${\bf By}$ Senator Bennett

	21-01558-09 20091562
1	A bill to be entitled
2	An act relating to the inspection of nursing homes;
3	amending ss. 381.006, 381.0072, and 381.0098, F.S.;
4	providing that nursing homes that are inspected by the
5	Agency for Health Care Administration are exempt from
6	inspection by the Department of Health; amending s.
7	400.0061, F.S.; conforming a provision to changes made
8	by the act; amending s. 400.0065, F.S.; clarifying
9	that any person may make a complaint against a long-
10	term care facility, including an employee of that
11	facility; amending ss. 400.0067, 400.0069, and
12	400.0071, F.S.; conforming provisions to changes made
13	by the act; clarifying that any person may make a
14	complaint against a long-term care facility, including
15	an employee of that facility; repealing s. 400.0074,
16	F.S., relating to onsite administrative assessments of
17	nursing homes, assisted living facilities, and adult
18	family-care homes conducted by the local ombudsman
19	council; amending s. 400.121, F.S.; conforming
20	provisions to changes made by the act relating to
21	classifications of deficiencies; amending s. 400.141,
22	F.S.; conforming provisions to changes made by the act
23	relating to classifications of deficiencies and the
24	Gold Seal Program; amending s. 400.19, F.S.;
25	conforming provisions to changes made by the act
26	relating to classifications of deficiencies; repealing
27	s. 400.191, F.S., relating to a requirement that the
28	agency make available to the public, distribute, and
29	post reports and records concerning licensed nursing

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20091562 21-01558-09 30 homes operating in the state; amending s. 400.195, 31 F.S.; revising agency reporting requirements; amending 32 s. 400.23, F.S.; conforming a provision to changes 33 made by the act; deleting the classifications for deficiencies; requiring the agency to indicate the 34 35 level of seriousness of deficiencies under federal 36 requirements specified by the Centers for Medicare and 37 Medicaid Services; repealing s. 400.235, F.S., 38 relating to nursing home quality and licensure status 39 and the Gold Seal Program; amending s. 408.035, F.S.; 40 conforming a provision to changes made by the act; 41 repealing s. 409.912(15)(d), F.S., relating to the 42 requirement by the staff of the Comprehensive 43 Assessment and Review for Long-Term Services to 44 conduct an assessment and review of a sample of 45 individuals whose nursing home stay is expected to 46 exceed a certain number of days; amending s. 633.081, 47 F.S.; providing that nursing homes that are inspected 48 by the Agency for Health Care Administration are 49 exempt from inspection by the State Fire Marshal under 50 certain circumstances; providing an effective date. 51 52 Be It Enacted by the Legislature of the State of Florida: 53 Section 1. Subsection (16) of section 381.006, Florida 54 55 Statutes, is amended to read: 56 381.006 Environmental health.-The department shall conduct 57

an environmental health program as part of fulfilling thestate's public health mission. The purpose of this program is to

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21-01558-09 20091562 59 detect and prevent disease caused by natural and manmade factors 60 in the environment. The environmental health program shall 61 include, but not be limited to: 62 (16) A group-care-facilities function, where a group care facility means any public or private school, housing, building 63 or buildings, section of a building, or distinct part of a 64 65 building or other place, whether operated for profit or not, 66 which undertakes, through its ownership or management, to 67 provide one or more personal services, care, protection, and supervision to persons who require such services and who are not 68 69 related to the owner or administrator. The department may adopt 70 rules necessary to protect the health and safety of residents, 71 staff, and patrons of group care facilities, such as child care 72 facilities, family day care homes, assisted living facilities, 73 adult day care centers, adult family care homes, hospices, 74 residential treatment facilities, crisis stabilization units, 75 pediatric extended care centers, intermediate care facilities 76 for the developmentally disabled, group care homes, and, jointly 77 with the Department of Education, private and public schools. 78 These rules may include definitions of terms; provisions 79 relating to operation and maintenance of facilities, buildings, 80 grounds, equipment, furnishings, and occupant-space requirements; lighting; heating, cooling, and ventilation; food 81 82 service; water supply and plumbing; sewage; sanitary facilities; insect and rodent control; garbage; safety; personnel health, 83 84 hygiene, and work practices; and other matters the department 85 finds are appropriate or necessary to protect the safety and 86 health of the residents, staff, or patrons. The department may 87 not adopt rules that conflict with rules adopted by the

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21-01558-09 20091562 88 licensing or certifying agency. The department may enter and 89 inspect at reasonable hours to determine compliance with 90 applicable statutes or rules. However, nursing homes that are 91 licensed under part II of chapter 400 and inspected by the 92 Agency for Health Care Administration as part of state licensing 93 requirements and federal certification requirements are exempt 94 from inspection by the Department of Health. In addition to any 95 sanctions that the department may impose for violations of rules 96 adopted under this section, the department shall also report such violations to any agency responsible for licensing or 97 98 certifying the group care facility. The licensing or certifying 99 agency may also impose any sanction based solely on the findings 100 of the department. 101 102 The department may adopt rules to carry out the provisions of 103 this section. 104 Section 2. Paragraph (a) of subsection (2) of section 381.0072, Florida Statutes, is amended to read: 105 106 381.0072 Food service protection.-It shall be the duty of 107 the Department of Health to adopt and enforce sanitation rules 108 consistent with law to ensure the protection of the public from 109 food-borne illness. These rules shall provide the standards and 110 requirements for the storage, preparation, serving, or display 111 of food in food service establishments as defined in this section and which are not permitted or licensed under chapter 112 113 500 or chapter 509. 114 (2) DUTIES.-115 (a) The department shall adopt rules, including definitions 116 of terms which are consistent with law prescribing minimum

