

By Senator Harrell

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1 A bill to be entitled
2 An act relating to assisted living facilities;
3 amending s. 429.11, F.S.; updating obsolete language;
4 amending s. 429.19, F.S.; clarifying that specified
5 provisions of law do not apply to assisted living
6 facilities and prohibiting the Agency for Health Care
7 Administration from citing facilities or imposing
8 fines on such facilities under those provisions;
9 amending s. 429.23, F.S.; encouraging facilities to
10 take certain measures to provide for the general
11 security of residents, staff, and the facility;
12 amending s. 429.255, F.S.; clarifying that a resident
13 and specified persons may contract with a third party
14 for services under certain circumstances; amending s.
15 429.26, F.S.; requiring an owner's or administrator's
16 determination of an individual's appropriateness of
17 admission to include a medical examination and to
18 follow specified guidelines; defining the term
19 "bedridden"; authorizing an advanced practice
20 registered nurse to provide an initial examination of
21 such individuals; requiring information from the
22 medical examination to be signed and recorded on a
23 certain form; requiring a medical examination form
24 including specified information to be provided by the
25 agency; removing provisions related to the placement
26 of an individual by the Department of Elderly Affairs;
27 requiring a facility to notify the resident's
28 representative or designee when a resident exhibits
29 signs of dementia or cognitive impairment and an

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30 underlying condition is determined to exist which
31 requires treatment; removing the requirement that a
32 facility arrange for the provision of health care
33 services to treat such a condition; removing a
34 provision relating to the continued residency of
35 terminally ill patients and residents who require 24-
36 hour nursing services; amending s. 429.28, F.S.;
37 expanding the residents' bill of rights to include
38 compliance with certain firesafety standards,
39 environmental health and safety practices, and
40 security procedures; amending s. 429.41, F.S.;
41 revising legislative intent; removing the requirement
42 that the Department of Elderly Affairs, in
43 consultation with the agency, the Department of
44 Children and Families, and the Department of Health
45 adopt certain rules; authorizing the Department of
46 Elderly Affairs, in consultation with the agency, the
47 Department of Children and Families, and the
48 Department of Health to adopt certain rules that
49 include specified standards; removing provisions
50 relating to firesafety standards and inspections which
51 are relocated to s. 429.435, F.S.; removing a
52 provision requiring the Department of Elderly Affairs
53 to submit a copy of proposed rules to the Legislature;
54 requiring rather than authorizing the agency to use a
55 biennial standard licensure inspection; creating s.
56 429.435, F.S.; relocating existing provisions relating
57 to firesafety standards and inspections; amending s.
58 429.52, F.S.; requiring the Department of Elderly

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59 Affairs to establish core training requirements for
60 facility administrators; revising continuing education
61 and training requirements for certain facility staff;
62 removing the authority of the Department of Elderly
63 Affairs to require, provide, or cause to be provided,
64 training for staff in a facility; providing an
65 effective date.

66
67 Be It Enacted by the Legislature of the State of Florida:

68
69 Section 1. Subsection (7) of section 429.11, Florida
70 Statutes, is amended to read:

71 429.11 Initial application for license; provisional
72 license.-

73 (7) A county or municipality may not issue a business tax
74 receipt ~~an occupational license~~ that is being obtained for the
75 purpose of operating a facility regulated under this part
76 without first ascertaining that the applicant has been licensed
77 to operate such facility at the specified location or locations
78 by the agency. The agency shall furnish to local agencies
79 responsible for issuing business tax receipts ~~occupational~~
80 ~~licenses~~ sufficient instruction for making such determinations.

81 Section 2. Subsection (1) of section 429.19, Florida
82 Statutes, is amended to read:

83 429.19 Violations; imposition of administrative fines;
84 grounds.-

85 (1) In addition to the requirements of part II of chapter
86 408, the agency shall impose an administrative fine in the
87 manner provided in chapter 120 for the violation of any

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88 provision of this part, part II of chapter 408, and applicable
89 rules by an assisted living facility, for the actions of any
90 person subject to level 2 background screening under s. 408.809,
91 for the actions of any facility employee, or for an intentional
92 or negligent act seriously affecting the health, safety, or
93 welfare of a resident of the facility. Parts II, III, and IV of
94 chapter 400 are not applicable to assisted living facilities,
95 and the agency may not cite a facility for a violation of those
96 parts or impose a fine for any such violation.

97 Section 3. Present subsection (10) of section 429.23,
98 Florida Statutes, is redesignated as subsection (11), and a new
99 subsection (10) is added to that section, to read:

100 429.23 Internal risk management and quality assurance
101 program; adverse incidents and reporting requirements.—

102 (10) Facilities are encouraged to use safety devices,
103 equipment, security measures, wander management, care sensing,
104 and staff risk management to provide for the general security of
105 residents, staff, and the facility.

