

CS for SB 2216



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CHAMBER ACTION

<u>Senate</u>	.	<u>House</u>
Comm: RCS	.	
3/19/2008	.	
	.	
	.	

1 The Committee on Health Regulation (Alexander) recommended the
 2 following **amendment**:

3
 4 **Senate Amendment (with title amendment)**

5 Delete everything after the enacting clause
 6 and insert:

7 Section 1. Subsection (4) of section 322.142, Florida
 8 Statutes, is amended to read:

9 322.142 Color photographic or digital imaged licenses.--

10 (4) The department may maintain a film negative or print
 11 file. The department shall maintain a record of the digital
 12 image and signature of the licensees, together with other data
 13 required by the department for identification and retrieval.
 14 Reproductions from the file or digital record are exempt from
 15 the provisions of s. 119.07(1) and shall be made and issued only
 16 for departmental administrative purposes; for the issuance of

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17 duplicate licenses; in response to law enforcement agency
18 requests; to the Department of State pursuant to an interagency
19 agreement to facilitate determinations of eligibility of voter
20 registration applicants and registered voters in accordance with
21 ss. 98.045 and 98.075; to the Department of Revenue pursuant to
22 an interagency agreement for use in establishing paternity and
23 establishing, modifying, or enforcing support obligations in
24 Title IV-D cases; to the Department of Children and Family
25 Services pursuant to an interagency agreement to conduct
26 protective investigations under chapter 415; or to the
27 Department of Financial Services pursuant to an interagency
28 agreement to facilitate the location of owners of unclaimed
29 property, the validation of unclaimed property claims, and the
30 identification of fraudulent or false claims, ~~and are exempt~~
31 ~~from the provisions of s. 119.07(1).~~

32 Section 2. Subsection (25) is added to section 400.141,
33 Florida Statutes, to read:

34 400.141 Administration and management of nursing home
35 facilities.--Every licensed facility shall comply with all
36 applicable standards and rules of the agency and shall:

37 (25) Conduct a level 1 background screening as defined in
38 chapter 435, of a prospective resident before admission or
39 immediately after admission at the resident's expense. The
40 information obtained may be used by the facility to assess the
41 needs of the resident and to provide adequate and appropriate
42 health care and protective and support services in accordance
43 with this part. The Agency's employee background screening
44 database may not be used for resident screening. If a resident

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45 transfers between facilities, the resident's background
46 screening results shall be transferred with the resident.

47
48 Facilities that have been awarded a Gold Seal under the program
49 established in s. 400.235 may develop a plan to provide
50 certified nursing assistant training as prescribed by federal
51 regulations and state rules and may apply to the agency for
52 approval of their program.

53 Section 3. Subsection (3) of section 400.19, Florida
54 Statutes, is amended to read:

55 400.19 Right of entry and inspection.--

56 (3) The agency shall every 15 months conduct at least one
57 unannounced inspection to determine compliance by the licensee
58 with statutes, and related ~~with rules promulgated under the~~
59 ~~provisions of those statutes,~~ governing minimum standards of
60 construction, quality and adequacy of care, and rights of
61 residents. The survey shall be conducted every 6 months for the
62 next 2-year period if the facility has been cited for a class I
63 deficiency, has been cited for two or more class II deficiencies
64 arising from separate surveys or investigations within a 60-day
65 period, or has had three or more substantiated complaints within
66 a 6-month period, each resulting in at least one class I or
67 class II deficiency. In addition to any other fees or fines in
68 this part, the agency shall assess a fine for each facility that
69 is subject to the 6-month survey cycle. The fine for the 2-year
70 period shall be \$6,000, one-half to be paid at the completion of
71 each survey. The agency may adjust this fine by the change in
72 the Consumer Price Index, based on the 12 months immediately
73 preceding the change ~~increase~~, to cover the cost of the

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74 additional surveys. The agency shall verify through subsequent
75 inspection that any deficiency identified during inspection is
76 corrected. However, the agency may verify the correction of a
77 class III or class IV deficiency unrelated to resident rights or
78 resident care without reinspecting the facility if adequate
79 written documentation has been received from the facility, which
80 provides assurance that the deficiency has been corrected. ~~The~~
81 ~~giving or causing to be given of advance notice of such~~
82 ~~unannounced inspections by an employee of the agency to any~~
83 ~~unauthorized person shall constitute cause for suspension of not~~
84 ~~fewer than 5 working days according to the provisions of chapter~~
85 ~~110.~~

86 Section 4. Section 400.215, Florida Statutes, is amended
87 to read:

88 400.215 Background Personnel screening requirement.--

89 (1) ~~The agency shall require~~ Background screening as
90 provided in chapter 435 is required for all nursing home
91 facility employees and contracted workers ~~or prospective~~
92 ~~employees of facilities licensed under this part~~ who are
93 expected to, or whose responsibilities may require them to:

94 (a) Provide personal care or services to residents;

95 (b) Have access to resident living areas; or

96 (c) Have access to resident funds or other personal
97 property.

98 (2) Employers, and employees, contractors, and contracted
99 workers shall comply with the requirements of s. 435.05.

100 (a) Notwithstanding ~~the provisions of~~ s. 435.05(1),
101 facilities must have in their possession evidence that level 1
102 screening under s. 435.03 has been completed before allowing an

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103 employee or contracted worker to begin employment in the
104 facility ~~working with patients~~ as provided in subsection (1).
105 All information necessary for conducting level 1 ~~background~~
106 screening ~~using level 1 standards as specified in s. 435.03~~
107 shall be submitted by the nursing facility to the agency.
108 Results of the background screening shall be provided by the
109 agency to the requesting nursing facility.

110 (b) Employees and contracted workers qualified under ~~the~~
111 ~~provisions of~~ paragraph (a) who have not maintained continuous
112 residency within the state for the 5 years immediately preceding
113 the date of request for background screening must complete level
114 2 screening, as provided in s. 435.04 ~~chapter 435~~. ~~Such~~
115 Employees may work in a conditional status for up to 180 days
116 pending the receipt of written findings evidencing the
117 completion of level 2 screening. Contracted workers who are
118 awaiting the completion of level 2 screening may work only under
119 the direct and visual supervision of persons who have met the
120 screening requirements of this section. Level 2 screening is
121 ~~shall not be required for~~ of employees, ~~or~~ prospective
122 employees, or contracted workers who attest in writing under
123 penalty of perjury that they meet the residency requirement. To
124 complete ~~Completion of level 2 screening: shall require~~

125 1. The employee or contracted worker shall ~~prospective~~
126 ~~employee to~~ furnish to the nursing facility a full set of
127 fingerprints for conducting a federal criminal records check ~~to~~
128 ~~enable a criminal background investigation to be conducted.~~

129 2. The nursing facility shall submit the completed
130 fingerprint card to the agency.

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131 3. The agency shall establish a record of the request in
132 the database provided for in paragraph (c) and forward the
133 request to the Department of Law Enforcement, which is
134 authorized to submit the fingerprints to the Federal Bureau of
135 Investigation for a national criminal history records check.

136 4. The results of the national criminal history records
137 check shall be returned to the agency, which shall maintain the
138 results in the database provided for in paragraph (c).

139 5. The agency shall notify the administrator of the
140 requesting nursing facility or the administrator of any other
141 requesting facility licensed under chapter 393, chapter 394,
142 chapter 395, chapter 397, chapter 429, or this chapter, ~~as~~
143 ~~requested by such facility,~~ as to whether ~~or not~~ the employee
144 has qualified under level 1 or level 2 screening.

145
146 An employee or contracted worker ~~prospective employee~~ who has
147 qualified under level 2 screening and has maintained ~~such~~
148 continuous residency within the state is ~~shall~~ not be required
149 to complete a subsequent level 2 screening as a condition of
150 employment at another facility.

151
152 A contract worker who is retained on an emergency basis or for a
153 task involving repair or maintenance that will require the
154 contract worker to be on the premises for less than one day,
155 shall not be required to have a background screen under this
156 section, but must be required to sign in upon entering the
157 building, wear an identification badge, and sign out before
158 leaving the building. The facility shall maintain a log with the
159 information collected.

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160
161 (c) The agency shall establish and maintain a database
162 that includes ~~of background screening information which shall~~
163 ~~include~~ the results of all ~~both~~ level 1 and level 2 screening.
164 The Department of Law Enforcement shall timely provide to the
165 agency, electronically, the results of each statewide screening
166 for incorporation into the database. The agency shall, upon
167 request from any facility, agency, or program required by or
168 authorized by law to screen its employees or contracted workers
169 ~~applicants~~, notify the administrator of the facility, agency, or
170 program of the qualifying or disqualifying status of the person
171 ~~employee or applicant~~ named in the request.

172 (d) ~~Applicants and Employees~~, prospective employees, and
173 contracted workers shall be excluded from employment pursuant to
174 s. 435.06, and may not be employed or resume employment until
175 exempted or all appeals have been resolved in favor of the
176 person screened.

177 (3) The person being screened ~~applicant~~ is responsible for
178 paying the fees associated with obtaining the required
179 screening. Payment for the screening shall be submitted to the
180 agency. The agency shall establish a schedule of fees to cover
181 the costs of level 1 and level 2 screening. Facilities may pay
182 ~~reimburse employees~~ for these costs. The Department of Law
183 Enforcement shall charge the agency for a level 1 or level 2
184 screening a rate sufficient to cover the costs of ~~such~~ screening
185 pursuant to s. 943.053(3). The agency shall, as allowable,
186 reimburse nursing facilities for the cost of conducting
187 background screening as required by this section. This

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188 reimbursement ~~is will~~ not ~~be~~ subject to any rate ceilings or
189 payment targets in the Medicaid Reimbursement plan.

190 (4) ~~(a)~~ As provided in s. 435.07:~~7~~

191 (a) The agency may grant an exemption from
192 disqualification to an employee, ~~or~~ prospective employee, or
193 contracted worker who is subject to this section and who has not
194 received a professional license or certification from the
195 Department of Health.

