt of the report by the quality assurance committee.

1	(c) Implementation of the revisions to the plan of
2	care must be documented on the child's medical record.
3	(3) The quality assurance committee shall also
4	ascertain the presence of the following documents in each
5	<pre>child's medical record:</pre>
6	(a) A properly executed consent form;
7	(b) A medical history for the child, including
8	notations from visits to health care providers; and
9	(c) Immunization records, documentation of allergies,
10	and special precautions.
11	Section 16. Dietary servicesA registered dietitian
12	shall be available for consultation regarding the nutritional
13	needs and special diets of individual children. If food is
14	prepared on site, the center is subject to routine inspections
15	by the Department of Health and must conform to food service
16	standards for child care facilities adopted by the Department
17	of Health.
18	Section 17. Physical environmentThe SPPEAC center's
19	physical location and building must comply with at least the
20	following minimum requirements:
21	(1) Each facility licensed as a SPPEAC center must be
22	able to accommodate at least three medically fragile or
23	technologically dependent children.
24	(2) Specifications for a SPPEAC center include:
25	(a) Compliance with part V of chapter 553, Florida
26	Statutes, for accessibility of public buildings for
27	handicapped persons; and
28	(b) Adequate parking for staff and families to comply
29	with applicable local zoning requirements.
30	(3) Requirements for building space allocation
31	include:

1	(a) An isolation room with anteroom, a private
2	bathroom with shower or raised tub, and an individual
3	air-conditioning and heating unit.
4	(b) A dining area large enough to accommodate at least
5	two-thirds of facility population at one time.
6	(c) A kitchen area that includes standard kitchen
7	equipment of stove, oven, refrigerator, dishwasher, and double
8	sink with disposal.
9	(d) An indoor play area, including accommodations for
10	mobile and nonmobile children.
11	(e) An outdoor play area, fenced and free of safety
12	hazards, with appropriate playground equipment and toys.
13	(f) Sleep rooms that comply with the following
14	requirements:
15	1. One appropriate bed or crib assigned per child;
16	2. A maximum of three children assigned to each sleep
17	room;
18	3. A minimum of 28 square feet per child;
19	4. Hanging closet space with drawers;
20	5. Direct access to a bathroom with shower or standard
21	tub;
22	6. A changing area with sink; and
23	7. Adequate seating with a minimum of one chair per
24	child.
25	(g) A laundry room with washer and dryer or daily
26	<u>linen service.</u>
27	(h) A business office.
28	(i) A children's bathroom in the common area which has
29	one toilet, one basin, and one standard bathtub or shower.
30	(j) An adult bathroom that has one toilet and one
31	basin.

1	(k) A staff lounge that includes:
2	1. A bathroom, with one toilet, one basin, and one
3	shower stall with private changing area per 15 staff members;
4	2. Couches or seating to accommodate a minimum of
5	one-fourth of the staff at any time; and
6	3. Secure lockers for personal items.
7	(1) A nurses station and medication area that includes
8	a locked cabinet and emergency kit.
9	(m) An education room, including one area designated
10	for children 0-2 years of age.
11	(n) A gymnasium area for therapies, with a minimum of
12	one private speech room.
13	Section 18. Furniture and linensEach SPPEAC center
14	must provide an appropriate mix of cribs, beds, highchairs,
15	infant seats, and changing tables to meet the needs of the
16	children being served. All provided items must be maintained
17	in a safe and sanitary condition. A minimum of one bed or crib
18	per child is required, which may not be occupied by more than
19	one child at a time. Linens must be changed and mattresses
20	sanitized before use by another child.
21	Section 19. EquipmentEach SPPEAC center shall
22	provide safety, medical, and emergency equipment as described
23	in this section. All equipment must be maintained in a safe,
24	usable, and sanitary condition.
25	(1) The following items of safety equipment must be
26	available on the premises:
27	(a) Extinguishers, alarms, and smoke detectors, as
28	required by the Life Safety Code, NFPA-101, 1985 edition;
29	(b) Circuit interrupters;

(c) Flush door openers;