106 Section 4. Paragraph (a) of subsection (1) of section
107 429.255, Florida Statutes, is amended to read:

108 429.255 Use of personnel; emergency care.—

109 (1) (a) Persons under contract to the facility, facility
110 staff, or volunteers, who are licensed under ~~according to~~ part I
111 of chapter 464, or those persons exempt under s. 464.022(1), and
112 others as defined by rule, may administer medications to
113 residents, take residents' vital signs, manage individual weekly
114 pill organizers for residents who self-administer medication,
115 give prepackaged enemas ordered by a physician, observe
116 residents, document observations on the appropriate resident's

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117 record, and report observations to the resident's physician, ~~and~~
 118 ~~contract or allow residents~~. A resident or a resident's
 119 representative, designee, surrogate, guardian, or attorney in
 120 fact may ~~to~~ contract with a third party for services, provided
 121 that the resident meets ~~residents meet~~ the criteria for
 122 appropriate placement as defined in s. 429.26. Nursing
 123 assistants certified pursuant to part II of chapter 464 may take
 124 residents' vital signs as directed by a licensed nurse or
 125 physician.

126 Section 5. Section 429.26, Florida Statutes, is amended to
 127 read:

128 429.26 Appropriateness of placements; examinations of
 129 residents.—

130 (1) The owner or administrator of a facility is responsible
 131 for determining the appropriateness of admission of an
 132 individual to the facility and for determining the continued
 133 appropriateness of residence of an individual in the facility. A
 134 determination must ~~shall~~ be based upon the owner's or
 135 administrator's evaluation ~~an assessment~~ of the strengths,
 136 needs, and preferences of the resident; a medical examination;
 137 the care and services offered or arranged for by the facility in
 138 accordance with facility policy; and any limitations in law or
 139 rule related to admission criteria or continued residency for
 140 the type of license held by the facility under this part. All of
 141 the following guidelines apply to the determination of
 142 appropriateness for residency and continued residency of an
 143 individual in a facility:

144 (a) A facility may admit or retain a resident who receives
 145 a health care service or treatment that is designed to be

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146 provided within a private residential setting if all
147 requirements for providing that service or treatment are met by
148 the facility or a third party.

149 (b) A facility may admit or retain a resident who requires
150 the use of safety and assistive devices for performing the
151 activities of daily living; for transfer, such as sit-to-stand
152 lifts; for preventing and addressing falls; and for addressing
153 elopement.

154 (c) A facility may not admit or retain a resident who
155 requires 24-hour nursing supervision except for a resident who
156 is enrolled in hospice services pursuant to part IV of chapter
157 400. An individual receiving hospice services may be admitted or
158 retained in a facility if the arrangement is agreed to by the
159 facility and the resident, additional care is provided by a
160 licensed hospice, and the resident is under the care of a
161 physician who agrees that the physical needs of the resident can
162 be met at the facility.

163 (d) A facility may not admit or retain a resident who is
164 bedridden. For purposes of this section, the term "bedridden"
165 means that the resident is confined to bed because of the
166 inability to ambulate; the inability to transfer to a wheelchair
167 without assistance; or the inability to sit safely in a chair or
168 wheelchair without personal assistance or the assistance of a
169 physical restraint.

170 1. A resident may be retained in a facility if, during
171 residency, the resident is bedridden for no more than 7
172 consecutive days.

173 2. If a facility is licensed to provide extended congregate
174 care, the resident may be retained in a facility if, during

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175 residency, the resident is bedridden for not more than 14
176 consecutive days.

177 3. A resident may be admitted or retained in a facility if
178 the resident meets the guidelines in paragraph (b) and is
179 enrolled in hospice services.

180

181 A resident may not be moved from one facility to another without
182 consultation with and agreement from the resident or, if
183 applicable, the resident's representative or designee or the
184 resident's family, guardian, surrogate, or attorney in fact. In
185 the case of a resident who has been placed by the ~~department or~~
186 ~~the~~ Department of Children and Families, the administrator must
187 notify the appropriate contact person in the ~~applicable~~
188 department.

189 (2) A physician, physician assistant, or advanced practice
190 registered nurse practitioner who is employed by an assisted
191 living facility to provide an initial examination for admission
192 purposes may not have financial interest in the facility.

193 (3) Persons licensed under part I of chapter 464 who are
194 employed by or under contract with a facility shall, on a
195 routine basis or at least monthly, perform a nursing assessment
196 of the residents for whom they are providing nursing services
197 ordered by a physician, except administration of medication, and
198 shall document such assessment, including any substantial
199 changes in a resident's status which may necessitate relocation
200 to a nursing home, hospital, or specialized health care
201 facility. Such records shall be maintained in the facility for
202 inspection by the agency and shall be forwarded to the
203 resident's case manager, if applicable.