196 (b) ~~As provided in s. 435.07,~~ The appropriate regulatory
197 board within the Department of Health, or that department itself
198 when there is no board, may grant an exemption from
199 disqualification to an employee, ~~or~~ prospective employee, or
200 contracted worker who is subject to this section and who has
201 received a professional license or certification from the
202 Department of Health or a regulatory board within that
203 department.

204 (5) ~~Any provision of law to the contrary notwithstanding,~~
205 Persons who have been screened and qualified as required by this
206 section, ~~and~~ who have not been unemployed for more than 180 days
207 thereafter, and who, under penalty of perjury, attest to not
208 having been convicted of a disqualifying offense since the
209 completion of such screening are, ~~shall~~ not ~~be~~ required to be
210 rescreened. An employer may obtain, pursuant to s. 435.10,
211 written verification of qualifying screening results from the
212 previous employer, contractor, or other entity that ~~which~~ caused
213 the ~~such~~ screening to be performed.

214 (6) The agency and the Department of Health may ~~shall~~ have
215 ~~authority to~~ adopt rules to administer ~~pursuant to the~~
216 ~~Administrative Procedure Act to implement~~ this section.

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217 ~~(7) All employees shall comply with the requirements of~~
218 ~~this section by October 1, 1998. No current employee of a~~
219 ~~nursing facility as of the effective date of this act shall be~~
220 ~~required to submit to rescreening if the nursing facility has in~~
221 ~~its possession written evidence that the person has been~~
222 ~~screened and qualified according to level 1 standards as~~
223 ~~specified in s. 435.03(1). Any current employee who meets the~~
224 ~~level 1 requirement but does not meet the 5-year residency~~
225 ~~requirement as specified in this section must provide to the~~
226 ~~employing nursing facility written attestation under penalty of~~
227 ~~perjury that the employee has not been convicted of a~~
228 ~~disqualifying offense in another state or jurisdiction. All~~
229 ~~applicants hired on or after October 1, 1998, shall comply with~~
230 ~~the requirements of this section.~~

231 (7)(8) There is no monetary or unemployment liability on
232 the part of, and a no cause of action for damages does not arise
233 arising against, an employer that, upon notice of a
234 disqualifying offense listed under chapter 435 or an act of
235 domestic violence, terminates the employee against whom the
236 report was issued, whether or not the employee has filed for an
237 exemption with the Department of Health or the agency ~~for Health~~
238 ~~Care Administration.~~

239 Section 5. Subsection (6) of section 408.809, Florida
240 Statutes, is created to read:

241 (6) The agency shall establish a schedule of fees to cover
242 the costs of any Level 1 or Level 2 screening required pursuant
243 to this part or other authorizing statutes and may adopt rules
244 to carryout these screenings and for the schedule of fees.

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245 Section 6. Subsection (5) of section 408.810, Florida
246 Statutes, is amended to read:

247 408.810 Minimum licensure requirements.--In addition to
248 the licensure requirements specified in this part, authorizing
249 statutes, and applicable rules, each applicant and licensee must
250 comply with the requirements of this section in order to obtain
251 and maintain a license.

252 (5) Each licensee must:

253 (a) On or before the first day services are provided to a
254 client, ~~a licensee must~~ inform the client and his or her
255 immediate family or representative, if appropriate, of the right
256 to report:

257 1. Complaints. The statewide toll-free telephone number
258 for reporting complaints to the agency must be provided to
259 clients in a manner that is clearly legible and must include the
260 words: "To report a complaint regarding the services you
261 receive, please call toll-free (phone number)."

262 2. Abusive, neglectful, or exploitative practices. The
263 statewide toll-free telephone number for the central abuse
264 hotline must be provided to clients in a manner that is clearly
265 legible and must include the words: "To report abuse, neglect,
266 or exploitation, please call toll-free (phone number)." The
267 agency shall publish a minimum of a 90-day advance notice of a
268 change in the toll-free telephone numbers.

269 (b) ~~Each licensee shall~~ Establish appropriate policies and
270 procedures for providing such notice to clients.

271 (c) Publicly display a poster approved by the agency
272 containing the names, addresses, and telephone numbers for the
273 state's central abuse hotline, the State Long-Term Care

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274 Ombudsman, the agency's consumer hotline, the Advocacy Center
275 for Persons with Disabilities, the Florida Statewide Advocacy
276 Council, the Medicaid Fraud Control Unit, and the Statewide
277 Public Guardianship Office, along with a clear description of
278 the assistance to be expected from each. The agency may charge a
279 fee for the cost of production and distribution of the poster.

280 Section 7. Paragraph (a) is amended and paragraphs (c) and
281 (d) are created in subsection (1) and paragraph (c) is created
282 in subsection (4) of section 408.811, Florida Statutes, to read:

283 408.811 Right of inspection; copies; inspection reports.--

284 (1) An authorized officer or employee of the agency may
285 make or cause to be made any inspection or investigation deemed
286 necessary by the agency to determine the state of compliance
287 with this part, authorizing statutes, and applicable rules. The
288 right of inspection extends to any business that the agency has
289 reason to believe is being operated as a provider without a
290 license, but inspection of any business suspected of being
291 operated without the appropriate license may not be made without
292 the permission of the owner or person in charge unless a warrant
293 is first obtained from a circuit court. Any application for a
294 license issued under this part, authorizing statutes, or
295 applicable rules constitutes permission for an appropriate
296 inspection to verify the information submitted on or in
297 connection with the application.

298 (a) All inspections shall be unannounced, except as
299 specified in s. 408.806. The giving or causing to be given of
300 advance notice of the unannounced inspection by an agency
301 employee to any unauthorized person shall, in accordance with

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302 chapter 110, constitute cause for suspension of the employee for
303 at least 5 working days.

304 (b) Inspections for relicensure shall be conducted
305 biennially unless otherwise specified by authorizing statutes or
306 applicable rules.

307 (c) Deficiencies found during an inspection or
308 investigation must be corrected within 30 days unless an
309 alternative timeframe is required or approved by the agency.

310 (d) The agency may require an applicant or licensee to
311 submit a plan of correction for deficiencies. If required, the
312 plan of correction must be filed with the agency within ten days
313 unless an alternative timeframe is required.

314 (2) Inspections conducted in conjunction with
315 certification may be accepted in lieu of a complete licensure
316 inspection. However, a licensure inspection may also be
317 conducted to review any licensure requirements that are not also
318 requirements for certification.

319 (3) The agency shall have access to and the licensee shall
320 provide copies of all provider records required during an
321 inspection at no cost to the agency.

322 (4) (a) Each licensee shall maintain as public information,
323 available upon request, records of all inspection reports
324 pertaining to that provider that have been filed by the agency
325 unless those reports are exempt from or contain information that
326 is exempt from s. 119.07(1) and s. 24(a), Art. I of the State
327 Constitution or is otherwise made confidential by law. Effective
328 October 1, 2006, copies of such reports shall be retained in the
329 records of the provider for at least 3 years following the date

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330 the reports are filed and issued, regardless of a change of
331 ownership.

332 (b) A licensee shall, upon the request of any person who
333 has completed a written application with intent to be admitted
334 by such provider, any person who is a client of such provider,
335 or any relative, spouse, or guardian of any such person, furnish
336 to the requester a copy of the last inspection report pertaining
337 to the licensed provider that was issued by the agency or by an
338 accrediting organization if such report is used in lieu of a
339 licensure inspection.

340 (c) As an alternative to sending reports required by this
341 part or authorizing statutes, the agency may provide electronic
342 access to information or documents.

343 Section 8. Subsection (2) of section 415.103, Florida
344 Statutes, is amended to read:

345 415.103 Central abuse hotline.--

346 (2) Upon receiving an oral or written report of known or
347 suspected abuse, neglect, or exploitation of a vulnerable adult,
348 the central abuse hotline shall ~~must~~ determine if the report
349 requires an immediate onsite protective investigation.

350 (a) For reports requiring an immediate onsite protective
351 investigation, the central abuse hotline must immediately notify
352 the department's designated protective investigative district
353 staff responsible for protective investigations to ensure prompt
354 initiation of an onsite investigation.

355 (b) For reports not requiring an immediate onsite
356 protective investigation, the central abuse hotline must notify
357 the department's designated protective investigative district
358 staff responsible for protective investigations in sufficient

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359 time to allow for an investigation to be commenced within 24
360 hours. At the time of notification ~~of district staff with~~
361 ~~respect to the report~~, the central abuse hotline must also
362 provide any ~~known information on any~~ previous reports ~~report~~
363 concerning the a subject of the present report or any pertinent
364 information relative to the present report or any noted earlier
365 reports.

366 (c) If the report is of known or suspected abuse of a
367 vulnerable adult by someone other than a relative, caregiver, or
368 household member, the call shall be immediately transferred to
369 the appropriate county sheriff's office.

370 Section 9. Paragraph (e) of subsection (1) and paragraph
371 (g) of subsection (2) of section 415.1051, Florida Statutes, are
372 amended to read:

373 415.1051 Protective services interventions when capacity
374 to consent is lacking; nonemergencies; emergencies; orders;
375 limitations.--

376 (1) NONEMERGENCY PROTECTIVE SERVICES INTERVENTIONS.--If
377 the department has reasonable cause to believe that a vulnerable
378 adult or a vulnerable adult in need of services is being abused,
379 neglected, or exploited and is in need of protective services
380 but lacks the capacity to consent to protective services, the
381 department shall petition the court for an order authorizing the
382 provision of protective services.

383 (e) Continued protective services.--

384 1. Within ~~No more than~~ 60 days after the date of the order
385 authorizing the provision of protective services, the department
386 shall petition the court to determine whether:

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387 a. Protective services are to ~~will~~ be continued with the
388 consent of the vulnerable adult pursuant to this subsection;

389 b. Protective services are to ~~will~~ be continued for the
390 vulnerable adult who lacks capacity;

391 c. Protective services are to ~~will~~ be discontinued; or

392 d. A petition for guardianship shall ~~should~~ be filed
393 pursuant to chapter 744.

394 2. If the court determines that a petition for
395 guardianship shall ~~should~~ be filed pursuant to chapter 744, the
396 court, for good cause shown, may order continued protective
397 services until it makes a determination regarding capacity.