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21-01558-09 20091562 117 sanitation standards and manager certification requirements as prescribed in s. 509.039, and which shall be enforced in food 118 119 service establishments as defined in this section. The 120 sanitation standards must address the construction, operation, 121 and maintenance of the establishment; lighting, ventilation, 122 laundry rooms, lockers, use and storage of toxic materials and 123 cleaning compounds, and first-aid supplies; plan review; design, 124 construction, installation, location, maintenance, sanitation, 125 and storage of food equipment and utensils; employee training, health, hygiene, and work practices; food supplies, preparation, 126 127 storage, transportation, and service, including access to the 128 areas where food is stored or prepared; and sanitary facilities 129 and controls, including water supply and sewage disposal; 130 plumbing and toilet facilities; garbage and refuse collection, 131 storage, and disposal; and vermin control. Public and private 132 schools, if the food service is operated by school employees; 133 hospitals licensed under chapter 395; nursing homes licensed 134 under part II of chapter 400; child care facilities as defined in s. 402.301; residential facilities colocated with a nursing 135 136 home or hospital, if all food is prepared in a central kitchen 137 that complies with nursing or hospital regulations; and bars and 138 lounges, as defined by department rule, are exempt from the 139 rules developed for manager certification. The department shall 140 administer a comprehensive inspection, monitoring, and sampling program to ensure such standards are maintained; however, 141 142 nursing homes that are licensed under part II of chapter 400 and inspected by the Agency for Health Care Administration as part 143 144 of state licensing requirements and federal certification 145 requirements are exempt from inspection by the department. With

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146	respect to food service establishments permitted or licensed
147	under chapter 500 or chapter 509, the department shall assist
148	the Division of Hotels and Restaurants of the Department of
149	Business and Professional Regulation and the Department of
150	Agriculture and Consumer Services with rulemaking by providing
151	technical information.
152	Section 3. Paragraph (b) of subsection (6) of section
153	381.0098, Florida Statutes, is amended to read:
154	381.0098 Biomedical waste
155	(6) TRACKING SYSTEM.—The department shall adopt rules for a
156	system of tracking biomedical waste.
157	(b) Inspections may be conducted for purposes of compliance
158	with this section. Any such inspection shall be commenced and
159	completed with reasonable promptness. <u>However, nursing homes</u>
160	that are licensed under part II of chapter 400 and inspected by
161	the Agency for Health Care Administration as part of state
162	licensing requirements and federal certification requirements
163	are exempt from inspection by the department. If the officer,
164	employee, or representative of the department obtains any
165	samples, prior to leaving the premises he or she shall give the
166	owner, operator, or agent in charge a receipt describing the
167	sample obtained.
168	Section 4. Subsection (2) of section 400.0061, Florida
169	Statutes, is amended to read:
170	400.0061 Legislative findings and intent; long-term care
171	facilities
172	(2) It is the intent of the Legislature, therefore, to
173	utilize voluntary citizen ombudsman councils under the
174	leadership of the ombudsman, and through them to operate an

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20091562 21-01558-09 175 ombudsman program which shall, without interference by any 176 executive agency, undertake to discover, investigate, and 177 determine the presence of conditions or individuals which 178 constitute a threat to the rights, health, safety, or welfare of 179 the residents of long-term care facilities. To ensure that the 180 effectiveness and efficiency of such investigations are not 181 impeded by advance notice or delay, the Legislature intends that 182 the ombudsman and ombudsman councils and their designated 183 representatives not be required to obtain warrants in order to 184 enter into or conduct investigations or onsite administrative 185 assessments of long-term care facilities. It is the further 186 intent of the Legislature that the environment in long-term care 187 facilities be conducive to the dignity and independence of 188 residents and that investigations by ombudsman councils shall 189 further the enforcement of laws, rules, and regulations that 190 safeguard the health, safety, and welfare of residents. 191 Section 5. Paragraph (a) of subsection (1) of section 192 400.0065, Florida Statutes, is amended to read: 193 400.0065 State Long-Term Care Ombudsman; duties and responsibilities.-194 195 (1) The purpose of the Office of State Long-Term Care 196 Ombudsman shall be to: 197 (a) Identify, investigate, and resolve complaints made by or on behalf of residents of long-term care facilities, 198 regardless of the person who makes the complaint, including an 199 200 employee, relating to actions or omissions by providers or

201 representatives of providers of long-term care services, other 202 public or private agencies, guardians, or representative payees 203 which that may adversely affect the health, safety, welfare, or

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204	rights of the residents.
205	Section 6. Paragraphs (b) and (d) of subsection (2) of
206	section 400.0067, Florida Statutes, are amended to read:
207	400.0067 State Long-Term Care Ombudsman Council; duties;
208	membership
209	(2) The State Long-Term Care Ombudsman Council shall:
210	(b) Serve as an appellate body in receiving from the local
211	councils complaints not resolved at the local level. Any
212	individual member or members of the state council may enter any
213	long-term care facility involved in an appeal , pursuant to the
214	conditions specified in s. 400.0074(2).
215	(d) Assist the ombudsman in eliciting, receiving,
216	responding to, and resolving complaints made by or on behalf of
217	residents regardless of the person who makes the complaint,
218	including an employee of a long-term care facility.
219	Section 7. Paragraph (c) of subsection (2) and subsection
220	(3) of section 400.0069, Florida Statutes, are amended to read:
221	400.0069 Local long-term care ombudsman councils; duties;
222	membership
223	(2) The duties of the local councils are to:
224	(c) Elicit, receive, investigate, respond to, and resolve
225	complaints made by or on behalf of residents <u>regardless of the</u>
226	person who makes the complaint, including an employee of a long-
227	term care facility.
228	(3) In order to carry out the duties specified in
229	subsection (2), a member of a local council is authorized to
230	enter any long-term care facility without notice or first
231	obtaining a warrant, subject to the provisions of s.
232	400.0074(2).