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204 (4) ~~If possible,~~ Each resident must ~~shall~~ have been
205 examined by a licensed physician, a licensed physician
206 assistant, or a licensed advanced practice registered nurse
207 ~~practitioner~~ within 60 days before admission to the facility or
208 within 30 days after admission to the facility, except as
209 provided in s. 429.07. The information from the medical
210 examination may be recorded on the practitioner's form or on a
211 form provided by the agency. The signed and completed medical
212 examination form, signed by the practitioner, must ~~report shall~~
213 be submitted to the owner or administrator of the facility, who
214 shall use the information contained therein to assist in the
215 determination of the appropriateness of the resident's admission
216 and continued stay in the facility. The medical examination form
217 becomes ~~report shall become~~ a permanent part of the record of
218 the resident at the facility and shall be made available to the
219 agency during inspection or upon request. An assessment that has
220 been completed through the Comprehensive Assessment and Review
221 for Long-Term Care Services (CARES) Program fulfills the
222 requirements for a medical examination under this subsection and
223 s. 429.07(3)(b)6.

224 (5) The medical examination form provided by the agency
225 must include all of the following information relating to the
226 resident:

227 (a) Height, weight, and known allergies.

228 (b) Significant medical history and diagnoses.

229 (c) Physical or sensory limitations.

230 (d) Cognitive or behavioral status.

231 (e) Nursing, treatment, or therapy service requirements.

232 (f) Whether assistance or total care is needed for the

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233 activities of ambulating, eating, or transferring.

234 (g) Special dietary instructions.

235 (h) The existence of communicable diseases.

236 (i) Bedridden and pressure sore status.

237 (j) Whether the resident needs 24-hour nursing or
238 psychiatric care.

239 (k) A list of current prescribed medications, including,
240 for each such medication, the medication name; dosage;
241 directions for use; route; prescription quantity; and whether
242 the resident may self-administer medications, needs assistance,
243 or needs medication administration ~~Except as provided in s.~~
244 ~~429.07, if a medical examination has not been completed within~~
245 ~~60 days before the admission of the resident to the facility, a~~
246 ~~licensed physician, licensed physician assistant, or licensed~~
247 ~~nurse practitioner shall examine the resident and complete a~~
248 ~~medical examination form provided by the agency within 30 days~~
249 ~~following the admission to the facility to enable the facility~~
250 ~~owner or administrator to determine the appropriateness of the~~
251 ~~admission. The medical examination form shall become a permanent~~
252 ~~part of the record of the resident at the facility and shall be~~
253 ~~made available to the agency during inspection by the agency or~~
254 ~~upon request.~~

255 (6) Any resident accepted in a facility and placed by ~~the~~
256 ~~department or~~ the Department of Children and Families shall have
257 been examined by medical personnel within 30 days before
258 placement in the facility. The examination shall include an
259 assessment of the appropriateness of placement in a facility.
260 The findings of this examination shall be recorded on the
261 examination form provided by the agency. The completed form

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262 shall accompany the resident and shall be submitted to the
263 facility owner or administrator. Additionally, in the case of a
264 mental health resident, the Department of Children and Families
265 must provide documentation that the individual has been assessed
266 by a psychiatrist, clinical psychologist, clinical social
267 worker, or psychiatric nurse, or an individual who is supervised
268 by one of these professionals, and determined to be appropriate
269 to reside in an assisted living facility. The documentation must
270 be in the facility within 30 days after the mental health
271 resident has been admitted to the facility. An evaluation
272 completed upon discharge from a state mental hospital meets the
273 requirements of this subsection related to appropriateness for
274 placement as a mental health resident providing it was completed
275 within 90 days prior to admission to the facility. The
276 ~~applicable~~ Department of Children and Families shall provide to
277 the facility administrator any information about the resident
278 that would help the administrator meet his or her
279 responsibilities under subsection (1). Further, Department of
280 Children and Families personnel shall explain to the facility
281 operator any special needs of the resident and advise the
282 operator whom to call should problems arise. The ~~applicable~~
283 Department of Children and Families shall advise and assist the
284 facility administrator where the special needs of residents who
285 are recipients of optional state supplementation require such
286 assistance.

287 (7) The facility must notify a licensed physician when a
288 resident exhibits signs of dementia or cognitive impairment or
289 has a change of condition in order to rule out the presence of
290 an underlying physiological condition that may be contributing

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291 to such dementia or impairment. The notification must occur
292 within 30 days after the acknowledgment of such signs by
293 facility staff. If an underlying condition is determined to
294 exist, the facility shall notify the resident's representative
295 or designee of the need for health care ~~arrange, with the~~
296 ~~appropriate health care provider, the necessary care and~~
297 services to treat the condition.