398 3. If the department has a good faith belief that the
399 vulnerable adult lacks capacity, the petition to determine
400 incapacity under s. 744.3201 may be filed by the department.
401 Once the petition is filed, the department may not be appointed
402 guardian and may not provide legal counsel for the guardian.

403 (2) EMERGENCY PROTECTIVE SERVICES INTERVENTION.--If the
404 department has reasonable cause to believe that a vulnerable
405 adult is suffering from abuse or neglect that presents a risk of
406 death or serious physical injury to the vulnerable adult and
407 that the vulnerable adult lacks the capacity to consent to
408 emergency protective services, the department may take action
409 under this subsection. If the vulnerable adult has the capacity
410 to consent and refuses consent to emergency protective services,
411 emergency protective services may not be provided.

412 (g) Continued emergency protective services.--

413 1. Within ~~Not more than~~ 60 days after the date of the
414 order authorizing the provision of emergency protective

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415 services, the department shall petition the court to determine
416 whether:

417 a. Emergency protective services are to ~~will~~ be continued
418 with the consent of the vulnerable adult;

419 b. Emergency protective services are to ~~will~~ be continued
420 for the vulnerable adult who lacks capacity;

421 c. Emergency protective services are to ~~will~~ be
422 discontinued; or

423 d. A petition shall ~~should~~ be filed under chapter 744.

424 2. If it is decided to file a petition under chapter 744,
425 for good cause shown, the court may order continued emergency
426 protective services until a determination is made by the court.

427 3. If the department has a good faith belief that the
428 vulnerable adult lacks capacity, the petition to determine
429 incapacity under s. 744.3201 may be filed by the department.
430 Once the petition is filed, the department may not be appointed
431 guardian and may not provide legal counsel for the guardian.

432 Section 10. Section 415.112, Florida Statutes, is amended
433 to read:

434 415.112 Rules ~~for implementation of ss. 415.101-~~
435 ~~415.113.~~--The department shall adopt promulgate rules to
436 administer this chapter including, but not limited to: for the
437 ~~implementation of ss. 415.101-415.113.~~

438 (1) Background screening of department employees and
439 employee applicants which includes a criminal records check and
440 drug testing of adult protective investigators and adult
441 protective investigator supervisors.

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442 (2) The reporting of adult abuse, neglect, exploitation, a
443 vulnerable adult in need of services, false reporting, and adult
444 protective investigations.

445 (3) Confidentiality and retention of department records,
446 access to records, and record requests.

447 (4) Injunctions and other protective orders.

448 (5) The provision of emergency and nonemergency protective
449 services intervention.

450 (6) Agreements with law enforcement and other state
451 agencies.

452 (7) Legal and casework procedures, including, but not
453 limited to, diligent search, petitions, emergency removals,
454 capacity to consent, and adult protection teams.

455 (8) The legal and casework management of cases involving
456 protective supervision, protective orders, judicial reviews,
457 administrative reviews, case plans, and documentation
458 requirements.

459 Section 11. Subsection (21) of section 429.02, Florida
460 Statutes, is amended to read:

461 429.02 Definitions.--When used in this part, the term:

462 (21) "Service plan" means a written plan, developed and
463 agreed upon by the resident and, if applicable, the resident's
464 representative or designee or the resident's surrogate,
465 guardian, or attorney in fact, if any, and the administrator or
466 designee representing the facility, which addresses the unique
467 physical and psychosocial needs, abilities, and personal
468 preferences of each resident ~~receiving extended congregate care~~
469 ~~services~~. The plan must ~~shall~~ include a brief written
470 description, in easily understood language, of what services

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471 shall be provided, who shall provide the services, when the
472 services shall be rendered, and the purposes and benefits of the
473 services. The agency shall develop a service plan form for use
474 by providers.

475 Section 12. Paragraphs (b) and (c) of subsection (3) of
476 section 429.07, Florida Statutes, are amended to read:

477 429.07 License required; fee.--

478 (3) In addition to the requirements of s. 408.806, each
479 license granted by the agency must state the type of care for
480 which the license is granted. Licenses shall be issued for one
481 or more of the following categories of care: standard, extended
482 congregate care, limited nursing services, or limited mental
483 health.

484 (b) An extended congregate care license shall be issued to
485 facilities providing, directly or through contract, services
486 beyond those authorized in paragraph (a), including services
487 performed by persons licensed under ~~acts performed pursuant to~~
488 ~~part I of chapter 464 by persons licensed thereunder,~~ and
489 supportive services, as defined by rule, to persons who would
490 otherwise ~~would~~ be disqualified from continued residence in a
491 facility licensed under this part.

492 1. To obtain an ~~In order for~~ extended congregate care
493 license services to be provided in a facility licensed under
494 ~~this part,~~ the agency must first determine that all requirements
495 established in law and rule are met and must specifically
496 designate, on the facility's license, that such services may be
497 provided and whether the designation applies to all or part of
498 the ~~a~~ facility. Such designation may be made at the time of
499 initial licensure or relicensure, or upon request in writing by

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500 a licensee under this part and part II of chapter 408.
501 Notification of approval or denial of the ~~such~~ request shall be
502 made in accordance with part II of chapter 408. ~~Existing~~
503 2. Facilities applying for, and facilities currently
504 licensed ~~qualifying~~ to provide, extended congregate care
505 services must have ~~maintained~~ a standard license and may not
506 have been subject to administrative sanctions during the
507 previous 2 years, or since initial licensure if the facility has
508 been licensed for less than 2 years, for any of the following
509 reasons:

- 510 a. A class I or class II violation;
- 511 b. Three or more repeat or recurring class III violations
512 of identical or similar resident care standards as specified in
513 rule from which a pattern of noncompliance is found by the
514 agency;
- 515 c. Three or more class III violations that were not
516 corrected in accordance with the corrective action plan approved
517 by the agency;
- 518 d. Violation of resident care standards which result in
519 requiring the facility ~~resulting in a requirement~~ to employ the
520 services of a consultant pharmacist or consultant dietitian;
- 521 e. Denial, suspension, or revocation of a license for
522 another facility licensed under this part in which the applicant
523 for an extended congregate care license has at least 25 percent
524 ownership interest; or
- 525 f. Imposition of a moratorium pursuant to this part or
526 part II of chapter 408 or initiation of injunctive proceedings.

527 3.2. A facility that is ~~Facilities that are~~ licensed to
528 provide extended congregate care services must ~~shall~~ maintain a

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529 written progress report on each person who receives ~~such~~
530 services, which report describes the type, amount, duration,
531 scope, and outcome of services that are rendered and the general
532 status of the resident's health. A registered nurse, or
533 appropriate designee, representing the agency shall visit the
534 facility ~~such facilities~~ at least quarterly to monitor residents
535 who are receiving extended congregate care services and to
536 determine if the facility is in compliance with this part, part
537 II of chapter 408, and rules that relate to extended congregate
538 care. One of these visits may be in conjunction with the regular
539 survey. The monitoring visits may be provided through
540 contractual arrangements with appropriate community agencies. A
541 registered nurse shall serve as part of the team that inspects
542 the ~~such~~ facility. The agency may waive one of the required
543 yearly monitoring visits for a facility that has been licensed
544 for at least 24 months to provide extended congregate care
545 services, if, during the inspection, the registered nurse
546 determines that extended congregate care services are being
547 provided appropriately, and if the facility has no class I or
548 class II violations and no uncorrected class III violations.
549 ~~Before such decision is made,~~ The agency must first ~~shall~~
550 consult with the long-term care ombudsman council for the area
551 in which the facility is located to determine if any complaints
552 have been made and substantiated about the quality of services
553 or care. The agency may not waive one of the required yearly
554 monitoring visits if complaints have been made and
555 substantiated.

556 4.3. Facilities that are licensed to provide extended
557 congregate care services must ~~shall~~:

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- 558 a. Demonstrate the capability to meet unanticipated
559 resident service needs.
- 560 b. Offer a physical environment that promotes a homelike
561 setting, provides for resident privacy, promotes resident
562 independence, and allows sufficient congregate space as defined
563 by rule.
- 564 c. Have sufficient staff available, taking into account
565 the physical plant and firesafety features of the building, to
566 assist with the evacuation of residents in an emergency,~~as~~
567 ~~necessary~~.
- 568 d. Adopt and follow policies and procedures that maximize
569 resident independence, dignity, choice, and decisionmaking to
570 permit residents to age in place ~~to the extent possible~~, so that
571 moves due to changes in functional status are minimized or
572 avoided.
- 573 e. Allow residents or, if applicable, a resident's
574 representative, designee, surrogate, guardian, or attorney in
575 fact to make a variety of personal choices, participate in
576 developing service plans, and share responsibility in
577 decisionmaking.
- 578 f. Implement the concept of managed risk.
- 579 g. Provide, ~~either~~ directly or through contract, the
580 services of a person licensed pursuant to part I of chapter 464.
- 581 h. In addition to the training mandated in s. 429.52,
582 provide specialized training as defined by rule for facility
583 staff.
- 584 ~~5.4.~~ Facilities licensed to provide extended congregate
585 care services are exempt from the criteria for continued
586 residency ~~as~~ set forth in rules adopted under s. 429.41.

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587 Facilities so licensed must ~~shall~~ adopt their own requirements
588 within guidelines for continued residency set forth by rule.
589 However, such facilities may not serve residents who require 24-
590 hour nursing supervision. Facilities licensed to provide
591 extended congregate care services must ~~shall~~ provide each
592 resident with a written copy of facility policies governing
593 admission and retention.

594 ~~6.5.~~ The primary purpose of extended congregate care
595 services is to allow residents, as they become more impaired,
596 the option of remaining in a familiar setting from which they
597 would otherwise be disqualified for continued residency. A
598 facility licensed to provide extended congregate care services
599 may also admit an individual who exceeds the admission criteria
600 for a facility with a standard license, if the individual is
601 determined appropriate for admission to the extended congregate
602 care facility.

603 ~~7.6.~~ Before admission of an individual to a facility
604 licensed to provide extended congregate care services, the
605 individual must undergo a medical examination ~~as provided in s.~~
606 ~~429.26(4)~~ and the facility must develop a preliminary service
607 plan for the individual as provided in s. 429.26.