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233	
234	to read:
235	400.0071 State Long-Term Care Ombudsman Program complaint
236	procedures.—The department shall adopt rules implementing state
237	and local complaint procedures. The rules must include
238	procedures for:
239	(1) Receiving complaints against a long-term care facility
240	or an employee of a long-term care facility <u>regardless of the</u>
241	person who makes the complaint.
242	(2) Conducting investigations of a long-term care facility
243	or an employee of a long-term care facility subsequent to
244	receiving a complaint.
245	(3) Conducting onsite administrative assessments of long-
246	term care facilities.
247	Section 9. Section 400.0074, Florida Statutes, is repealed.
248	Section 10. Subsection (3) of section 400.121, Florida
249	Statutes, is amended to read:
250	400.121 Denial, suspension, revocation of license;
251	administrative fines; procedure; order to increase staffing
252	(3) The agency shall revoke or deny a nursing home license
253	if the licensee or controlling interest operates a facility in
254	this state that:
255	(a) Has had two moratoria issued pursuant to this part or
256	part II of chapter 408 which are imposed by final order for
257	substandard quality of care, as defined by 42 C.F.R. part 483,
258	within any 30-month period; <u>or</u>
259	(b) Is conditionally licensed for 180 or more continuous
260	days_+
261	(c) Is cited for two class I deficiencies arising from

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262	unrelated circumstances during the same survey or investigation;
263	or
264	(d) Is cited for two class I deficiencies arising from
265	separate surveys or investigations within a 30-month period.
266	
267	The licensee may present factors in mitigation of revocation,
268	and the agency may make a determination not to revoke a license
269	based upon a showing that revocation is inappropriate under the
270	circumstances.
271	Section 11. Section 400.141, Florida Statutes, is amended
272	to read:
273	400.141 Administration and management of nursing home
274	facilitiesEvery licensed facility shall comply with all
275	applicable standards and rules of the agency and shall:
276	(1) Be under the administrative direction and charge of a
277	licensed administrator.
278	(2) Appoint a medical director licensed pursuant to chapter
279	458 or chapter 459. The agency may establish by rule more
280	specific criteria for the appointment of a medical director.
281	(3) Have available the regular, consultative, and emergency
282	services of physicians licensed by the state.
283	(4) Provide for resident use of a community pharmacy as
284	specified in s. 400.022(1)(q). Any other law to the contrary
285	notwithstanding, a registered pharmacist licensed in Florida,
286	that is under contract with a facility licensed under this
287	chapter or chapter 429, shall repackage a nursing facility
288	resident's bulk prescription medication which has been packaged
289	by another pharmacist licensed in any state in the United States
290	into a unit dose system compatible with the system used by the

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21-01558-09 20091562 291 nursing facility, if the pharmacist is requested to offer such 292 service. In order to be eligible for the repackaging, a resident 293 or the resident's spouse must receive prescription medication 294 benefits provided through a former employer as part of his or 295 her retirement benefits, a qualified pension plan as specified 296 in s. 4972 of the Internal Revenue Code, a federal retirement 297 program as specified under 5 C.F.R. s. 831, or a long-term care 298 policy as defined in s. 627.9404(1). A pharmacist who correctly 299 repackages and relabels the medication and the nursing facility 300 which correctly administers such repackaged medication under the 301 provisions of this subsection shall not be held liable in any 302 civil or administrative action arising from the repackaging. In 303 order to be eligible for the repackaging, a nursing facility 304 resident for whom the medication is to be repackaged shall sign 305 an informed consent form provided by the facility which includes 306 an explanation of the repackaging process and which notifies the 307 resident of the immunities from liability provided herein. A 308 pharmacist who repackages and relabels prescription medications, 309 as authorized under this subsection, may charge a reasonable fee for costs resulting from the implementation of this provision. 310

311 (5) Provide for the access of the facility residents to 312 dental and other health-related services, recreational services, rehabilitative services, and social work services appropriate to 313 314 their needs and conditions and not directly furnished by the licensee. When a geriatric outpatient nurse clinic is conducted 315 in accordance with rules adopted by the agency, outpatients 316 317 attending such clinic shall not be counted as part of the 318 general resident population of the nursing home facility, nor 319 shall the nursing staff of the geriatric outpatient clinic be

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21-01558-09 20091562 320 counted as part of the nursing staff of the facility, until the 321 outpatient clinic load exceeds 15 a day. 322 (6) Be allowed and encouraged by the agency to provide 323 other needed services under certain conditions. If the facility 324 has a standard licensure status, and has had no class I or class 325 II deficiencies during the past 2 years or has been awarded a 326 Gold Seal under the program established in s. 400.235, it may be encouraged by the agency to provide services, including, but not 327 328 limited to, respite and adult day services, which enable 329 individuals to move in and out of the facility. A facility is 330 not subject to any additional licensure requirements for 331 providing these services. Respite care may be offered to persons 332 in need of short-term or temporary nursing home services. 333 Respite care must be provided in accordance with this part and rules adopted by the agency. However, the agency shall, by rule, 334 335 adopt modified requirements for resident assessment, resident 336 care plans, resident contracts, physician orders, and other 337 provisions, as appropriate, for short-term or temporary nursing 338 home services. The agency shall allow for shared programming and 339 staff in a facility which meets minimum standards and offers 340 services pursuant to this subsection, but, if the facility is 341 cited for deficiencies in patient care, may require additional 342 staff and programs appropriate to the needs of service 343 recipients. A person who receives respite care may not be counted as a resident of the facility for purposes of the 344 345 facility's licensed capacity unless that person receives 24-hour 346 respite care. A person receiving either respite care for 24 347 hours or longer or adult day services must be included when 348 calculating minimum staffing for the facility. Any costs and

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21-01558-0920091562___349revenues generated by a nursing home facility from350nonresidential programs or services shall be excluded from the351calculations of Medicaid per diems for nursing home352institutional care reimbursement.

353 (7) If the facility has a standard license or is a Gold 354 Seal facility, exceeds the minimum required hours of licensed 355 nursing and certified nursing assistant direct care per resident 356 per day, and is part of a continuing care facility licensed 357 under chapter 651 or a retirement community that offers other 358 services pursuant to part III of this chapter or part I or part 359 III of chapter 429 on a single campus, be allowed to share 360 programming and staff. At the time of inspection and in the 361 semiannual report required pursuant to subsection (15), a 362 continuing care facility or retirement community that uses this 363 option must demonstrate through staffing records that minimum 364 staffing requirements for the facility were met. Licensed nurses 365 and certified nursing assistants who work in the nursing home 366 facility may be used to provide services elsewhere on campus if 367 the facility exceeds the minimum number of direct care hours 368 required per resident per day and the total number of residents 369 receiving direct care services from a licensed nurse or a 370 certified nursing assistant does not cause the facility to 371 violate the staffing ratios required under s. 400.23(3)(a). 372 Compliance with the minimum staffing ratios shall be based on 373 total number of residents receiving direct care services, 374 regardless of where they reside on campus. If the facility 375 receives a conditional license, it may not share staff until the 376 conditional license status ends. This subsection does not 377 restrict the agency's authority under federal or state law to

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to this part.