298 (8) The Department of Children and Families may require an
299 examination for supplemental security income and optional state
300 supplementation recipients residing in facilities at any time
301 and shall provide the examination whenever a resident's
302 condition requires it. Any facility administrator; personnel of
303 the agency, the department, or the Department of Children and
304 Families; or a representative of the State Long-Term Care
305 Ombudsman Program who believes a resident needs to be evaluated
306 shall notify the resident's case manager, who shall take
307 appropriate action. A report of the examination findings shall
308 be provided to the resident's case manager and the facility
309 administrator to help the administrator meet his or her
310 responsibilities under subsection (1).

311 ~~(9) A terminally ill resident who no longer meets the~~
312 ~~criteria for continued residency may remain in the facility if~~
313 ~~the arrangement is mutually agreeable to the resident and the~~
314 ~~facility; additional care is rendered through a licensed~~
315 ~~hospice, and the resident is under the care of a physician who~~
316 ~~agrees that the physical needs of the resident are being met.~~

317 (9) ~~(10)~~ Facilities licensed to provide extended congregate
318 care services shall promote aging in place by determining
319 appropriateness of continued residency based on a comprehensive

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320 review of the resident's physical and functional status; the
321 ability of the facility, family members, friends, or any other
322 pertinent individuals or agencies to provide the care and
323 services required; and documentation that a written service plan
324 consistent with facility policy has been developed and
325 implemented to ensure that the resident's needs and preferences
326 are addressed.

327 ~~(11) No resident who requires 24-hour nursing supervision,~~
328 ~~except for a resident who is an enrolled hospice patient~~
329 ~~pursuant to part IV of chapter 400, shall be retained in a~~
330 ~~facility licensed under this part.~~

331 Section 6. Paragraphs (a) and (d) of subsection (1) of
332 section 429.28, Florida Statutes, are amended to read:

333 429.28 Resident bill of rights.—

334 (1) No resident of a facility shall be deprived of any
335 civil or legal rights, benefits, or privileges guaranteed by
336 law, the Constitution of the State of Florida, or the
337 Constitution of the United States as a resident of a facility.
338 Every resident of a facility shall have the right to:

339 (a) Live in a safe and decent living environment that meets
340 the requirements of the uniform firesafety standards established
341 under s. 633.206 and the environmental health and safety
342 practices established under ss. 381.006, 381.0072, and 381.0098,
343 and be free from abuse, and neglect, or exploitation as defined
344 in s. 415.102.

345 (d) Unrestricted private communication, including receiving
346 and sending unopened correspondence, access to a telephone, and
347 visiting with any person of his or her choice, at any time
348 between the hours of 9 a.m. and 9 p.m. at a minimum. Visitors

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349 must comply with the facility's security procedures and may not
350 pose a health or safety risk to any residents or staff. Upon
351 request, the facility shall make provisions to extend visiting
352 hours for caregivers and out-of-town guests, and in other
353 similar situations.

354 Section 7. Section 429.41, Florida Statutes, is amended to
355 read:

356 429.41 Rules establishing standards.—

357 (1) It is the intent of the Legislature that rules
358 published and enforced pursuant to this section ~~shall~~ include
359 criteria by which a reasonable and consistent quality of
360 resident care and quality of life may be promoted ~~ensured and~~
361 ~~the results of such resident care may be demonstrated.~~ Such
362 rules ~~shall~~ also must promote ~~ensure~~ a safe and sanitary
363 environment that is residential and noninstitutional in design
364 or nature and that allows for technological advances in the
365 provision of care, safety, and security. It is further intended
366 that reasonable efforts be made to accommodate the needs and
367 preferences of residents to enhance the quality of life in a
368 facility. ~~Uniform firesafety standards for assisted living~~
369 ~~facilities shall be established by the State Fire Marshal~~
370 ~~pursuant to s. 633.206.~~ The agency, in consultation with the
371 department, may adopt rules to administer the requirements of
372 part II of chapter 408. ~~In order to provide safe and sanitary~~
373 ~~facilities and the highest quality of resident care~~
374 ~~accommodating the needs and preferences of residents,~~ The
375 department, in consultation with the agency, the Department of
376 Children and Families, and the Department of Health, may ~~shall~~
377 adopt rules, ~~policies, and procedures~~ to administer this part,

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378 which must include reasonable and fair minimum standards in
379 relation to:

380 (a) The requirements for ~~and~~ maintenance and the sanitary
381 condition of facilities, not in conflict with, or duplicative
382 of, the requirements in chapter 381 or chapter 553 and the rules
383 adopted thereunder, relating to furnishings for residents'
384 bedrooms or sleeping areas, locking devices, linens, laundry
385 services plumbing, heating, cooling, lighting, ventilation,
386 living space, and similar physical plant standards ~~other housing~~
387 ~~conditions~~, which will reasonably promote ~~ensure~~ the health,
388 safety, and welfare ~~comfort~~ of residents suitable to the size of
389 the structure. The rules must clearly delineate the
390 responsibilities of the agency's licensure and survey staff and
391 the county health departments and ensure that inspections are
392 not duplicative. The agency may collect fees for food service
393 inspections conducted by the county health departments and shall
394 transfer such fees to the Department of Health.