608 ~~8.7.~~ When a facility can no longer provide or arrange for
609 services in accordance with the resident's service plan and
610 needs and the facility's policy, the facility shall make
611 arrangements for relocating the person in accordance with s.
612 429.28(1)(k).

613 ~~9.8.~~ Failure to provide extended congregate care services
614 may result in denial of extended congregate care license
615 renewal.

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616 ~~9. No later than January 1 of each year, the department,~~
617 ~~in consultation with the agency, shall prepare and submit to the~~
618 ~~Governor, the President of the Senate, the Speaker of the House~~
619 ~~of Representatives, and the chairs of appropriate legislative~~
620 ~~committees, a report on the status of, and recommendations~~
621 ~~related to, extended congregate care services. The status report~~
622 ~~must include, but need not be limited to, the following~~
623 ~~information:~~

624 ~~a. A description of the facilities licensed to provide~~
625 ~~such services, including total number of beds licensed under~~
626 ~~this part.~~

627 ~~b. The number and characteristics of residents receiving~~
628 ~~such services.~~

629 ~~e. The types of services rendered that could not be~~
630 ~~provided through a standard license.~~

631 ~~d. An analysis of deficiencies cited during licensure~~
632 ~~inspections.~~

633 ~~e. The number of residents who required extended~~
634 ~~congregate care services at admission and the source of~~
635 ~~admission.~~

636 ~~f. Recommendations for statutory or regulatory changes.~~

637 ~~g. The availability of extended congregate care to state~~
638 ~~clients residing in facilities licensed under this part and in~~
639 ~~need of additional services, and recommendations for~~
640 ~~appropriations to subsidize extended congregate care services~~
641 ~~for such persons.~~

642 ~~h. Such other information as the department considers~~
643 ~~appropriate.~~

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644 (c) A limited nursing services license shall be issued to
645 a facility that provides services beyond those authorized in
646 paragraph (a) and as specified in this paragraph.

647 1. To obtain a ~~In order for~~ limited nursing services
648 license to be provided in a facility licensed under this part,
649 the agency must first determine that all requirements
650 established in law and rule are met and must specifically
651 designate, on the facility's license, that such services may be
652 provided. Such designation may be made at the time of initial
653 licensure or relicensure, or upon request in writing by a
654 licensee under this part and part II of chapter 408.
655 Notification of approval or denial of such request shall be made
656 in accordance with part II of chapter 408. ~~Existing~~

657 2. Facilities applying for, and facilities currently
658 licensed ~~qualifying~~ to provide, limited nursing services must
659 ~~shall~~ have ~~maintained~~ a standard license and may not have been
660 subject to administrative sanctions that affect the health,
661 safety, and welfare of residents for the previous 2 years or
662 since initial licensure if the facility has been licensed for
663 less than 2 years.

664 ~~3.2.~~ Facilities that are licensed to provide limited
665 nursing services shall maintain a written progress report on
666 each person who receives ~~such~~ nursing services, which report
667 describes the type, amount, duration, scope, and outcome of
668 services that are rendered and the general status of the
669 resident's health. A registered nurse representing the agency
670 shall visit such facilities at least twice a year to monitor
671 residents who are receiving limited nursing services and to
672 determine if the facility is in compliance with applicable

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673 provisions of this part, part II of chapter 408, and related
674 rules. The monitoring visits may be provided through contractual
675 arrangements with appropriate community agencies. A registered
676 nurse shall also serve as part of the team that inspects the
677 ~~such~~ facility.

678 ~~4.3.~~ A person who receives limited nursing services ~~under~~
679 ~~this part~~ must meet the admission criteria established by the
680 agency for assisted living facilities. If ~~When~~ a resident no
681 longer meets the admission criteria for a facility licensed
682 under this part, arrangements for relocating the person shall be
683 made in accordance with s. 429.28(1)(k), unless the facility is
684 also licensed to provide extended congregate care services.

685 Section 13. Section 429.174, Florida Statutes, is amended
686 to read:

687 429.174 Background screening; exemptions.--The owner or
688 administrator of an assisted living facility must conduct level
689 1 ~~background~~ screening, as set forth in chapter 435, on all
690 employees and contracted workers hired on or after October 1,
691 1998, who perform personal services or who have access to
692 resident living areas ~~as defined in s. 429.02(16)~~. The agency
693 may exempt an individual from ~~employment~~ disqualification as set
694 forth in s. 435.07 ~~chapter 435~~. However, such person may not be
695 employed or resume employment pending the granting of an
696 exemption or until all appeals have been resolved in favor of
697 the person screened. Employees and contracted workers ~~Such~~
698 ~~persons~~ shall be considered as having met the screening
699 requirements ~~this requirement~~ if:

700 (1) Proof of compliance with level 1 screening
701 ~~requirements~~ obtained to meet ~~any~~ professional license

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702 requirements in this state is provided and accompanied, under
703 penalty of perjury, by a copy of the person's current
704 professional license and an affidavit of current compliance with
705 the background screening requirements.

706 (2) The person required to be screened has been
707 continuously employed in the same type of occupation for which
708 the person is seeking employment without a breach in service
709 which exceeds 180 days, and proof of compliance with the level 1
710 screening requirement which is no more than 2 years old is
711 provided. Proof of compliance shall be provided directly from
712 one employer or contractor to another, and not from the person
713 screened. Upon request, a copy of screening results shall be
714 provided by the employer or contractor retaining documentation
715 of the screening to the person screened.

716 (3) The person required to be screened is employed by or
717 contracts with a corporation or business entity or related
718 corporation or business entity that owns, operates, or manages
719 more than one facility or agency licensed under this chapter,
720 and for whom a level 1 screening was conducted by the
721 corporation or business entity as a condition of initial or
722 continued employment.

723 (4) The person being screened is responsible for paying
724 the fees associated with obtaining the required screening.
725 Payment for the screening shall be submitted to the agency. The
726 agency shall establish a schedule of fees to cover the costs of
727 level 1 and level 2 screening. Facilities may pay for these
728 costs. The Department of Law Enforcement shall charge the agency
729 for a level 1 or level 2 screening a rate sufficient to cover
730 the costs of screening pursuant to s. 943.053(3).

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731
732 A contract worker who is retained on an emergency basis or for a
733 task involving repair or maintenance that will require the
734 contract worker to be on the premises for less than one day,
735 shall not be required to have a background screen under this
736 section, but must be required to sign in upon entering the
737 building, wear an identification badge, and sign out before
738 leaving the building. The facility shall maintain a log with the
739 information collected.

740 Section 14. Subsection (1) of section 429.255, Florida
741 Statutes, is amended to read:

742 429.255 Use of personnel; emergency care.--

743 (1) (a) Facility staff, including persons under contract to
744 the facility, facility employees ~~staff~~, or volunteers, who are
745 licensed according to part I of chapter 464, or those persons
746 exempt under s. 464.022(1), and others as defined by rule, may
747 administer medications to residents, take residents' vital
748 signs, manage individual weekly pill organizers for residents
749 who self-administer medication, give prepackaged enemas ordered
750 by a physician, observe residents, document observations on the
751 appropriate resident's record, report observations to the
752 resident's physician, and contract or allow residents or a
753 resident's representative, designee, surrogate, guardian, or
754 attorney in fact to contract with a third party, provided
755 residents meet the criteria for appropriate placement as defined
756 in s. 429.26. Nursing assistants certified pursuant to part II
757 of chapter 464 may take residents' vital signs as directed by a
758 licensed nurse or physician.

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759 (b) Facility All staff, including persons under contract
760 to the facility and facility employees in facilities licensed
761 ~~under this part~~ shall exercise their professional responsibility
762 to observe residents, to document observations on the
763 appropriate resident's record, ~~and~~ to report the observations to
764 the resident's physician, and to provide needed services
765 competently. Volunteers shall have the same obligations but
766 shall report to a facility employee who will make the
767 appropriate notation in the resident's records. However, the
768 owner or administrator of the facility is ~~shall be~~ responsible
769 for determining that the resident receiving services is
770 appropriate for residence in the facility and for the provision
771 of and quality of care and services provided to the resident.

772 (c) In an emergency situation, licensed personnel may
773 carry out their professional duties pursuant to part I of
774 chapter 464 until emergency medical personnel assume
775 responsibility for care.

776 Section 15. Present subsections (8) through (12) of
777 section 429.26, Florida Statutes, are renumbered as sections (6)
778 through (10), respectively, and present subsections (1) through
779 (7) of that section, are amended to read:

780 429.26 Appropriateness of placements; examinations of
781 residents.--

782 (1) The owner or administrator of a facility is
783 responsible for determining the appropriateness of admission of
784 an individual to the facility and for determining the continued
785 appropriateness of residence of an individual in the facility. A
786 determination shall be based upon an assessment of the
787 strengths, needs, and preferences of the resident, the care and

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788 services offered or arranged for by the facility in accordance
789 with facility policy, and any limitations in law or rule related
790 to admission criteria or continued residency for the type of
791 license held by the facility under this part. Except as provided
792 in s. 429.28(1)(k), a resident may not be moved from one
793 facility to another without consultation with and agreement from
794 the resident or, if applicable, the resident's representative or
795 designee or the resident's family, guardian, surrogate, or
796 attorney in fact. If ~~In the case of~~ a resident ~~who~~ has been
797 placed by the department or the Department of Children and
798 Family Services, the administrator must notify the appropriate
799 contact person in the applicable department.