21-01558-09 20091562 378 require additional staff if a facility is cited for deficiencies 379 in care which are caused by an insufficient number of certified 380 nursing assistants or licensed nurses. The agency may adopt 381 rules for the documentation necessary to determine compliance 382 with this provision. 383 (8) Maintain the facility premises and equipment and 384 conduct its operations in a safe and sanitary manner. 385 (9) If the licensee furnishes food service, provide a 386 wholesome and nourishing diet sufficient to meet generally 387 accepted standards of proper nutrition for its residents and 388 provide such therapeutic diets as may be prescribed by attending 389 physicians. In making rules to implement this subsection, the 390 agency shall be guided by standards recommended by nationally 391 recognized professional groups and associations with knowledge 392 of dietetics. 393 (10) Keep full records of resident admissions and 394 discharges; medical and general health status, including medical records, personal and social history, and identity and address 395 396 of next of kin or other persons who may have responsibility for 397 the affairs of the residents; and individual resident care plans 398 including, but not limited to, prescribed services, service 399 frequency and duration, and service goals. The records shall be 400 open to inspection by the agency. (11) Keep such fiscal records of its operations and 401 402 conditions as may be necessary to provide information pursuant

404 (12) Furnish copies of personnel records for employees
405 affiliated with such facility, to any other facility licensed by
406 this state requesting this information pursuant to this part.

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21-01558-09 20091562 407 Such information contained in the records may include, but is 408 not limited to, disciplinary matters and any reason for 409 termination. Any facility releasing such records pursuant to 410 this part shall be considered to be acting in good faith and may 411 not be held liable for information contained in such records, 412 absent a showing that the facility maliciously falsified such 413 records. (13) Publicly display a poster provided by the agency 414 415 containing the names, addresses, and telephone numbers for the state's abuse hotline, the State Long-Term Care Ombudsman, the 416 417 Agency for Health Care Administration consumer hotline, the 418 Advocacy Center for Persons with Disabilities, the Florida 419 Statewide Advocacy Council, and the Medicaid Fraud Control Unit, 420 with a clear description of the assistance to be expected from 421 each. 422 (14) Submit to the agency the information specified in s. 423 400.071(1)(b) for a management company within 30 days after the 424 effective date of the management agreement. 425 (15) Submit semiannually to the agency, or more frequently if requested by the agency, information regarding facility 426 427 staff-to-resident ratios, staff turnover, and staff stability, 428 including information regarding certified nursing assistants, 429 licensed nurses, the director of nursing, and the facility 430 administrator. For purposes of this reporting: (a) Staff-to-resident ratios must be reported in the 431 432 categories specified in s. 400.23(3)(a) and applicable rules. 433 The ratio must be reported as an average for the most recent 434 calendar quarter. 435 (b) Staff turnover must be reported for the most recent 12-

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21-01558-09 20091562 436 month period ending on the last workday of the most recent 437 calendar quarter prior to the date the information is submitted. 438 The turnover rate must be computed quarterly, with the annual 439 rate being the cumulative sum of the quarterly rates. The 440 turnover rate is the total number of terminations or separations 441 experienced during the quarter, excluding any employee 442 terminated during a probationary period of 3 months or less, 443 divided by the total number of staff employed at the end of the 444 period for which the rate is computed, and expressed as a 445 percentage.

(c) The formula for determining staff stability is the total number of employees that have been employed for more than 12 months, divided by the total number of employees employed at the end of the most recent calendar quarter, and expressed as a percentage.

451 (d) A nursing facility that has failed to comply with state 452 minimum-staffing requirements for 2 consecutive days is 453 prohibited from accepting new admissions until the facility has 454 achieved the minimum-staffing requirements for a period of 6 455 consecutive days. For the purposes of this paragraph, any person 456 who was a resident of the facility and was absent from the 457 facility for the purpose of receiving medical care at a separate 458 location or was on a leave of absence is not considered a new 459 admission. Failure to impose such an admissions moratorium 460 constitutes a class II deficiency.

(e) A nursing facility which does not have a conditional license may be cited for failure to comply with the standards in s. 400.23(3)(a)1.a. only if it has failed to meet those standards on 2 consecutive days or if it has failed to meet at

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20091562 21-01558-09 465 least 97 percent of those standards on any one day. 466 (f) A facility which has a conditional license must be in 467 compliance with the standards in s. 400.23(3)(a) at all times. 468 469 Nothing in this section shall limit the agency's ability to 470 impose a deficiency or take other actions if a facility does not 471 have enough staff to meet the residents' needs. 472 (16) Report monthly the number of vacant beds in the 473 facility which are available for resident occupancy on the day 474 the information is reported. 475 (17) Notify a licensed physician when a resident exhibits 476 signs of dementia or cognitive impairment or has a change of 477 condition in order to rule out the presence of an underlying 478 physiological condition that may be contributing to such 479 dementia or impairment. The notification must occur within 30 480 days after the acknowledgment of such signs by facility staff. 481 If an underlying condition is determined to exist, the facility 482 shall arrange, with the appropriate health care provider, the 483 necessary care and services to treat the condition. 484 (18) If the facility implements a dining and hospitality 485 attendant program, ensure that the program is developed and 486 implemented under the supervision of the facility director of 487 nursing. A licensed nurse, licensed speech or occupational therapist, or a registered dietitian must conduct training of 488 489 dining and hospitality attendants. A person employed by a 490 facility as a dining and hospitality attendant must perform 491 tasks under the direct supervision of a licensed nurse. 492 (19) Report to the agency any filing for bankruptcy 493 protection by the facility or its parent corporation,

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494 divestiture or spin-off of its assets, or corporate 495 reorganization within 30 days after the completion of such 496 activity.