395 ~~1. Firesafety evacuation capability determination. An~~
396 ~~evacuation capability evaluation for initial licensure shall be~~
397 ~~conducted within 6 months after the date of licensure.~~

398 ~~2. Firesafety requirements.—~~

399 ~~a. The National Fire Protection Association, Life Safety~~
400 ~~Code, NFPA 101 and 101A, current editions, shall be used in~~
401 ~~determining the uniform firesafety code adopted by the State~~
402 ~~Fire Marshal for assisted living facilities, pursuant to s.~~
403 ~~633.206.~~

404 ~~b. A local government or a utility may charge fees only in~~
405 ~~an amount not to exceed the actual expenses incurred by the~~
406 ~~local government or the utility relating to the installation and~~

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407 ~~maintenance of an automatic fire sprinkler system in a licensed~~
408 ~~assisted living facility structure.~~

409 ~~e. All licensed facilities must have an annual fire~~
410 ~~inspection conducted by the local fire marshal or authority~~
411 ~~having jurisdiction.~~

412 ~~d. An assisted living facility that is issued a building~~
413 ~~permit or certificate of occupancy before July 1, 2016, may at~~
414 ~~its option and after notifying the authority having~~
415 ~~jurisdiction, remain under the provisions of the 1994 and 1995~~
416 ~~editions of the National Fire Protection Association, Life~~
417 ~~Safety Code, NFPA 101, and NFPA 101A. The facility opting to~~
418 ~~remain under such provisions may make repairs, modernizations,~~
419 ~~renovations, or additions to, or rehabilitate, the facility in~~
420 ~~compliance with NFPA 101, 1994 edition, and may utilize the~~
421 ~~alternative approaches to life safety in compliance with NFPA~~
422 ~~101A, 1995 edition. However, a facility for which a building~~
423 ~~permit or certificate of occupancy is issued before July 1,~~
424 ~~2016, that undergoes Level III building alteration or~~
425 ~~rehabilitation, as defined in the Florida Building Code, or~~
426 ~~seeks to utilize features not authorized under the 1994 or 1995~~
427 ~~editions of the Life Safety Code must thereafter comply with all~~
428 ~~aspects of the uniform firesafety standards established under s.~~
429 ~~633.206, and the Florida Fire Prevention Code, in effect for~~
430 ~~assisted living facilities as adopted by the State Fire Marshal.~~

431 ~~3. Resident elopement requirements. Facilities are required~~
432 ~~to conduct a minimum of two resident elopement prevention and~~
433 ~~response drills per year. All administrators and direct care~~
434 ~~staff must participate in the drills which shall include a~~
435 ~~review of procedures to address resident elopement. Facilities~~

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436 ~~must document the implementation of the drills and ensure that~~
437 ~~the drills are conducted in a manner consistent with the~~
438 ~~facility's resident elopement policies and procedures.~~

439 (b) The preparation and annual update of a comprehensive
440 emergency management plan. Such standards must be included in
441 the rules adopted by the department after consultation with the
442 Division of Emergency Management. At a minimum, the rules must
443 provide for plan components that address emergency evacuation
444 transportation; adequate sheltering arrangements; postdisaster
445 activities, including provision of emergency power, food, and
446 water; postdisaster transportation; supplies; staffing;
447 emergency equipment; individual identification of residents and
448 transfer of records; communication with families; and responses
449 to family inquiries. The comprehensive emergency management plan
450 is subject to review and approval by the local emergency
451 management agency. During its review, the local emergency
452 management agency shall ensure that the following agencies, at a
453 minimum, are given the opportunity to review the plan: the
454 Department of Elderly Affairs, the Department of Health, the
455 Agency for Health Care Administration, and the Division of
456 Emergency Management. Also, appropriate volunteer organizations
457 must be given the opportunity to review the plan. The local
458 emergency management agency shall complete its review within 60
459 days and either approve the plan or advise the facility of
460 necessary revisions.

461 (c) The number, training, and qualifications of all
462 personnel having responsibility for the care of residents. The
463 rules must require adequate staff to provide for the safety of
464 all residents. Facilities licensed for 17 or more residents are

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465 required to maintain an alert staff for 24 hours per day.

466 ~~(d) All sanitary conditions within the facility and its~~
467 ~~surroundings which will ensure the health and comfort of~~
468 ~~residents. The rules must clearly delineate the responsibilities~~
469 ~~of the agency's licensure and survey staff, the county health~~
470 ~~departments, and the local authority having jurisdiction over~~
471 ~~firesafety and ensure that inspections are not duplicative. The~~
472 ~~agency may collect fees for food service inspections conducted~~
473 ~~by the county health departments and transfer such fees to the~~
474 ~~Department of Health.~~

475 (d)-(e) Licensure requirements not in conflict with part II
476 of chapter 408 License application and license renewal, transfer
477 of ownership, proper management of resident funds and personal
478 property, surety bonds, resident contracts, refund policies,
479 financial ability to operate, and facility and staff records.