800 ~~(2) A physician, physician assistant, or nurse~~
801 ~~practitioner who is employed by an assisted living facility to~~
802 ~~provide an initial examination for admission purposes may not~~
803 ~~have financial interest in the facility.~~

804 ~~(3) Persons licensed under part I of chapter 464 who are~~
805 ~~employed by or under contract with a facility shall, on a~~
806 ~~routine basis or at least monthly, perform a nursing assessment~~
807 ~~of the residents for whom they are providing nursing services~~
808 ~~ordered by a physician, except administration of medication, and~~
809 ~~shall document such assessment, including any substantial~~
810 ~~changes in a resident's status which may necessitate relocation~~
811 ~~to a nursing home, hospital, or specialized health care~~
812 ~~facility. Such records shall be maintained in the facility for~~
813 ~~inspection by the agency and shall be forwarded to the~~
814 ~~resident's case manager, if applicable.~~

815 (2)(4) If possible, each resident shall have been examined
816 by a licensed physician, a licensed physician assistant, or a

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817 licensed nurse practitioner within 60 days before admission to
818 the facility. The person conducting an examination under this
819 subsection may not have financial interest in the facility. The
820 signed and completed medical examination report shall be
821 submitted to the owner or administrator of the facility who
822 shall use the information contained in the report ~~therein~~ to
823 assist in determining ~~the determination of~~ the appropriateness
824 of the resident's admission and continued stay in the facility
825 and to develop a service plan for the resident. The medical
826 examination report and service plan shall become a permanent
827 part of the record of the resident at the facility and shall be
828 made available to the agency during inspection or upon request.
829 An assessment that has been completed through the Comprehensive
830 Assessment and Review for Long-Term Care Services (CARES)
831 Program fulfills the requirements for a medical examination
832 under this subsection ~~and s. 429.07(3)(b)6.~~

833 (a)(5) Except as provided in s. 429.07, if a medical
834 examination has not been completed within 60 days before the
835 admission of the resident to the facility, medical personnel ~~a~~
836 ~~licensed physician, licensed physician assistant, or licensed~~
837 ~~nurse practitioner~~ shall examine the resident and complete a
838 medical examination form provided by the agency within 30 days
839 following ~~the admission to the facility to enable the facility~~
840 ~~owner or administrator to determine the appropriateness of the~~
841 ~~admission. The medical examination form shall become a permanent~~
842 ~~part of the record of the resident at the facility and shall be~~
843 ~~made available to the agency during inspection by the agency or~~
844 ~~upon request.~~

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845 ~~(b)(6)~~ Any resident accepted in a facility and placed by
846 the department or the Department of Children and Family Services
847 must be ~~shall have been~~ examined by medical personnel within 30
848 days before placement in the facility and recorded on a medical
849 examination form provided by the agency. The examination shall
850 include an assessment of the appropriateness of placement in a
851 facility. ~~The findings of this examination shall be recorded on~~
852 ~~the examination form provided by the agency. The completed form~~
853 ~~shall accompany the resident and shall be submitted to the~~
854 ~~facility owner or administrator. For~~ Additionally, ~~in the case~~
855 ~~of~~ a mental health resident, the Department of Children and
856 Family Services must provide documentation that the individual
857 has been assessed by a psychiatrist, clinical psychologist,
858 clinical social worker, or psychiatric nurse, or an individual
859 who is supervised by one of these professionals, and determined
860 to be appropriate to reside in an assisted living facility. The
861 documentation must be in the facility within 30 days after the
862 mental health resident has been admitted to the facility. An
863 evaluation completed upon discharge from a state mental hospital
864 meets the requirements of this subsection related to
865 appropriateness for placement as a mental health resident
866 providing it was completed within 90 days prior to admission to
867 the facility. The applicable department shall provide to the
868 facility administrator any information about the resident that
869 would help the administrator meet his or her responsibilities
870 under this section ~~subsection (1)~~. Further, department personnel
871 shall explain to the facility operator any special needs of the
872 resident and advise the operator whom to call should problems
873 arise. The applicable department shall advise and assist the

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874 facility administrator where the special needs of residents who
875 are recipients of optional state supplementation require such
876 assistance.

877 (3) A level 1 criminal background screening as defined in
878 chapter 435 of a prospective resident must be conducted by the
879 facility before admission or immediately after admission at the
880 resident's expense. The information obtained may be used by the
881 facility to assess the needs of the resident and the care and
882 services offered or arranged by the facility in accordance with
883 this section. The Agency's employee background screening
884 database may not be used for resident screening. If a resident
885 transfers between facilities, the resident's background
886 screening results shall be transferred with the resident.

887 (4) Persons licensed under part I of chapter 464 who are
888 employed by or under contract with a facility shall at least
889 monthly, perform a nursing assessment of residents for whom they
890 are providing nursing services ordered by a physician, except
891 administration of medication, and shall document such
892 assessment, including any substantial change in a resident's
893 status which may necessitate relocation to a nursing home,
894 hospital, or specialized health care facility. The records must
895 be maintained in the facility for inspection by the agency and
896 shall be forwarded to the resident's case manager, if
897 applicable.

898 (5)~~(7)~~ Residents shall be periodically assessed to
899 determine if the resident is competent to handle his or her
900 personal and financial affairs, and, if not, whether a
901 responsible person such as a resident representative or
902 designee, guardian, surrogate, or attorney in fact is available

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903 to make decisions on behalf of the resident. If a resident is
904 having difficulty handling his or her personal or financial
905 affairs, because of a decline in health or cognitive abilities,
906 the owner or administrator shall contact the resident's
907 representative or designee, guardian, surrogate or attorney-in-
908 fact. If a resident does not have family or a legal
909 representative to make decisions on his or her behalf, the owner
910 or administrator must contact the Florida Abuse Hotline. The
911 facility must notify a licensed physician when a resident
912 exhibits signs of dementia or cognitive impairment or has a
913 change of condition in order to rule out the presence of an
914 underlying physiological condition that may be contributing to
915 such dementia or impairment. The notification must occur within
916 30 days after the acknowledgment of such signs by facility
917 staff. If an underlying condition is determined to exist, the
918 facility shall arrange, with the appropriate health care
919 provider, the necessary care and services to treat the
920 condition.

921 Section 16. Subsections (3) through (8) of section 429.27,
922 Florida Statutes, are renumbered as subsections (6) through
923 (11), respectively, and subsections (1) and (2) of that section,
924 are amended to read:

925 429.27 Property and personal affairs of residents.--

926 (1)~~(a)~~ A resident shall be given the option of using his
927 or her own belongings, as space permits; choosing his or her
928 roommate; and, whenever possible, unless the resident is
929 adjudicated incompetent or incapacitated under state law,
930 managing his or her own affairs.

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931 (2) (b) The admission of a resident to a facility does and
932 ~~his or her presence therein shall~~ not confer on the facility or
933 its owner, administrator, staff employees, or representatives
934 any authority to manage, use, or dispose of any property of the
935 resident or to make financial or health care decisions on behalf
936 of the resident; ~~nor shall such admission or presence confer on~~
937 ~~any of such persons any authority or responsibility for the~~
938 ~~personal affairs of the resident, except if that which may be~~
939 necessary for the safe management of the facility or for the
940 safety of the resident.

941 (3) (2) A facility, or an owner, administrator, staff
942 ~~employee~~, or representative thereof, may not act as the
943 resident's representative or designee, guardian, health care
944 surrogate, trustee, or conservator for a any resident ~~of the~~
945 ~~assisted living facility~~ or any of the such resident's property
946 unless the person is a relative of the resident.

947 (4) A facility ~~An~~ owner, administrator, or staff member,
948 or representative thereof, may not act as a competent resident's
949 payee for social security, veteran's, or railroad benefits
950 without the consent of the resident. Any facility ~~whose~~ owner,
951 administrator, or staff, or representative thereof ~~who~~, serves
952 as representative payee for a any resident must ~~of the facility~~
953 ~~shall~~ file a surety bond with the agency in an amount equal to
954 twice the average monthly aggregate income or personal funds due
955 to residents, or expendable for his or her ~~their~~ account, which
956 are received by a facility.

957 (5) Any facility ~~whose~~ owner, administrator, or staff, or
958 ~~a~~ representative thereof ~~who~~, is granted power of attorney for a
959 any resident must ~~of the facility shall~~ file a surety bond with

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960 the agency for each resident for whom such power of attorney is
961 granted. The surety bond must ~~shall~~ be in an amount equal to
962 twice the average monthly income of the resident, plus the value
963 of any resident's property under the control of the attorney in
964 fact. The bond must ~~shall~~ be executed by the facility as
965 principal and a licensed surety company. The bond shall be
966 conditioned upon the faithful compliance of the facility with
967 this section and shall run to the agency for the benefit of any
968 resident who suffers a financial loss as a result of the misuse
969 or misappropriation ~~by a facility~~ of funds held pursuant to this
970 subsection. Any surety company that cancels or does not renew
971 the bond of any licensee shall notify the agency in writing not
972 less than 30 days in advance of such action, giving the reason
973 for the cancellation or nonrenewal. Any facility owner,
974 administrator, or staff, or representative thereof, who is
975 granted power of attorney for a ~~any~~ resident ~~of the facility~~
976 shall, on a monthly basis, ~~be required to~~ provide the resident
977 with a written statement of any transaction made on behalf of
978 the resident pursuant to this subsection, and a copy of such
979 statement ~~given to the resident~~ shall be retained in each
980 resident's file and available for agency inspection.

981 Section 17. Paragraphs (k) and (l) of subsection (1) and
982 subsection (3) of section 429.28, Florida Statutes, are amended
983 to read:

984 429.28 Resident bill of rights.--

985 (1) No resident of a facility shall be deprived of any
986 civil or legal rights, benefits, or privileges guaranteed by
987 law, the Constitution of the State of Florida, or the

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988 Constitution of the United States as a resident of a facility.

989 Every resident of a facility shall have the right to:

990 (k) At least 45 days' written notice of relocation or
991 termination of residency from the facility unless, for medical
992 reasons, the resident is certified by a physician to require an
993 emergency relocation to a facility providing a more skilled
994 level of care or the resident engages in a pattern of conduct
995 that is harmful or offensive to other residents. The notice must
996 specify the reasons for the relocation or termination and a copy
997 of the notice must be sent by registered mail to the resident's
998 representative or designee, guardian, surrogate, attorney in
999 fact, the local ombudsman council, and the agency at the same
1000 time the notice is delivered to the resident. The agency shall
1001 compile an annual report summarizing the information received in
1002 the notice, including the number and reasons for relocation or
1003 termination of facility residents, type and size of facilities,
1004 and other information that the agency considers relevant, which
1005 shall be submitted to the Governor, the President of the Senate,
1006 and the Speaker of the House of Representatives. ~~In the case of~~
1007 ~~a resident who has been adjudicated mentally incapacitated, the~~
1008 ~~guardian shall be given at least 45 days' notice of a~~
1009 ~~nonemergency relocation or residency termination. Reasons for~~
1010 ~~relocation shall be set forth in writing. In order for a~~
1011 facility to terminate the residency of an individual without
1012 notice as provided in this paragraph herein, the facility must
1013 ~~shall~~ show good cause in a court of competent jurisdiction.

