## Florida Senate - 2006

CS for CS for SB 170

 $\ensuremath{\textbf{By}}$  the Committees on Children and Families; Health Care; and Senator Baker

586-1704-06

1	A bill to be entitled
2	An act relating to administration of
3	medication; amending s. 393.506, F.S.; deleting
4	requirements for unlicensed staff members of
5	direct care service facilities to administer
6	prescribed medications to persons with
7	developmental disabilities; authorizing direct
8	service providers to administer medication to
9	clients or to supervise the self-administration
10	of medication by clients; providing
11	requirements for direct service providers to
12	demonstrate competency regarding supervising
13	the self-administration of medication by
14	clients or administering medication to clients;
15	requiring the Agency for Persons with
16	Disabilities to adopt rules to establish
17	standards and procedures governing the
18	supervision of self-administered medications
19	and the administration of medications by direct
20	service providers; providing an effective date.
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22	Be It Enacted by the Legislature of the State of Florida:
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24	Section 1. Section 393.506, Florida Statutes, is
25	amended to read:
26	393.506 Administration of medication
27	(1) <u>A</u> Notwithstanding the provisions of part I of
28	<del>chapter 464, the Nurse Practice Act, unlicensed</del> direct <u>service</u>
29	provider who is not currently licensed to administer
30	medication care services staff providing services to persons
31	with developmental disabilities may supervise the
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**CODING:** Words stricken are deletions; words <u>underlined</u> are additions.

1 self-administration of medication or may administer oral, 2 transdermal, ophthalmic, otic, rectal, inhaled, or topical prescription medications to a client as provided in this 3 4 section. 5 (2) In order to supervise the self-administration of б medication or to administer medications as provided in 7 subsection (1), a direct service provider must satisfactorily complete a training course of not less than 4 hours in 8 medication administration and be found competent to supervise 9 10 the self-administration of medication by a client or to administer medication to a client in a safe and sanitary 11 12 manner. Competency must be assessed and validated at least 13 annually in an onsite setting and must include personally observing the direct service provider satisfactorily: 14 (a) Supervising the self-administration of medication 15 16 by a client; and 17 (b) Administering medication to a client. 18 (3) A direct service provider may supervise the self-administration of medication by a client or may 19 administer medication to a client only if the client, or the 20 21 client's quardian or legal representative, has given his or 2.2 her informed consent to self-administering medication under 23 the supervision of an unlicensed direct service provider or to receiving medication administered by an unlicensed direct 2.4 service provider. Such informed consent must be based on a 25 description of the medication routes and procedures that the 26 27 direct service provider is authorized to supervise or 2.8 administer. Only a provider who has received appropriate training and has been validated as competent may supervise the 29 self-administration of medication by a client or may 30 administer medication to a client. 31

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1 (a) For day programs, as defined in s. 393.063, the 2 director of the facility or program shall designate in writing unlicensed direct care services staff who are eligible to be 3 4 trained to assist in the administration of or to administer medication. 5 б (b) For intermediate care facilities for the 7 developmentally disabled licensed pursuant to part XI of 8 chapter 400, unlicensed staff designated by the director may 9 provide medication assistance under the general supervision of 10 a registered nurse licensed pursuant to chapter 464. (2) Each facility, institution, or program must 11 12 include in its policies and procedures a plan for training 13 designated staff to ensure the safe handling, storage, and administration of prescription medication. These policies and 14 procedures must be approved by the agency before unlicensed 15 direct care services staff assist with medication. 16 17 (3) The policies and procedures must include, at a 18 minimum, the following provisions: (a) An expressed and informed consent for each client. 19 (b) The director of the facility, program, or provider 20 21 must maintain a copy of the written prescription, and that 2.2 prescription must include the name of the medication, the 23 dosage and administration schedule, the reason for the 2.4 prescription, and the termination date. 25 (c) Each prescribed medication shall be kept in its original container and in a secure location. 26 27 (4) The determination of competency and annual 2.8 validation training required in this section shall be conducted by a registered nurse licensed pursuant to chapter 29 30 464 or a physician licensed pursuant to chapter 458 or chapter 31 459.

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1 (5) The agency shall establish by rule standards and 2 procedures that a direct service provider must follow when 3 supervising the self-administration of medication by a client 4 and when administering medication to a client. Such rules 5 must, at a minimum, address requirements for labeling б medication, documentation and recordkeeping, the storage and 7 disposal of medication, instructions concerning the safe administration of medication or supervision of 8 9 self-administered medication, informed-consent requirements 10 and records, and the training curriculum and validation 11 procedures. 12 Section 2. This act shall take effect upon becoming a 13 law. 14 STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN 15 COMMITTEE SUBSTITUTE FOR CS for Senate Bill 170 16 17 18 This committee substitute makes the following change: Retains current statutory language which allows licensed 19 physicians to provide training and authorizes them to perform annual validation of competency to administer medication. 20 21 22 23 2.4 25 26 27 28 29 30 31

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