480 ~~(e)-(f) Inspections, complaint investigations, moratoriums,~~
481 ~~classification of deficiencies, levying and enforcement of~~
482 ~~penalties, and use of income from fees and fines.~~

483 ~~(f)-(g) The enforcement of the resident bill of rights~~
484 ~~specified in s. 429.28.~~

485 (g)-(h) The care and maintenance of residents, which must
486 allow for technological advances in the provision of care,
487 safety, and security, including include, but is not limited to:

- 488 1. The supervision of residents;
- 489 2. The provision of personal services;
- 490 3. The provision of, or arrangement for, social and leisure
- 491 activities;
- 492 4. The provision of assistance in making arrangements
- 493 ~~arrangement~~ for appointments and transportation to appropriate

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494 medical, dental, nursing, or mental health services, as needed
 495 by residents;

496 5. The management of medication stored within the facility
 497 and as needed by residents;

498 6. The dietary ~~nutritional~~ needs of residents;

499 7. Resident records, including services provided by the
 500 facility; and

501 8. Internal risk management and quality assurance.

502 (h)~~(i)~~ Facilities holding a limited nursing, extended
 503 congregate care, or limited mental health license.

504 (i)~~(j)~~ The establishment of specific criteria to define
 505 appropriateness of resident admission and continued residency in
 506 a facility holding a standard, limited nursing, extended
 507 congregate care, and limited mental health license.

508 (j)~~(k)~~ The use of physical or chemical restraints. The use
 509 of physical restraints is limited to half-bed rails and other
 510 measures as prescribed and documented by the resident's
 511 physician with the consent of the resident or, if applicable,
 512 the resident's representative or designee or the resident's
 513 surrogate, guardian, or attorney in fact. The use of chemical
 514 restraints is limited to prescribed dosages of medications
 515 authorized by the resident's physician and must be consistent
 516 with the resident's diagnosis. Residents who are receiving
 517 medications that can serve as chemical restraints must be
 518 evaluated by their physician at least annually to assess:

- 519 1. The continued need for the medication.
- 520 2. The level of the medication in the resident's blood.
- 521 3. The need for adjustments in the prescription.

522 (k)~~(l)~~ Resident elopement drill requirements ~~The~~

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523 ~~establishment of specific policies and procedures on resident~~
524 ~~elopement.~~ Facilities shall conduct a minimum of two resident
525 elopement drills each year. All administrators and direct care
526 staff shall participate in the drills, which must include a
527 review of the facility's procedures to address resident
528 elopement. Facilities shall document the drills.

529 (2) In adopting any rules pursuant to this part, the
530 department, in conjunction with the agency, shall make distinct
531 standards for facilities based upon facility size; the types of
532 care provided; the physical and mental capabilities and needs of
533 residents; the type, frequency, and amount of services and care
534 offered; and the staffing characteristics of the facility. Rules
535 developed pursuant to this section may not restrict the use of
536 shared staffing and shared programming in facilities that are
537 part of retirement communities that provide multiple levels of
538 care and otherwise meet the requirements of law and rule. If a
539 continuing care facility licensed under chapter 651 or a
540 retirement community offering multiple levels of care licenses a
541 building or part of a building designated for independent living
542 for assisted living, staffing requirements established in rule
543 apply only to residents who receive personal, limited nursing,
544 or extended congregate care services under this part. Such
545 facilities shall retain a log listing the names and unit number
546 for residents receiving these services. The log must be
547 available to surveyors upon request. ~~Except for uniform~~
548 ~~firesafety standards,~~ The department shall adopt by rule
549 separate and distinct standards for facilities with 16 or fewer
550 beds and for facilities with 17 or more beds. The standards for
551 facilities with 16 or fewer beds must be appropriate for a

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552 noninstitutional residential environment; however, the structure
553 may not be more than two stories in height and all persons who
554 cannot exit the facility unassisted in an emergency must reside
555 on the first floor. The department, in conjunction with the
556 agency, may make other distinctions among types of facilities as
557 necessary to enforce this part. Where appropriate, the agency
558 shall offer alternate solutions for complying with established
559 standards, based on distinctions made by the department and the
560 agency relative to the physical characteristics of facilities
561 and the types of care offered.

562 (3) ~~The department shall submit a copy of proposed rules to~~
563 ~~the Speaker of the House of Representatives, the President of~~
564 ~~the Senate, and appropriate committees of substance for review~~
565 ~~and comment prior to the promulgation thereof.~~ Rules adopted
566 promulgated by the department shall encourage the development of
567 homelike facilities which promote the dignity, individuality,
568 personal strengths, and decisionmaking ability of residents.