(20) Maintain general and professional liability insurance coverage that is in force at all times. In lieu of general and professional liability insurance coverage, a state-designated teaching nursing home and its affiliated assisted living facilities created under s. 430.80 may demonstrate proof of financial responsibility as provided in s. 430.80(3)(h).

503 (21) Maintain in the medical record for each resident a 504 daily chart of certified nursing assistant services provided to 505 the resident. The certified nursing assistant who is caring for 506 the resident must complete this record by the end of his or her 507 shift. This record must indicate assistance with activities of 508 daily living, assistance with eating, and assistance with 509 drinking, and must record each offering of nutrition and 510 hydration for those residents whose plan of care or assessment 511 indicates a risk for malnutrition or dehydration.

512 (22) Before November 30 of each year, subject to the 513 availability of an adequate supply of the necessary vaccine, 514 provide for immunizations against influenza viruses to all its 515 consenting residents in accordance with the recommendations of 516 the United States Centers for Disease Control and Prevention, subject to exemptions for medical contraindications and 517 518 religious or personal beliefs. Subject to these exemptions, any 519 consenting person who becomes a resident of the facility after 520 November 30 but before March 31 of the following year must be 521 immunized within 5 working days after becoming a resident. 522 Immunization shall not be provided to any resident who provides

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523 documentation that he or she has been immunized as required by 524 this subsection. This subsection does not prohibit a resident 525 from receiving the immunization from his or her personal 526 physician if he or she so chooses. A resident who chooses to 527 receive the immunization from his or her personal physician 528 shall provide proof of immunization to the facility. The agency 529 may adopt and enforce any rules necessary to comply with or 530 implement this subsection.

(23) Assess all residents for eligibility for pneumococcal 531 532 polysaccharide vaccination (PPV) and vaccinate residents when 533 indicated within 60 days after the effective date of this act in 534 accordance with the recommendations of the United States Centers for Disease Control and Prevention, subject to exemptions for 535 536 medical contraindications and religious or personal beliefs. 537 Residents admitted after the effective date of this act shall be 538 assessed within 5 working days of admission and, when indicated, 539 vaccinated within 60 days in accordance with the recommendations 540 of the United States Centers for Disease Control and Prevention, 541 subject to exemptions for medical contraindications and 542 religious or personal beliefs. Immunization shall not be 543 provided to any resident who provides documentation that he or 544 she has been immunized as required by this subsection. This 545 subsection does not prohibit a resident from receiving the 546 immunization from his or her personal physician if he or she so 547 chooses. A resident who chooses to receive the immunization from 548 his or her personal physician shall provide proof of 549 immunization to the facility. The agency may adopt and enforce 550 any rules necessary to comply with or implement this subsection. 551 (24) Annually encourage and promote to its employees the

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552	benefits associated with immunizations against influenza viruses
553	in accordance with the recommendations of the United States
554	Centers for Disease Control and Prevention. The agency may adopt
555	and enforce any rules necessary to comply with or implement this
556	subsection.
557	
558	Facilities that have been awarded a Gold Seal under the program
559	established in s. 400.235 may develop a plan to provide
560	certified nursing assistant training as prescribed by federal
561	regulations and state rules and may apply to the agency for
562	approval of their program.
563	Section 12. Subsection (3) of section 400.19, Florida
564	Statutes, is amended to read:
565	400.19 Right of entry and inspection
566	(3) The agency shall every 15 months conduct at least one
567	unannounced inspection to determine compliance by the licensee
568	with statutes, with federal requirements, and with rules adopted
569	promulgated under the provisions of those statutes <u>and federal</u>
570	requirements, governing minimum standards of construction,
571	quality and adequacy of care, and rights of residents. The
572	survey shall be conducted every 6 months for the next 2-year
573	period if the facility has been cited for a class I deficiency,
574	has been cited for two or more class II deficiencies arising
575	from separate surveys or investigations within a 60-day period,
576	or has had three or more substantiated complaints within a 6-
577	month period, each resulting in at least one class I or class II
578	deficiency. In addition to any other fees or fines in this part,
579	the agency shall assess a fine for each facility that is subject
580	to the 6-month survey cycle. The fine for the 2-year period

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21-01558-09 20091562 581 shall be \$6,000, one-half to be paid at the completion of each 582 survey. The agency may adjust this fine by the change in the 583 Consumer Price Index, based on the 12 months immediately 584 preceding the increase, to cover the cost of the additional 585 surveys. The agency shall verify through subsequent inspection 586 that any deficiency identified during inspection is corrected. 587 However, the agency may verify the correction of a class III or 588 class IV deficiency unrelated to resident rights or resident care without reinspecting the facility if adequate written 589 590 documentation has been received from the facility, which 591 provides assurance that the deficiency has been corrected. The 592 giving or causing to be given of advance notice of such 593 unannounced inspections by an employee of the agency to any 594 unauthorized person shall constitute cause for suspension of not 595 fewer than 5 working days according to the provisions of chapter 596 110.

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Section 13. Section 400.191, Florida Statutes, is repealed.

598Section 14. Subsection (1) of section 400.195, Florida599Statutes, is amended to read:

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400.195 Agency reporting requirements.-

(1) For the period beginning June 30, 2001, and ending June 601 602 30, 2005, the Agency for Health Care Administration shall provide a report to the Governor, the President of the Senate, 603 604 and the Speaker of the House of Representatives with respect to 605 nursing homes. The first report shall be submitted no later than 606 December 30, 2002, and subsequent reports shall be submitted 607 every 6 months thereafter. The report shall identify facilities 608 based on their ownership characteristics, size, business 609 structure, for-profit or not-for-profit status, and any other

