HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 1551 CS

SPONSOR(S): Harrell

Emergency Management

TIED BILLS: IDEN./SIM. BILLS: SB 2616

| REFERENCE | ACTION | ANALYST | STAFF DIRECTOR |
|---|----------------|--------------|----------------|
| 1) Health Care General Committee | 9 Y, 0 N, w/CS | Schiefelbein | Brown-Barrios |
| 2) Governmental Operations Committee | | _ | |
| 3) Transportation & Economic Development Appropriations Committee | | _ | |
| 4) Health & Families Council | | _ | |
| 5) | | _ | |
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SUMMARY ANALYSIS

Chapter 252, F.S., the State Emergency Management Act, mandates the development of the Florida Comprehensive Emergency Management Plan and establishes the overall disaster preparedness framework for the state. This bill amends certain sections of chapter 252, F. S., and other chapters addressing pre and post disaster planning.

This bill provides for an effective date of July 1, 2005.

There is a fiscal impact associated with this bill.

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FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Promote Personal Responsibility *and* Empower Families – Providing time and appropriate pre and post disaster information and improving the availability of services should enable our citizenry to make choices that will personally benefit themselves and their families.

Maintain public security – Providing safe pre and post disaster facilities should encourage proper and increased use of such facilities and increase the safety for our citizens.

B. EFFECT OF PROPOSED CHANGES:

Chapter 252, F.S., the State Emergency Management Act, mandates the development of the Florida Comprehensive Emergency Management Plan and establishes the overall disaster preparedness framework for the state. This bill amends certain sections of chapter 252, F. S., and other chapters addressing pre and post disaster planning.

The bill primarily addresses the planning and use of special needs shelters, assigns lead responsibility to certain state agencies and provides certain facility use and licensure flexibility during pre and post disaster. The effect of these provisions should provide increased coordination among federal, state and local entities and provide timely and appropriate use of facilities to serve the special needs population.

Background:

Florida's geographical location and unique environmental makes this state vulnerable to a variety of natural disasters. The frequency and increased severity of hurricanes over the last five years has tested Florida's disaster preparation and recovery response activities. Most recently, the challenges of four hurricanes that struck Florida within weeks of each other during the 2004 hurricane season provided improved recovery efforts and the opportunity to identify future improvements; especially regarding special needs shelter operations related to health care services. In addition, the Legislature can recommend policies and procedures to address the care of citizens with special needs that providers offer in alternative sites during the storm and in the recovery phase.

Background Regulation:

Overall, Florida has done a good job of protecting its citizens. A recent report by the *Trust for Americas Health*, ¹ranked Florida 9 out of 10 in Bioterrorism Preparedness. Florida's regulatory guidelines regarding disaster response is outlined in several documents. Chapter 252, Florida Statutes, State Emergency Management Act, mandates the development of the Florida Comprehensive Emergency Management Plan (The Plan). The Plan establishes the framework to ensure that Florida is prepared to deal with the aftermath of any one of several hazards that threaten our communities, businesses and the environment. The Plan coordinates response and recovery activities with state, local and volunteer entities and organizations. The Plan unifies the efforts of these groups to ensure a comprehensive approach to reducing the effects of an emergency or disaster.

The Plan is divided into three sections:

1. The Basic Plan – The Basic Plan section outlines in general terms how Florida will assist counties in responding to, recovering from, and mitigating the impact of a disaster.

¹ Trust for Americas Health is a community health research organization.

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- 2. The Emergency Support Function Appendices The Appendices to the Basic Plan section organizes the State agencies into 17 emergency support functions and is patterned after the Federal Response Plan. The appendices outline the responsibilities of the primary and support agencies that support local governments.
- 3. The Hazard Specific Annexes The Annex addresses special circumstances and situations including, radiological incidents, terrorists, wildfire incidents and repatriation processes.

In addition to the Plan. Florida Statutes relating to health care providers, including ancillary services provide that certain rules be developed and enforced to establish reasonable and consistent quality of care to persons prior, during and after a disaster. The Plan emphasizes consistency of providing care and services through Federal, County inter and intra state agency and community organizations.

Vulnerable Populations and Demographics²

- More than seventy-six (76.9%) percent 12,816,041 of Florida's total population reside in the 35 coastal counties.
- Eight (8%) percent (1,333,969) of the State's total population resides in mobile homes.
- More than eighteen (18.3%) percent (3,051,453) of the State's total population is 65 years of age or older, with the highest number in Miami-Dade (314,497), Palm Beach (278,868), Broward (315,470), Pinellas (229,763) and Hillsborough (139,341) counties.
- According to the State of Florida 2004 Statewide Emergency Shelter Plan February 2004." Florida has made significant strides in reducing the deficit of "safe" hurricane shelter space in the past five years. Approximately 50 (50%) percent of the deficit has been eliminated.
- According to the "State of Florida 2004 Statewide Emergency Shelter Plan, February 2004," between 2004 and 2009, the vulnerable population in Florida is projected to increase by nearly 900,000, with as many as 16 (16%) percent possibly seeking safety in public shelters.
- There are 746 nursing Homes with 81,986 licensed beds.
- There is an estimated 333,492 citizens that may be considered "frail elderly." (about 2% of the Florida's population).

C. SECTION DIRECTORY:

Section 1. Amends s. 252.355, F.S., regarding registration of persons with special needs; creates s. 252.355 (2), F.S.; renumbers subsequent sections.

Section 2. Amends s. 381.0303 (2), (3), (5), (6), (7), F. S., regarding special needs shelters health care practitioner recruitment staffing, shelter planning and use; assigns agency lead responsibilities; provides for certain state employees roles, provides hospital reimbursement for disaster-incurred expenses; directs the special needs shelter interagency committee to address certain disaster-related services; directs the Department of Health to establish a statewide special needs registry data base; revises the special needs interagency membership and meeting arrangements; revises the department's rule-making authority and emergency management plan review.

Section 3. Amends s. 252.385 (4) (a), F. S., regarding public shelter space; creates s. 252.385 (4) (c) regarding special needs registration.

Section 4. Amends s. 400.492 (3), F. S., regarding provision of services during an emergency.

Section 5. Amends s. 408.831, F.S., regarding facility licensure; creates s. 408.831 (3) to provide certain licensure and facility use pre and post disaster.

² Comprehensive Emergency Management Plan 2004, February 1, 2004 STORAGE NAME: h1551a.HCG.doc DATE: 3/24/2005

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None

2. Expenditures:

The Agency for Health Care Administration, the Department of Health, and the Division of Emergency Management Services stated that there is no fiscal impact. The Department of Elder Affairs has not determined if and how much of a fiscal impact the provisions in this bill will create.

The fiscal impact on other agencies is undetermined.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None

2. Expenditures:

None identified

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None

D. FISCAL COMMENTS:

Local government, volunteer organizations and other entities may be required to assume additional coordination and disaster related duties. The fiscal impact related to increased coordination efforts is undetermined.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Undetermined.

2. Other:

None

B. RULE-MAKING AUTHORITY:

Rule-making authority may be revised to implement the provisions of this bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

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On March 23, 2005, the Health Care General Committee recommended a strike everything amendment which changed the bill as follows:

- Identifies certain state agencies with lead pre and post disaster responsibilities.
- Directs the Department of Health to establish a statewide data base to capture and disseminate special needs registration information.

The Health Care General Committee adopted the amendment, and reported the bill favorably with a committee substitute. The bill analysis is written to the committee substitute.

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