1014 (l) Present grievances and recommend changes in policies,
1015 procedures, and services to the staff of the facility, governing
1016 officials, or any other person without restraint, interference,

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1017 coercion, discrimination, or reprisal. Each facility shall
1018 establish a written grievance procedure to facilitate the
1019 residents' exercise of this right which must include, at a
1020 minimum, maintaining a written record of each grievance, the
1021 stated reason for the grievance, actions taken by the facility,
1022 and reporting each grievance within 3 business days after
1023 receiving the grievance to the local ombudsman council. Each
1024 facility must accept grievances orally and may accept grievances
1025 in writing. The local ombudsman council shall maintain a record
1026 of all grievances received from each facility in the local area
1027 which shall be submitted by the local council to the Office of
1028 the State Long-Term Care Ombudsman pursuant to s. 400.0089. This
1029 right also includes access to ombudsman volunteers and advocates
1030 and the right to be a member of, to be active in, and to
1031 associate with advocacy or special interest groups.

1032 ~~(3) (a) The agency shall conduct a survey to determine~~
1033 ~~general compliance with facility standards and compliance with~~
1034 ~~residents' rights as a prerequisite to initial licensure or~~
1035 ~~licensure renewal.~~

1036 ~~(b)~~ In order to determine whether the facility is
1037 adequately protecting residents' rights, the agency's biennial
1038 survey shall include private informal conversations with a
1039 sample of residents and consultation with the ombudsman council
1040 in the planning and service area in which the facility is
1041 located to discuss residents' experiences within the facility.

1042 ~~(c) During any calendar year in which no survey is~~
1043 ~~conducted, the agency shall conduct at least one monitoring~~
1044 ~~visit of each facility cited in the previous year for a class I~~

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1045 ~~or class II violation, or more than three uncorrected class III~~
1046 ~~violations.~~

1047 ~~(d) The agency may conduct periodic followup inspections~~
1048 ~~as necessary to monitor the compliance of facilities with a~~
1049 ~~history of any class I, class II, or class III violations that~~
1050 ~~threaten the health, safety, or security of residents.~~

1051 ~~(e) The agency may conduct complaint investigations as~~
1052 ~~warranted to investigate any allegations of noncompliance with~~
1053 ~~requirements required under this part or rules adopted under~~
1054 ~~this part.~~

1055 Section 18. Subsection (1) of section 429.294, Florida
1056 Statutes, is amended to read:

1057 429.294 Availability of facility records for investigation
1058 of resident's rights violations and defenses; penalty.--

1059 (1) Failure to provide complete copies of a resident's
1060 records, including, but not limited to, all medical records and
1061 the resident's chart, within the control or possession of the
1062 facility within 10 days, ~~in accordance with the provisions of s.~~
1063 ~~400.145,~~ shall constitute evidence of failure of that party to
1064 comply with good faith discovery requirements and shall waive
1065 the good faith certificate and presuit notice requirements under
1066 this part by the requesting party.

1067 Section 19. Section 429.34, Florida Statutes, is amended
1068 to read:

1069 429.34 Right of entry and inspection.--In addition to the
1070 requirements of s. 408.811:7

1071 (1) Any duly designated officer or employee of the
1072 department, the Department of Children and Family Services, the
1073 Medicaid Fraud Control Unit of the Office of the Attorney

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1074 General, the state or local fire marshal, or a member of the
1075 state or local long-term care ombudsman council shall have the
1076 right to enter unannounced upon and into the premises of any
1077 facility licensed pursuant to this part in order to determine
1078 the state of compliance with the provisions of this part, part
1079 II of chapter 408, and applicable rules. Data collected by the
1080 state or local long-term care ombudsman councils or the state or
1081 local advocacy councils may be used by the agency in
1082 investigations involving violations of regulatory standards.

1083 (2) Every 15 months the agency shall conduct at least one
1084 unannounced inspection to determine compliance with this chapter
1085 and related rules including minimum standards of quality and
1086 adequacy of care, and the rights of residents. Two additional
1087 surveys shall be conducted every 6 months for the next year if
1088 the facility has been cited for a class I deficiency or two or
1089 more class II deficiencies arising from separate surveys or
1090 investigations within a 60-day period. In addition to any fines
1091 imposed on a facility under s. 429.19, the agency shall assess a
1092 fine of \$160 per bed for each of the additional two surveys. The
1093 agency shall adjust this fine by the change in the Consumer
1094 Price Index, based on the 12 months immediately preceding the
1095 change, to cover the cost of the additional two surveys. The
1096 agency shall verify through subsequent inspections that any
1097 deficiency identified during an inspection is corrected.
1098 However, the agency may verify the correction of a class III or
1099 class IV deficiency unrelated to resident rights or resident
1100 care without reinspecting the facility if adequate written
1101 documentation has been received from the facility which provides
1102 assurance that the deficiency has been corrected.

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1103 Section 20. Paragraphs (k) and (l) of subsection (1) of
1104 section 429.41, Florida Statutes, are redesignated as paragraphs
1105 (l) and (m), respectively, and a new paragraph (k) is added to
1106 that subsection, to read:

1107 (1) It is the intent of the Legislature that rules
1108 published and enforced pursuant to this section shall include
1109 criteria by which a reasonable and consistent quality of
1110 resident care and quality of life may be ensured and the results
1111 of such resident care may be demonstrated. Such rules shall also
1112 ensure a safe and sanitary environment that is residential and
1113 noninstitutional in design or nature. It is further intended
1114 that reasonable efforts be made to accommodate the needs and
1115 preferences of residents to enhance the quality of life in a
1116 facility. The agency, in consultation with the department, may
1117 adopt rules to administer the requirements of part II of chapter
1118 408. In order to provide safe and sanitary facilities and the
1119 highest quality of resident care accommodating the needs and
1120 preferences of residents, the department, in consultation with
1121 the agency, the Department of Children and Family Services, and
1122 the Department of Health, shall adopt rules, policies, and
1123 procedures to administer this part, which must include
1124 reasonable and fair minimum standards in relation to:

1125 (k) The requirement that all residents have service plans.
1126 The service plan must be reviewed and updated annually; however,
1127 for a resident receiving nursing services ordered by a
1128 physician, except administration of medication, the plan must be
1129 reviewed and updated quarterly and whenever a resident
1130 experiences a significant change in condition.

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1131 Section 21. Subsection (14) of section 429.65, Florida
1132 Statutes, is created to read:

1133 (14) "Reside" means the licensee or applicant lives in the
1134 adult family care home as a primary residence. For the purposes
1135 of this part, any two of the following documents which include
1136 the adult family care home address and the name of the licensee
1137 or applicant may be accepted by the agency as proof that the
1138 licensee or applicant resides in the adult family care home:

1139 (a) Homestead exemption documentation;

1140 (b) Lease or rental agreement accompanied by a
1141 corresponding utility bill;

1142 (c) Personal identification issued by a state or federal
1143 agency.

1144 ~~(14)~~(15) "Resident" means a person receiving room, board,
1145 and personal care in an adult family-care home.

1146 Section 22. Subsection (4) of section 429.67, Florida
1147 Statutes, is amended to read:

1148 429.67 Licensure.--

1149 (4) Upon receipt of a completed license application or
1150 license renewal, and the fee, the agency shall initiate a level
1151 1 background screening as provided under chapter 435 on the
1152 adult family-care home provider, the designated relief person,
1153 all adult household members, ~~and~~ all staff members, and any
1154 other person who provides personal services to residents or who
1155 have routine access to the adult family-care home.

1156 (a) Proof of compliance with level 1 screening standards
1157 which has been submitted within the previous 5 years to meet any
1158 facility or professional licensure requirements of the agency or
1159 the Department of Health satisfies the requirements of this

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1160 subsection. Such proof must be accompanied, under penalty of
1161 perjury, by a copy of the person's current professional license
1162 and an affidavit of current compliance with the background
1163 screening requirements.

1164 (b) The person required to be screened must have been
1165 continuously employed in the same type of occupation for which
1166 the person is seeking employment without a breach in service
1167 that exceeds 180 days, and proof of compliance with the level 1
1168 screening requirement which is no more than 2 years old must be
1169 provided. Proof of compliance shall be provided directly from
1170 one employer or contractor to another, and not from the person
1171 screened. Upon request, a copy of screening results shall be
1172 provided to the person screened by the employer retaining
1173 documentation of the screening.

1174 Section 23. Subsection (3) is added to section 429.69,
1175 Florida Statutes, to read:

1176 429.69 Denial, revocation, and suspension of a
1177 license.--In addition to the requirements of part II of chapter
1178 408, the agency may deny, suspend, and revoke a license for any
1179 of the following reasons:

1180 (3) Failure of the adult family-care home provider who
1181 owns or rents the home to live in the home.

1182 Section 24. Paragraph (b) of subsection (1) of section
1183 429.73, Florida Statutes, is amended to read:

1184 429.73 Rules and standards relating to adult family-care
1185 homes.--

1186 (1) The agency, in consultation with the department, may
1187 adopt rules to administer the requirements of part II of chapter
1188 408. The department, in consultation with the Department of

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1189 Health, the Department of Children and Family Services, and the
1190 agency shall, by rule, establish minimum standards to ensure the
1191 health, safety, and well-being of each resident in the adult
1192 family-care home pursuant to this part. The rules must address:

1193 (b) Services that must be provided to all residents of an
1194 adult family-care home and standards for such services, which
1195 must include, but need not be limited to:

- 1196 1. Room and board.
- 1197 2. Assistance necessary to perform the activities of daily
1198 living.
- 1199 3. Assistance necessary to administer medication.
- 1200 4. Supervision of residents.
- 1201 5. Health monitoring, including periodic assessments to
1202 determine if the resident is competent to handle his or her
1203 personal and financial affairs, and, if not, whether a
1204 responsible person such as a guardian, surrogate, or attorney in
1205 fact is available to make decisions on behalf of the resident.