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21-01558-09 20091562 610 characteristics the agency determines useful in analyzing the varied segments of the nursing home industry and shall report: 611 612 (a) The number of notices of intent to litigate received by 613 each facility each month. 614 (b) The number of complaints on behalf of a resident or 615 resident legal representative that were filed with the clerk of 616 the court each month. 617 (c) The month in which the injury which is the basis for 618 the suit occurred or was discovered or, if unavailable, the dates of residency of the resident involved, beginning with the 619 date of initial admission and latest discharge date. 620 621 (d) Information regarding deficiencies cited, including 622 information used to develop the Nursing Home Guide WATCH LIST 623 pursuant to s. 400.191, and applicable rules, a summary of data 624 generated on nursing homes by Centers for Medicare and Medicaid 625 Services Nursing Home Quality Information Project, and 626 information collected pursuant to s. 400.147(9), relating to 627 litigation. Section 15. Subsections (2), (7), and (8) of section 628 629 400.23, Florida Statutes, are amended to read: 630 400.23 Rules; evaluation and deficiencies; licensure 631 status.-632 (2) Pursuant to the intention of the Legislature, the 633 agency, in consultation with the Department of Health and the 634 Department of Elderly Affairs, shall adopt and enforce rules to 635 implement this part and part II of chapter 408, which shall 636 include reasonable and fair criteria in relation to: 637 (a) The location of the facility and housing conditions 638 that will ensure the health, safety, and comfort of residents,

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21-01558-09 20091562 639 including an adequate call system. In making such rules, the 640 agency shall be guided by criteria recommended by nationally 641 recognized reputable professional groups and associations with 642 knowledge of such subject matters. The agency shall update or 643 revise such criteria as the need arises. The agency may require 644 alterations to a building if it determines that an existing condition constitutes a distinct hazard to life, health, or 645 646 safety. In performing any inspections of facilities authorized 647 by this part or part II of chapter 408, the agency may enforce 648 the special-occupancy provisions of the Florida Building Code 649 and the Florida Fire Prevention Code which apply to nursing 650 homes. Residents or their representatives shall be able to 651 request a change in the placement of the bed in their room, 652 provided that at admission they are presented with a room that 653 meets requirements of the Florida Building Code. The location of 654 a bed may be changed if the requested placement does not 655 infringe on the resident's roommate or interfere with the 656 resident's care or safety as determined by the care planning 657 team in accordance with facility policies and procedures. In 658 addition, the bed placement may not be used as a restraint. Each 659 facility shall maintain a log of resident rooms with beds that 660 are not in strict compliance with the Florida Building Code in 661 order for such log to be used by surveyors and nurse monitors 662 during inspections and visits. A resident or resident 663 representative who requests that a bed be moved shall sign a 664 statement indicating that he or she understands the room will 665 not be in compliance with the Florida Building Code, but they 666 would prefer to exercise their right to self-determination. The 667 statement must be retained as part of the resident's care plan.

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21-01558-09 20091562 668 Any facility that offers this option must submit a letter signed 669 by the nursing home administrator of record to the agency 670 notifying it of this practice with a copy of the policies and 671 procedures of the facility. The agency is directed to provide 672 assistance to the Florida Building Commission in updating the 673 construction standards of the code relative to nursing homes. (b) The number and qualifications of all personnel, 674 675 including management, medical, nursing, and other professional

676 personnel, and nursing assistants, orderlies, and support 677 personnel, having responsibility for any part of the care given 678 residents.

(c) All sanitary conditions within the facility and its
surroundings, including water supply, sewage disposal, food
handling, and general hygiene which will ensure the health and
comfort of residents.

(d) The equipment essential to the health and welfare ofthe residents.

685

(e) A uniform accounting system.

(f) The care, treatment, and maintenance of residents and measurement of the quality and adequacy thereof, based on rules developed under this chapter and the Omnibus Budget Reconciliation Act of 1987 (Pub. L. No. 100-203) (December 22, 1987), Title IV (Medicare, Medicaid, and Other Health-Related Programs), Subtitle C (Nursing Home Reform), as amended.

(g) The preparation and annual update of a comprehensive
emergency management plan. The agency shall adopt rules
establishing minimum criteria for the plan after consultation
with the Department of Community Affairs. At a minimum, the
rules must provide for plan components that address emergency

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713 (h) The availability, distribution, and posting of reports 714 and records pursuant to s. 400.191 and the Gold Seal Program 715 pursuant to s. 400.235.

716 (7) The agency shall, at least every 15 months, evaluate 717 all nursing home facilities and make a determination as to the 718 degree of compliance by each licensee with the established rules 719 adopted under this part as a basis for assigning a licensure 720 status to that facility. The agency shall base its evaluation on 721 the most recent inspection report, taking into consideration 722 findings from other official reports, surveys, interviews, 723 investigations, and inspections. In addition to license 724 categories authorized under part II of chapter 408, the agency 725 shall assign a licensure status of standard or conditional to

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726	each nursing home.
27	(a) A standard licensure status means that a facility <u>does</u>
728	not have any has no class I or class II deficiencies and has
729	corrected all class III deficiencies within the time established
730	by the agency.
731	(b) A conditional licensure status means that a facility $_{ au}$
732	due to the presence of one or more class I or class II
733	deficiencies, or class III deficiencies not corrected within the
734	time established by the agency, is not in substantial compliance
735	at the time of the survey with criteria established under this
736	part or with rules adopted by the agency. If the facility <u>does</u>
737	not have any has no class I, class II, or class III deficiencies
738	at the time of the followup survey, a standard licensure status
739	may be assigned.
740	(c) In evaluating the overall quality of care and services
741	and determining whether the facility will receive a conditional
742	or standard license, the agency shall consider the needs and
743	limitations of residents in the facility and the results of
744	interviews and surveys of a representative sampling of
745	residents, families of residents, ombudsman council members in
746	the planning and service area in which the facility is located,
747	guardians of residents, and staff of the nursing home facility.
748	(d) The current licensure status of each facility must be
749	indicated in bold print on the face of the license. A list of
750	the deficiencies of the facility shall be posted in a prominent
751	place that is in clear and unobstructed public view at or near
752	the place where residents are being admitted to that facility.
753	Licensees receiving a conditional licensure status for a
754	facility shall prepare, within 10 working days after receiving

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CODING: Words stricken are deletions; words underlined are additions.