1	(d) Child-proof safety latches on closets and
2	cabinets;
3	(e) Straps on all highchairs, swings, and infant
4	seats;
5	(f) Locks on specific storage cabinets;
6	(g) Bumper pads on infant cribs; and
7	(h) Covers for electric outlets.
8	(2) The following items of medical equipment must be
9	available on the premises:
10	(a) Suction machines - one per child requiring daily
11	suctioning, plus one suction machine for emergency use;
12	(b) Mist tents - one per child with respiratory
13	diagnosis as prescribed;
14	(c) Lockable narcotics cabinet;
15	(d) Mechanical percussors and hand percussors as
16	<pre>prescribed;</pre>
17	(e) Oxygen in two portable tanks, or piped in with
18	appropriate tubing, pediatric manual resuscitation, and masks
19	<pre>for faces and tracheostomies;</pre>
20	(f) Ventilator with provision for mixing gases to
21	provide prescribed oxygen concentration as specifically
22	prescribed or to be used as a backup unit when a
23	ventilator-dependent child is in the center;
24	(g) Thermometers, excluding glass thermometers;
25	(h) Sphygmomanometers, stethoscopes, osteoscopes, and
26	ophthalmoscopes;
27	(i) Apnea-monitoring supplies, including belts and
28	leads to apply to monitors brought from home; and
29	(j) Supplies of disposable equipment as needed.
30	(3) The following items of emergency equipment and
31	supplies must be available on the premises:

1	(a) An emergency power-generator system, with adequate
2	generating power to maintain medical equipment in the center
3	in case of power failure.
4	(b) Basic emergency equipment, including:
5	1. Airways, in a range of appropriate pediatric sizes;
6	2. Suction catheters, in a range of appropriate
7	pediatric sizes;
8	3. Pediatric manual resuscitator, self-inflating, with
9	premature infant, infant, and pediatric masks;
10	4. Infant oxygen masks;
11	5. Child oxygen masks;
12	6. Oxygen regulator with mist bottle and heating
13	element;
14	7. Flashlight with extra batteries in each room;
15	8. Stethoscope;
16	9. Feeding tubes in a range of appropriate pediatric
17	sizes;
18	10. Disposable plastic syringes and needles in a range
19	of appropriate pediatric sizes;
20	11. Intravenous catheter, angiocatheter, and scalp
21	vein needles in a range of appropriate pediatric sizes;
22	12. Tourniquets; armboards in premature infant,
23	infant, and child sizes; and adhesive tape of various sizes;
24	13. Two-way stopcocks;
25	14. One electrical-outlet adapter for three-prong
26	outlets; and
27	15. Antiseptic preps and alcohol preps.
28	(c) Basic drugs and solutions, including:
29	1. Epinephrine ampules, two each of 1:1,000 and
30	1:10,000;
31	

1	2. Dextrose in 25-percent solution and 50-percent
2	solution;
3	3. Ipecac, one 30cc bottle;
4	4. Sterile water, two vials;
5	5. Normal saline, two vials;
6	6. Dextrose 5 percent in water, one 500cc bag; and
7	7. Dextrose 5 percent in Lactated Ringer's, two 500cc
8	bags;
9	(d) If tank oxygen is used, two portable cylinders of
10	oxygen, properly secured.
11	(e) A suction machine with sterile suction catheters
12	in pediatric sizes.
13	(4) Emergency equipment must be checked daily for
14	expiration, contamination, or damage, and a log must be
15	maintained and signed every day by the nurse responsible for
16	verifying the examining of emergency equipment.
17	Section 20. <u>Infection control</u>
18	(1) Each SPPEAC center must have an isolation room
19	with one large glass area for observing the child.
20	(2) Isolation procedures must be used to prevent
21	cross-infections.
22	(3) All cribs and beds must be labeled with the
23	individual child's name. Linens may be removed from cribs only
24	for laundering purposes.
25	(4) Bed linens must be changed at least once every
26	other day.
27	(5) Antimicrobial soap and disposable paper towels
28	must be provided at each sink.
29	(6) Children suspected of having a communicable
30	disease that may be transmitted through casual contact, as
31	determined by the facility's medical director, must be

isolated and the parents notified of the condition. Isolation must be continued until a physician or advanced registered nurse practitioner determines communicability has passed.

(7) SPPEAC center staff members suspected of having a communicable disease may not return to the SPPEAC center until the signs and symptoms that relate to the communicable disease are no longer present, as evidenced by a written statement from a physician or advanced registered nurse practitioner.

Section 21. <u>Transportation services.--If</u>
transportation is provided by a SPPEAC center and prescribed
by the primary physician or advanced registered nurse
practitioner, a procedure delineating personnel and equipment
to accompany the child must be included in the procedure
manual of the SPPEAC center.

Section 22. Emergency procedures. --

- (1) Each SPPEAC center shall conform to the minimum standards for child care facilities adopted by the State Fire Marshal and shall be inspected annually by a certified fire inspector. The center must maintain a copy of the current annual fire inspection report at the center.
- (2) The center must have a working telephone that is not locked and that is not a pay telephone.
- (3) Emergency telephone numbers must be posted on or in the immediate vicinity of all telephones.
- (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 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. LEGISLATIVE 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.)