1206 6. Social and leisure activities.

1207 Section 25. Subsections (2) and (3) of section 435.03,
1208 Florida Statutes, are amended to read:

1209 435.03 Level 1 screening standards.--

1210 (2) Any person for whom employment screening is required
1211 by statute must not have been convicted of ~~found guilty of,~~
1212 ~~regardless of adjudication,~~ or entered a plea of guilty or nolo
1213 ~~contendere or guilty to,~~ regardless of adjudication, to any
1214 offense prohibited under any of the following ~~provisions of the~~
1215 ~~Florida~~ statutes or under any similar statute of another
1216 jurisdiction:

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1217 (a) Section 393.135, relating to sexual misconduct with
1218 certain developmentally disabled clients and reporting of such
1219 sexual misconduct.

1220 (b) Section 394.4593, relating to sexual misconduct with
1221 certain mental health patients and reporting of such sexual
1222 misconduct.

1223 (c) Section 415.111, relating to abuse, neglect, or
1224 exploitation of a vulnerable adult.

1225 (d) Section 782.04, relating to murder.

1226 (e) Section 782.07, relating to manslaughter, aggravated
1227 manslaughter of an elderly person or disabled adult, or
1228 aggravated manslaughter of a child.

1229 (f) Section 782.071, relating to vehicular homicide.

1230 (g) Section 782.09, relating to killing of an unborn quick
1231 child by injury to the mother.

1232 (h) Section 784.011, relating to assault, if the victim of
1233 the offense was a minor.

1234 (i) Section 784.021, relating to aggravated assault.

1235 (j) Section 784.03, relating to battery, if the victim of
1236 the offense was a minor.

1237 (k) Section 784.045, relating to aggravated battery.

1238 (l) Section 787.01, relating to kidnapping.

1239 (m) Section 787.02, relating to false imprisonment.

1240 (n) Section 794.011, relating to sexual battery.

1241 (o) Former s. 794.041, relating to prohibited acts of
1242 persons in familial or custodial authority.

1243 (p) Chapter 796, relating to prostitution.

1244 (q) Section 798.02, relating to lewd and lascivious
1245 behavior.

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- 1246 (r) Chapter 800, relating to lewdness and indecent
1247 exposure.
- 1248 (s) Section 806.01, relating to arson.
- 1249 (t) Chapter 812, relating to theft, robbery, and related
1250 crimes, if the offense was a felony.
- 1251 (u) Section 817.563, relating to fraudulent sale of
1252 controlled substances, only if the offense was a felony.
- 1253 (v) Section 825.102, relating to abuse, aggravated abuse,
1254 or neglect of an elderly person or disabled adult.
- 1255 (w) Section 825.1025, relating to lewd or lascivious
1256 offenses committed upon or in the presence of an elderly person
1257 or disabled adult.
- 1258 (x) Section 825.103, relating to exploitation of an
1259 elderly person or disabled adult, if the offense was a felony.
- 1260 (y) Section 826.04, relating to incest.
- 1261 (z) Section 827.03, relating to child abuse, aggravated
1262 child abuse, or neglect of a child.
- 1263 (aa) Section 827.04, relating to contributing to the
1264 delinquency or dependency of a child.
- 1265 (bb) Former s. 827.05, relating to negligent treatment of
1266 children.
- 1267 (cc) Section 827.071, relating to sexual performance by a
1268 child.
- 1269 (dd) Chapter 847, relating to obscene literature.
- 1270 (ee) Chapter 893, relating to drug abuse prevention and
1271 control, only if the offense was a felony or if any other person
1272 involved in the offense was a minor.

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1273 (ff) Section 916.1075, relating to sexual misconduct with
1274 certain forensic clients and reporting of such sexual
1275 misconduct.

1276 (3) Standards must also ensure that the person:

1277 (a) For employees and employers licensed or registered
1278 pursuant to chapter 408, part II400 ~~or chapter 429~~, and for
1279 employees and employers of developmental disabilities
1280 institutions as defined in s. 393.063, ~~intermediate care~~
1281 ~~facilities for the developmentally disabled as defined in s.~~
1282 ~~400.960~~, and mental health treatment facilities as defined in s.
1283 394.455, has not been convicted of, or entered a plea of guilty
1284 or nolo contendere, regardless of adjudication, to offenses
1285 prohibited under any of the following statutes or under any
1286 similar statute of another jurisdiction: ~~meets the requirements~~
1287 of this chapter.

1288 1. Sections 409.920 and 409.9201, relating to Medicaid
1289 fraud.

1290 2. Chapter 429, relating to assisted care communities.

1291 3. Chapter 784, relating to assault, battery, and culpable
1292 negligence, if the offense is a felony.

1293 4. Section 810.02, relating to burglary, if the offense is
1294 a felony.

1295 5. Section 817.034, relating to communications fraud.

1296 6. Section 817.234, relating to fraudulent insurance
1297 claims.

1298 7. Section 817.505, relating to patient brokering.

1299 8. Section 817.568, relating to identification theft.

1300 9. Sections 817.60 and 817.61, relating to credit cards,
1301 if the offense is a felony.

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1302 10. Sections 831.01, 831.02, 831.07, 831.09, 831.30, and
1303 831.31 relating to forgery, uttering, and counterfeiting.

1304 (b) Has not committed an act that constitutes domestic
1305 violence as defined in s. 741.28.

1306 Section 26. Subsections (2) and (4) of section 435.04,
1307 Florida Statutes, are amended to read:

1308 435.04 Level 2 screening standards.--

1309 (2) The security background investigations under this
1310 section must ensure that no persons subject to ~~the provisions of~~
1311 this section have been convicted ~~found guilty of, regardless of~~
1312 ~~adjudication,~~ or entered a plea of guilty or nolo contendere ~~or~~
1313 ~~guilty to,~~ regardless of adjudication, to any offense prohibited
1314 under any of the following ~~provisions of the Florida~~ statutes or
1315 under any similar statute of another jurisdiction:

1316 (a) Section 393.135, relating to sexual misconduct with
1317 certain developmentally disabled clients and reporting of such
1318 sexual misconduct.

1319 (b) Section 394.4593, relating to sexual misconduct with
1320 certain mental health patients and reporting of such sexual
1321 misconduct.

1322 (c) Section 415.111, relating to adult abuse, neglect, or
1323 exploitation of aged persons or disabled adults.

1324 (d) Section 782.04, relating to murder.

1325 (e) Section 782.07, relating to manslaughter, aggravated
1326 manslaughter of an elderly person or disabled adult, or
1327 aggravated manslaughter of a child.

1328 (f) Section 782.071, relating to vehicular homicide.

1329 (g) Section 782.09, relating to killing of an unborn quick
1330 child by injury to the mother.

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- 1331 (h) Section 784.011, relating to assault, if the victim of
1332 the offense was a minor.
- 1333 (i) Section 784.021, relating to aggravated assault.
- 1334 (j) Section 784.03, relating to battery, if the victim of
1335 the offense was a minor.
- 1336 (k) Section 784.045, relating to aggravated battery.
- 1337 (l) Section 784.075, relating to battery on a detention or
1338 commitment facility staff.
- 1339 (m) Section 787.01, relating to kidnapping.
- 1340 (n) Section 787.02, relating to false imprisonment.
- 1341 (o) Section 787.04(2), relating to taking, enticing, or
1342 removing a child beyond the state limits with criminal intent
1343 pending custody proceedings.
- 1344 (p) Section 787.04(3), relating to carrying a child beyond
1345 the state lines with criminal intent to avoid producing a child
1346 at a custody hearing or delivering the child to the designated
1347 person.
- 1348 (q) Section 790.115(1), relating to exhibiting firearms or
1349 weapons within 1,000 feet of a school.
- 1350 (r) Section 790.115(2)(b), relating to possessing an
1351 electric weapon or device, destructive device, or other weapon
1352 on school property.
- 1353 (s) Section 794.011, relating to sexual battery.
- 1354 (t) Former s. 794.041, relating to prohibited acts of
1355 persons in familial or custodial authority.
- 1356 (u) Chapter 796, relating to prostitution.
- 1357 (v) Section 798.02, relating to lewd and lascivious
1358 behavior.

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- 1359 (w) Chapter 800, relating to lewdness and indecent
1360 exposure.
- 1361 (x) Section 806.01, relating to arson.
- 1362 (y) Chapter 812, relating to theft, robbery, and related
1363 crimes, if the offense is a felony.
- 1364 (z) Section 817.563, relating to fraudulent sale of
1365 controlled substances, only if the offense was a felony.
- 1366 (aa) Section 825.102, relating to abuse, aggravated abuse,
1367 or neglect of an elderly person or disabled adult.
- 1368 (bb) Section 825.1025, relating to lewd or lascivious
1369 offenses committed upon or in the presence of an elderly person
1370 or disabled adult.
- 1371 (cc) Section 825.103, relating to exploitation of an
1372 elderly person or disabled adult, if the offense was a felony.
- 1373 (dd) Section 826.04, relating to incest.
- 1374 (ee) Section 827.03, relating to child abuse, aggravated
1375 child abuse, or neglect of a child.
- 1376 (ff) Section 827.04, relating to contributing to the
1377 delinquency or dependency of a child.
- 1378 (gg) Former s. 827.05, relating to negligent treatment of
1379 children.
- 1380 (hh) Section 827.071, relating to sexual performance by a
1381 child.
- 1382 (ii) Section 843.01, relating to resisting arrest with
1383 violence.
- 1384 (jj) Section 843.025, relating to depriving a law
1385 enforcement, correctional, or correctional probation officer
1386 means of protection or communication.
- 1387 (kk) Section 843.12, relating to aiding in an escape.

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1388 (ll) Section 843.13, relating to aiding in the escape of
1389 juvenile inmates in correctional institutions.

1390 (mm) Chapter 847, relating to obscene literature.

1391 (nn) Section 874.05(1), relating to encouraging or
1392 recruiting another to join a criminal gang.

1393 (oo) Chapter 893, relating to drug abuse prevention and
1394 control, only if the offense was a felony or if any other person
1395 involved in the offense was a minor.