569 (4) The agency, in consultation with the department, may
570 waive rules promulgated pursuant to this part in order to
571 demonstrate and evaluate innovative or cost-effective congregate
572 care alternatives which enable individuals to age in place. Such
573 waivers may be granted only in instances where there is
574 reasonable assurance that the health, safety, or welfare of
575 residents will not be endangered. To apply for a waiver, the
576 licensee shall submit to the agency a written description of the
577 concept to be demonstrated, including goals, objectives, and
578 anticipated benefits; the number and types of residents who will
579 be affected, if applicable; a brief description of how the
580 demonstration will be evaluated; and any other information

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581 deemed appropriate by the agency. Any facility granted a waiver
582 shall submit a report of findings to the agency and the
583 department within 12 months. At such time, the agency may renew
584 or revoke the waiver or pursue any regulatory or statutory
585 changes necessary to allow other facilities to adopt the same
586 practices. The department may by rule clarify terms and
587 establish waiver application procedures, criteria for reviewing
588 waiver proposals, and procedures for reporting findings, as
589 necessary to implement this subsection.

590 (5) The agency shall ~~may~~ use an abbreviated biennial
591 standard licensure inspection that consists of a review of key
592 quality-of-care standards in lieu of a full inspection in a
593 facility that has a good record of past performance. However, a
594 full inspection must be conducted in a facility that has a
595 history of class I or class II violations, uncorrected class III
596 violations, a long-term care ombudsman complaint referred to a
597 regulatory agency for further action ~~confirmed ombudsman council~~
598 ~~complaints~~, or confirmed licensure complaints, within the
599 previous licensure period immediately preceding the inspection
600 or if a potentially serious problem is identified during the
601 abbreviated inspection. The agency, ~~in consultation with the~~
602 ~~department~~, shall develop the key quality-of-care standards with
603 ~~input from the State Long Term Care Ombudsman Council and~~
604 ~~representatives of provider groups~~ for incorporation into its
605 rules.

606 Section 8. Section 429.435, Florida Statutes, is created to
607 read:

608 429.435 Uniform firesafety standards.-Pursuant to s.
609 633.206, the State Fire Marshal shall establish uniform

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610 firesafety standards for assisted living facilities.

611 (1) CAPABILITY DETERMINATION.—A firesafety evacuation
612 capability determination shall be made within 6 months after the
613 date of a facility's initial licensure.

614 (2) FIRESAFETY REQUIREMENTS.—

615 (a) The National Fire Protection Association, Life Safety
616 Code, NFPA 101 and 101A, current editions, must be used in
617 determining the uniform firesafety code adopted by the State
618 Fire Marshal for assisted living facilities.

619 (b) A local government or a utility may charge fees only in
620 an amount not to exceed the actual expenses incurred by the
621 local government or the utility relating to the installation and
622 maintenance of an automatic fire sprinkler system in a licensed
623 assisted living facility structure.

624 (c) All licensed facilities must be annually inspected by
625 the local fire marshal or authority having jurisdiction for
626 compliance with this section.

627 (d) An assisted living facility that was issued a building
628 permit or certificate of occupancy before July 1, 2016, at its
629 option and after notifying the authority having jurisdiction,
630 may remain under the provisions of the 1994 and 1995 editions of
631 the National Fire Protection Association, Life Safety Code, NFPA
632 101, and NFPA 101A. The facility opting to remain under those
633 provisions may make repairs, modernizations, renovations, or
634 additions to, or may rehabilitate, the facility in compliance
635 with NFPA 101, 1994 edition, and may utilize the alternative
636 approaches to life safety in compliance with NFPA 101A, 1995
637 edition. However, a facility for which a building permit or
638 certificate of occupancy is issued before July 1, 2016, which

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639 undergoes Level III building alteration or rehabilitation, as
640 defined in the Florida Building Code, or seeks to utilize
641 features not authorized under the 1994 or 1995 editions of the
642 Life Safety Code must thereafter comply with all aspects of the
643 uniform firesafety standards established under s. 633.206, and
644 the Florida Fire Prevention Code, in effect for assisted living
645 facilities as adopted by the State Fire Marshal.

646 Section 9. Section 429.52, Florida Statutes, is amended to
647 read:

648 429.52 Staff training ~~and educational programs~~; core
649 educational requirement.—

650 (1) ~~Effective October 1, 2015,~~ Each new assisted living
651 facility employee who has not previously completed core training
652 must attend a preservice orientation provided by the facility
653 before interacting with residents. The preservice orientation
654 must be at least 2 hours in duration and cover topics that help
655 the employee provide responsible care and respond to the needs
656 of facility residents. Upon completion, the employee and the
657 administrator of the facility must sign a statement that the
658 employee completed the required preservice orientation. The
659 facility must keep the signed statement in the employee's
660 personnel record.