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20091562 21-01558-09 755 notice of deficiencies, a plan for correction of all 756 deficiencies and shall submit the plan to the agency for 757 approval. 758 (e) The agency shall adopt rules that: 759 1. Establish uniform procedures for the evaluation of 760 facilities. 761 2. Provide criteria in the areas referenced in paragraph 762 (C). 763 3. Address other areas necessary for carrying out the 764 intent of this section. 765 (8) The agency shall adopt rules pursuant to this part and 766 part II of chapter 408 to provide that, when the criteria 767 established under subsection (2) are not met, such deficiencies 768 shall be classified according to the nature and the scope of the 769 deficiency. The scope shall be cited as isolated, patterned, or 770 widespread. An isolated deficiency is a deficiency affecting one 771 or a very limited number of residents, or involving one or a 772 very limited number of staff, or a situation that occurred only 773 occasionally or in a very limited number of locations. A 774 patterned deficiency is a deficiency where more than a very 775 limited number of residents are affected, or more than a very 776 limited number of staff are involved, or the situation has 777 occurred in several locations, or the same resident or residents 778 have been affected by repeated occurrences of the same deficient 779 practice but the effect of the deficient practice is not found 780 to be pervasive throughout the facility. A widespread deficiency 781 is a deficiency in which the problems causing the deficiency are 782 pervasive in the facility or represent systemic failure that has 783 affected or has the potential to affect a large portion of the

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21-01558-09 20091562 784 facility's residents. The agency shall indicate the level of 785 seriousness of the deficiency classification on the face of the 786 notice of deficiencies in accordance with s. 7400E1 of the State 787 Operations Manual published by the Centers for Medicare and 788 Medicaid Services. as follows: 789 (a) A class I deficiency is a deficiency that the agency 790 determines presents a situation in which immediate corrective 791 action is necessary because the facility's noncompliance has 792 caused, or is likely to cause, serious injury, harm, impairment, 793 or death to a resident receiving care in a facility. The 794 condition or practice constituting a class I violation shall be 795 abated or eliminated immediately, unless a fixed period of time, 796 as determined by the agency, is required for correction. A class 797 I deficiency is subject to a civil penalty of \$10,000 for an 798 isolated deficiency, \$12,500 for a patterned deficiency, and 799 \$15,000 for a widespread deficiency. The fine amount shall be 800 doubled for each deficiency if the facility was previously cited 801 for one or more class I or class II deficiencies during the last 802 licensure inspection or any inspection or complaint 803 investigation since the last licensure inspection. A fine must 804 be levied notwithstanding the correction of the deficiency. (b) A class II deficiency is a deficiency that the agency 805 806 determines has compromised the resident's ability to maintain or 807 reach his or her highest practicable physical, mental, and 808 psychosocial well-being, as defined by an accurate and 809 comprehensive resident assessment, plan of care, and provision 810 of services. A class II deficiency is subject to a civil penalty 811 of \$2,500 for an isolated deficiency, \$5,000 for a patterned 812 deficiency, and \$7,500 for a widespread deficiency. The fine

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813	
814	previously cited for one or more class I or class II
815	deficiencies during the last licensure inspection or any
816	inspection or complaint investigation since the last licensure
817	inspection. A fine shall be levied notwithstanding the
818	correction of the deficiency.
819	(c) A class III deficiency is a deficiency that the agency
820	determines will result in no more than minimal physical, mental,
821	or psychosocial discomfort to the resident or has the potential
822	to compromise the resident's ability to maintain or reach his or
823	her highest practical physical, mental, or psychosocial well-
824	being, as defined by an accurate and comprehensive resident
825	assessment, plan of care, and provision of services. A class III
826	deficiency is subject to a civil penalty of \$1,000 for an
827	isolated deficiency, \$2,000 for a patterned deficiency, and
828	\$3,000 for a widespread deficiency. The fine amount shall be
829	doubled for each deficiency if the facility was previously cited
830	for one or more class I or class II deficiencies during the last
831	licensure inspection or any inspection or complaint
832	investigation since the last licensure inspection. A citation
833	for a class III deficiency must specify the time within which
834	the deficiency is required to be corrected. If a class III
835	deficiency is corrected within the time specified, a civil
836	penalty may not be imposed.
837	(d) A class IV deficiency is a deficiency that the agency
838	determines has the potential for causing no more than a minor
839	negative impact on the resident. If the class IV deficiency is

840 isolated, no plan of correction is required.

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Section 16. Section 400.235, Florida Statutes, is repealed.

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21-01558-09 20091562 842 Section 17. Subsection (1) of section 408.035, Florida 843 Statutes, is amended to read: 408.035 Review criteria.-844 845 (1) The agency shall determine the reviewability of 846 applications and shall review applications for certificate-of-847 need determinations for health care facilities and health 848 services in context with the following criteria, except for 849 general hospitals as defined in s. 395.002: 850 (a) The need for the health care facilities and health 851 services being proposed. 852 (b) The availability, quality of care, accessibility, and 853 extent of utilization of existing health care facilities and 854 health services in the service district of the applicant. 855 (c) The ability of the applicant to provide quality of care 856 and the applicant's record of providing quality of care. 857 (d) The availability of resources, including health 858 personnel, management personnel, and funds for capital and 859 operating expenditures, for project accomplishment and 860 operation. 861 (e) The extent to which the proposed services will enhance access to health care for residents of the service district. 862 863 (f) The immediate and long-term financial feasibility of 864 the proposal. 865 (g) The extent to which the proposal will foster 866 competition that promotes quality and cost-effectiveness. 867 (h) The costs and methods of the proposed construction, 868 including the costs and methods of energy provision and the 869 availability of alternative, less costly, or more effective 870 methods of construction.