1396 (pp) Section 916.1075, relating to sexual misconduct with
1397 certain forensic clients and reporting of such sexual
1398 misconduct.

1399 (qq) Section 944.35(3), relating to inflicting cruel or
1400 inhuman treatment on an inmate resulting in great bodily harm.

1401 (rr) Section 944.46, relating to harboring, concealing, or
1402 aiding an escaped prisoner.

1403 (ss) Section 944.47, relating to introduction of
1404 contraband into a correctional facility.

1405 (tt) Section 985.701, relating to sexual misconduct in
1406 juvenile justice programs.

1407 (uu) Section 985.711, relating to contraband introduced
1408 into detention facilities.

1409 (4) Standards must also ensure that the person:

1410 (a) For employees or employers licensed or registered
1411 pursuant to chapter 408, part II-400 or chapter 429, and for
1412 employees and employers of developmental disabilities
1413 institutions as defined in s. 393.063, and mental health
1414 treatment facilities as defined in s. 394.455, has not been
1415 convicted of, or entered a plea of guilty or nolo contendere,
1416 regardless of adjudication, to offenses prohibited under any of

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1417 the following statutes or under similar statutes of another
1418 jurisdiction: does not have a confirmed report of abuse,
1419 neglect, or exploitation as defined in s. 415.102(6), which has
1420 been uncontested or upheld under s. 415.103.

1421 1. Sections 409.920 and 409.9201, relating to Medicaid
1422 fraud.

1423 2. Chapter 429, relating to assisted care communities.

1424 3. Chapter 784, relating to assault, battery, and culpable
1425 negligence, if the offense is a felony.

1426 4. Section 810.02, relating to burglary, if the offense is
1427 a felony.

1428 5. Section 817.034, relating to communications fraud.

1429 6. Section 817.234, relating to fraudulent insurance
1430 claims.

1431 7. Section 817.505, relating to patient brokering.

1432 8. Section 817.568, relating to identification theft.

1433 9. Sections 817.60 and 817.61, relating to credit cards,
1434 if the offense is a felony.

1435 10. Sections 831.01, 831.02, 831.07, 831.09, 831.30, and
1436 831.31 relating to forgery, uttering, and counterfeiting.

1437 (b) Has not committed an act that constitutes domestic
1438 violence as defined in s. 741.28 ~~s. 741.30~~.

1439 Section 27. Subsection (13) of section 400.141, subsection
1440 (3) of section 408.809, subsection (2) of section 429.08, and
1441 subsection (5) of section 429.41, Florida Statutes, are
1442 repealed.

1443 Section 28. Paragraph (h) of subsection (3) of section
1444 430.80, Florida Statutes, is amended to read:

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1445 430.80 Implementation of a teaching nursing home pilot
1446 project.--

1447 (3) To be designated as a teaching nursing home, a nursing
1448 home licensee must, at a minimum:

1449 (h) Maintain insurance coverage pursuant to s. 400.141(19)
1450 ~~s. 400.141(20)~~ or proof of financial responsibility in a minimum
1451 amount of \$750,000. ~~Such~~ Proof of financial responsibility may
1452 include:

1453 1. Maintaining an escrow account consisting of cash or
1454 assets eligible for deposit in accordance with s. 625.52; or

1455 2. Obtaining and maintaining, pursuant to chapter 675, an
1456 unexpired, irrevocable, nontransferable and nonassignable letter
1457 of credit issued by a ~~any~~ bank or savings association organized
1458 and existing under the laws of this state or a ~~any~~ bank or
1459 savings association organized under the laws of the United
1460 States that has its principal place of business in this state or
1461 has a branch office which is authorized to receive deposits in
1462 this state. The letter of credit shall be used to satisfy the
1463 obligation of the facility to the claimant upon presentment of a
1464 final judgment indicating liability and awarding damages to be
1465 paid by the facility or upon presentment of a settlement
1466 agreement signed by all parties if the ~~to the agreement when~~
1467 ~~such~~ final judgment or settlement is a result of a liability
1468 claim against the facility.

1469 Section 29. Subsection (13) of section 651.118, Florida
1470 Statutes, is amended to read:

1471 651.118 Agency for Health Care Administration;
1472 certificates of need; sheltered beds; community beds.--

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1473 (13) Residents, ~~as defined in this chapter,~~ are not
 1474 considered new admissions for the purpose of s. 400.141(14)(d)
 1475 ~~s. 400.141(15)(d)~~.

1476 Section 30. This act shall take effect October 1, 2008.
 1477
 1478

1479 ===== T I T L E A M E N D M E N T =====

1480 And the title is amended as follows:

1481 Delete everything before the enacting clause
 1482 and insert:

1483 A bill to be entitled
 1484 An act relating to adult protection and care; amending s.
 1485 322.142, F.S.; authorizing the Department of Children and
 1486 Family Services to obtain copies of driver's license files
 1487 maintained by the Department of Highway Safety and Motor
 1488 Vehicles for the purpose of conducting protective
 1489 investigations; amending s. 400.141, F.S.; requiring a
 1490 check of the Florida Department of Law Enforcement sexual
 1491 offender database to be conducted on all nursing home
 1492 residents; amending s. 400.19, F.S.; revising provisions
 1493 relating to unannounced inspections; amending s. 400.215,
 1494 F.S.; requiring contracted workers employed in a nursing
 1495 home to submit to background screening; prohibiting
 1496 employees and contracted workers who do not meet
 1497 background screening requirements from being employed in a
 1498 nursing home; providing certain exceptions; deleting an
 1499 obsolete provision; amending s. 408.809, F.S.; requiring
 1500 the agency to establish a fee schedule to cover the cost
 1501 of a level 1 or level 2 screening and giving the agency

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1502 rule making authority; amending s. 408.810, F.S.;

1503 requiring health care facilities regulated by the Agency

1504 for Health Care Administration to post certain information

1505 in the facility and allowing the agency to charge a fee to

1506 cover production and distribution; amending s. 408.811,

1507 F.S.; providing that agency employees who provide advance

1508 notice of unannounced agency inspections are subject to

1509 suspension, providing a timeline and process for

1510 correction of deficiencies, and providing that the agency

1511 may provide electronic access to documents; amending s.

1512 415.103, F.S.; requiring certain reports to the central

1513 abuse hotline relating to vulnerable adults to be

1514 immediately transferred to the county sheriff's office;

1515 amending s. 415.1051, F.S.; authorizing the Department of

1516 Children and Family Services to file the petition to

1517 determine incapacity in adult protection proceedings;

1518 prohibiting the department from serving as the guardian or

1519 providing legal counsel to the guardian; amending s.

1520 415.112, F.S.; specifying rules to be adopted by the

1521 Department of Children and Family Services relating to

1522 adult protective services under ch. 415, F.S.; amending s.

1523 429.02, F.S.; revising the definition of "service plan" to

1524 remove the limitation that plans are required only in

1525 assisted living facilities that have an extended

1526 congregate care license and providing that the agency

1527 develop a service plan form; amending s. 429.07, F.S.;

1528 providing that license requirements for specialty licenses

1529 apply to current licensees as well as applicants for an

1530 extended congregate care and limited nursing license;

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1531 conforming a cross-reference; amending s. 429.174, F.S.;

1532 requiring certain employees and contracted workers in

1533 assisted living facilities to submit to background

1534 screening; prohibiting employees and contracted workers

1535 who do not meet background screening requirements from

1536 being employed in an assisted living facility; providing

1537 certain exceptions; requiring the person being screened to

1538 pay for the cost of screening; amending s. 429.255, F.S.;

1539 providing that the owner or administrator of an assisted

1540 living facility is responsible for the services provided

1541 in the facility; amending s. 429.26, F.S.; clarifying a

1542 prohibition on moving a resident; providing for the

1543 development of a service plan for all residents; requiring

1544 a criminal records check to be conducted on all residents

1545 of an assisted living facility; requiring residents to be

1546 periodically assessed for competency to handle personal

1547 affairs; amending s. 429.27, F.S.; prohibiting assisted

1548 living facility personnel from making certain decisions

1549 for a resident or act as the resident's representative or

1550 surrogate; amending s. 429.28, F.S.; requiring that notice

1551 of a resident's relocation or termination of residency be

1552 in writing and a copy sent to specified persons; requiring

1553 the State Long-Term Ombudsman Program include information

1554 within their annual report to the Governor and the

1555 Legislature; requiring facilities to have a written

1556 grievance procedure that includes certain information;

1557 requiring that grievances reported to the local ombudsman

1558 council be included in a statewide reporting system;

1559 revising provisions relating to agency surveys to

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1560 determine compliance with resident rights in assisted
1561 living facilities; amending s. 429.294, F.S.; deleting a
1562 cross-reference; amending s. 429.34, F.S.; providing for
1563 unannounced inspections; providing for additional 6-month
1564 inspections for certain violations; providing for an
1565 additional fine for 6-month inspections; amending s.
1566 429.41, F.S.; requiring all residents of assisted living
1567 facilities to have a service plan; amending s. 429.65,
1568 F.S.; providing a definition of the term "Reside";
1569 amending s. 429.67, F.S.; expanding the list of persons
1570 who must have a background screening in adult family-care
1571 homes; amending s. 429.69, F.S.; providing that the
1572 failure of a adult family-care home provider to live in
1573 the home is grounds for the denial, revocation, or
1574 suspension of a license; amending s. 429.73, F.S.;
1575 requiring adult family-care home residents to be
1576 periodically assessed for competency to handle personal
1577 affairs; amending ss. 435.03 and 435.04, F.S.; providing
1578 additional criminal offenses for screening certain health
1579 care facility personnel; repealing s. 400.141(13), F.S.,
1580 relating to a requirement to post certain information in
1581 nursing homes; repealing s. 408.809(3), F.S., relating to
1582 the granting of a provisional license while awaiting the
1583 results of a background screening; repealing s. 429.08(2),
1584 F.S., deleting a provision relating to local workgroups of
1585 field offices of the Agency for Health Care
1586 Administration; repealing s. 429.41(5), F.S., relating to
1587 agency inspections; amending ss. 430.80 and 651.118, F.S.;
1588 conforming cross-references; providing an effective date.