661 (2) Administrators and other assisted living facility staff
662 must meet minimum training ~~and education~~ requirements
663 established by the Department of Elderly Affairs by rule. This
664 training ~~and education~~ is intended to assist facilities to
665 appropriately respond to the needs of residents, to maintain
666 resident care and facility standards, and to meet licensure
667 requirements.

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668 (3) The department shall establish core training
669 requirements for administrators which consist of minimum core
670 training and a competency test. The ~~and a~~ minimum required score
671 for passage to indicate successful completion of the core
672 competency test is 75 percent ~~training and educational~~
673 ~~requirements~~. The competency test must be developed by the
674 department in conjunction with the agency and providers. The
675 required competency test ~~training and education~~ must cover at
676 least the following topics:

677 (a) State law and rules relating to assisted living
678 facilities.

679 (b) Resident rights and identifying and reporting abuse,
680 neglect, and exploitation.

681 (c) Special needs of elderly persons, persons with mental
682 illness, and persons with developmental disabilities and how to
683 meet those needs.

684 (d) Nutrition and food service, including acceptable
685 sanitation practices for preparing, storing, and serving food.

686 (e) Medication management, recordkeeping, and proper
687 techniques for assisting residents with self-administered
688 medication.

689 (f) Firesafety requirements, including fire evacuation
690 drill procedures and other emergency procedures.

691 (g) Care of persons with Alzheimer's disease and related
692 disorders.

693 (4) A ~~new~~ facility administrator must complete the required
694 core training and education, including the competency test,
695 within 90 days after the date of employment as an administrator.
696 Failure to do so is a violation of this part and subjects the

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697 violator to an administrative fine as prescribed in s. 429.19.
698 Administrators licensed in accordance with part II of chapter
699 468 are exempt from this requirement. Other licensed
700 professionals may be exempted, as determined by the department
701 by rule.

702 (5) Administrators are required to participate in
703 continuing education for a minimum of 12 contact hours every 2
704 years.

705 (6) Before ~~Staff involved with the management of~~
706 ~~medications and~~ assisting with the self-administration of
707 medications under s. 429.256, staff must complete a minimum of 6
708 ~~additional~~ hours of training provided by a registered nurse or
709 a ~~licensed pharmacist, or department staff.~~ Two hours of
710 continuing education is required annually thereafter. The
711 department shall establish by rule the minimum requirements of
712 this ~~additional~~ training.

713 (7) Other facility staff shall participate in in-service
714 training relevant to their job duties as specified by rule of
715 the department. Topics covered during the preservice orientation
716 are not required to be repeated during in-service training. A
717 single certificate of completion that covers all required in-
718 service training topics may be issued to a participating staff
719 member if the training is provided in a single training session.

720 (8) If the ~~department or the~~ agency determines that there
721 are problems in a facility which ~~that~~ could be reduced through
722 specific staff training ~~or education~~ beyond that already
723 required under this section, the ~~department or the~~ agency may
724 require, and provide, or cause to be provided, the training ~~or~~
725 ~~education~~ of any personal care staff in the facility.

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726 (9) The department shall adopt rules related to these
727 training requirements, the competency test, necessary
728 procedures, and competency test fees and shall adopt or contract
729 with another entity to develop and administer the competency
730 test. The department must also adopt a curriculum outline to be
731 used by core trainers, ~~which shall be used~~ as the minimum core
732 training content requirements. The department shall consult with
733 representatives of stakeholder associations and agencies in the
734 development of the curriculum outline.

735 (10) The core training required by this section ~~other than~~
736 ~~the preservice orientation~~ must be conducted by persons
737 registered with the department as having the requisite
738 experience and credentials to conduct the training. A person
739 seeking to register as a core trainer must provide the
740 department with proof of completion of the ~~minimum~~ core training
741 ~~education~~ requirements, successful passage of the competency
742 test established under this section, and proof of compliance
743 with the continuing education requirement in subsection (5).

744 (11) A person seeking to register as a core trainer must
745 also:

746 (a) Provide proof of completion of a 4-year degree from an
747 accredited college or university and must have worked in a
748 management position in an assisted living facility for 3 years
749 after being core certified;

750 (b) Have worked in a management position in an assisted
751 living facility for 5 years after being core certified and have
752 1 year of teaching experience as an educator or staff trainer
753 for persons who work in assisted living facilities or other
754 long-term care settings;

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755 (c) Have been previously employed as a core trainer for the
756 department; or

757 (d) Meet other qualification criteria as defined in rule,
758 which the department is authorized to adopt.

759 (12) The department shall adopt rules to establish trainer
760 registration requirements.

761 Section 10. This act shall take effect July 1, 2019.