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20091562 21-01558-09 871 (i) The applicant's past and proposed provision of health 872 care services to Medicaid patients and the medically indigent. 873 (j) The applicant's designation as a Cold Seal Program 874 nursing facility pursuant to s. 400.235, when the applicant is 875 requesting additional nursing home beds at that facility. 876 Section 18. Paragraph (d) of subsection (15) of section 877 409.912, Florida Statutes, is repealed. 878 Section 19. Section 633.081, Florida Statutes, is amended 879 to read: 880 633.081 Inspection of buildings and equipment; orders; 881 firesafety inspection training requirements; certification; 882 disciplinary action.-The State Fire Marshal and her or his 883 agents shall, at any reasonable hour, when the department has 884 reasonable cause to believe that a violation of this chapter or 885 s. 509.215, or a rule promulgated thereunder, or a minimum 886 firesafety code adopted by a local authority, may exist, inspect 887 any and all buildings and structures which are subject to the requirements of this chapter or s. 509.215 and rules promulgated 888 889 thereunder. The authority to inspect shall extend to all 890 equipment, vehicles, and chemicals which are located within the premises of any such building or structure. Nursing home 891 892 facilities that are licensed under part II of chapter 400 and 893 inspected by the Agency for Health Care Administration as part 894 of state licensing requirements and federal certification 895 requirements are exempt from inspection by the State Fire 896 Marshal and her or his agents if the agency's inspection 897 satisfies inspection requirements of the State Fire Marshal. 898 (1) Each county, municipality, and special district that 899 has firesafety enforcement responsibilities shall employ or

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900	contract with a firesafety inspector. The firesafety inspector
901	must conduct all firesafety inspections that are required by
902	law. The governing body of a county, municipality, or special
903	district that has firesafety enforcement responsibilities may
904	provide a schedule of fees to pay only the costs of inspections
905	conducted pursuant to this subsection and related administrative
906	expenses. Two or more counties, municipalities, or special
907	districts that have firesafety enforcement responsibilities may
908	jointly employ or contract with a firesafety inspector.
909	(2) Every firesafety inspection conducted pursuant to state
910	or local firesafety requirements shall be by a person certified
911	as having met the inspection training requirements set by the
912	State Fire Marshal. Such person shall:
913	(a) Be a high school graduate or the equivalent as
914	determined by the department;
915	(b) Not have been found guilty of, or having pleaded guilty
916	or nolo contendere to, a felony or a crime punishable by
917	imprisonment of 1 year or more under the law of the United
918	States, or of any state thereof, which involves moral turpitude,
919	without regard to whether a judgment of conviction has been
920	entered by the court having jurisdiction of such cases;
921	(c) Have her or his fingerprints on file with the
922	department or with an agency designated by the department;
923	(d) Have good moral character as determined by the
924	department;
925	(e) Be at least 18 years of age;
926	(f) Have satisfactorily completed the firesafety inspector
927	certification examination as prescribed by the department; and
928	(g)1. Have satisfactorily completed, as determined by the

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21-01558-09 20091562_ 929 department, a firesafety inspector training program of not less 930 than 200 hours established by the department and administered by 931 agencies and institutions approved by the department for the 932 purpose of providing basic certification training for firesafety 933 inspectors; or

934 2. Have received in another state training which is 935 determined by the department to be at least equivalent to that 936 required by the department for approved firesafety inspector 937 education and training programs in this state.

938 (3) Each special state firesafety inspection which is 939 required by law and is conducted by or on behalf of an agency of 940 the state must be performed by an individual who has met the 941 provision of subsection (2), except that the duration of the 942 training program shall not exceed 120 hours of specific training 943 for the type of property that such special state firesafety 944 inspectors are assigned to inspect.

945 (4) A firefighter certified pursuant to s. 633.35 may conduct firesafety inspections, under the supervision of a 946 certified firesafety inspector, while on duty as a member of a 947 948 fire department company conducting inservice firesafety inspections without being certified as a firesafety inspector, 949 950 if such firefighter has satisfactorily completed an inservice 951 fire department company inspector training program of at least 952 24 hours' duration as provided by rule of the department.

953 (5) Every firesafety inspector or special state firesafety 954 inspector certificate is valid for a period of 3 years from the 955 date of issuance. Renewal of certification shall be subject to 956 the affected person's completing proper application for renewal 957 and meeting all of the requirements for renewal as established

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21-01558-09 20091562 958 under this chapter or by rule promulgated thereunder, which 959 shall include completion of at least 40 hours during the 960 preceding 3-year period of continuing education as required by 961 the rule of the department or, in lieu thereof, successful 962 passage of an examination as established by the department. 963 (6) The State Fire Marshal may deny, refuse to renew, 964 suspend, or revoke the certificate of a firesafety inspector or 965 special state firesafety inspector if it finds that any of the 966 following grounds exist: 967 (a) Any cause for which issuance of a certificate could 968 have been refused had it then existed and been known to the 969 State Fire Marshal. 970 (b) Violation of this chapter or any rule or order of the 971 State Fire Marshal. 972 (c) Falsification of records relating to the certificate. 973 (d) Having been found guilty of or having pleaded guilty or 974 nolo contendere to a felony, whether or not a judgment of 975 conviction has been entered. (e) Failure to meet any of the renewal requirements. 976 977 (f) Having been convicted of a crime in any jurisdiction 978 which directly relates to the practice of fire code inspection, 979 plan review, or administration. 980 (g) Making or filing a report or record that the certificateholder knows to be false, or knowingly inducing 981 982 another to file a false report or record, or knowingly failing 983 to file a report or record required by state or local law, or 984 knowingly impeding or obstructing such filing, or knowingly 985 inducing another person to impede or obstruct such filing. 986 (h) Failing to properly enforce applicable fire codes or

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987	permit requirements within this state which the
988	certificateholder knows are applicable by committing willful
989	misconduct, gross negligence, gross misconduct, repeated
990	negligence, or negligence resulting in a significant danger to
991	life or property.
992	(i) Accepting labor, services, or materials at no charge or
993	at a noncompetitive rate from any person who performs work that
994	is under the enforcement authority of the certificateholder and
995	who is not an immediate family member of the certificateholder.
996	For the purpose of this paragraph, the term "immediate family
997	member" means a spouse, child, parent, sibling, grandparent,
998	aunt, uncle, or first cousin of the person or the person's
999	spouse or any person who resides in the primary residence of the
1000	certificateholder.
1001	(7) The department shall provide by rule for the
1002	certification of firesafety inspectors.
1003	Section 20. This act shall take effect July 1, 2009.

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