1	A bill to be entitled
2	An act relating to aging programs; transferring the
3	powers, duties, and functions of the Department of
4	Elderly Affairs relating to hospices, assisted living
5	facilities, adult family-care homes, and adult day
6	care centers to the Agency for Health Care
7	Administration; amending s. 20.41, F.S.; requiring the
8	department to provide certain documents and
9	information to the agency upon request; amending s.
10	20.42, F.S.; establishing that the agency is the lead
11	agency responsible for the regulation of hospices,
12	assisted living facilities, adult family-care homes,
13	and adult day care centers; amending ss. 400.605,
14	400.60501, 400.6095, 400.610, 429.02, 429.17, 429.19,
15	429.23, 429.24, 429.255, 429.256, 429.27, 429.275,
16	429.31, 429.34, 429.41, 429.42, 429.52, 429.54,
17	429.63, 429.67, 429.71, 429.73, 429.75, 429.81,
18	429.929, and 765.110, F.S.; conforming provisions to
19	changes made by the act; providing an effective date.
20	
21	Be It Enacted by the Legislature of the State of Florida:
22	
23	Section 1. All powers, duties, functions, records,
24	personnel, property, salary rate, budget authority, and
25	administrative authority of the Department of Elderly Affairs
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26 relating to hospices, assisted living facilities, adult family-27 care homes, and adult day care centers, and the administrative 28 rules in chapters 58A-2, 58A-5, 58A-6, and 58A-14, Florida 29 Administrative Code, are transferred by a type two transfer, as 30 defined in s. 20.06(2), Florida Statutes, to the Agency for 31 Health Care Administration. 32 Section 2. Subsection (9) is added to section 20.41, 33 Florida Statutes, to read: 34 20.41 Department of Elderly Affairs.-There is created a 35 Department of Elderly Affairs. 36 (9) Upon request, the department shall provide the Agency 37 for Health Care Administration with any documents and 38 information needed for the agency's regulation of hospices, 39 assisted living facilities, adult family-care homes, and adult 40 day care centers. Section 3. Subsection (3) of section 20.42, Florida 41 42 Statutes, is amended to read: 43 20.42 Agency for Health Care Administration.-44 The department shall be the chief health policy and (3) 45 planning entity for the state. The department is responsible for 46 health facility licensure, inspection, and regulatory enforcement; investigation of consumer complaints related to 47 health care facilities and managed care plans; the 48 implementation of the certificate of need program; the operation 49 50 of the Florida Center for Health Information and Transparency; Page 2 of 35

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the administration of the Medicaid program; the administration 51 52 of the contracts with the Florida Healthy Kids Corporation; the 53 certification of health maintenance organizations and prepaid 54 health clinics as set forth in part III of chapter 641; and any 55 other duties prescribed by statute or agreement. The department 56 is the lead agency responsible for the regulation of hospices, assisted living facilities, adult family-care homes, and adult 57 58 day care centers. Section 4. Subsection (1) of section 400.605, Florida 59 60 Statutes, is amended to read: 61 400.605 Administration; forms; fees; rules; inspections; 62 fines.-63 (1)The agency, in consultation with the department, may 64 adopt rules to administer the requirements of part II of chapter 408. The department, in consultation with the agency, shall by 65 rule establish minimum standards and procedures for a hospice 66 67 pursuant to this part. The rules must include: 68 The qualifications of professional and ancillary (a) 69 personnel to ensure the provision of appropriate and adequate 70 hospice care. 71 Standards and procedures for the administrative (b) 72 management of a hospice. 73 (C) Standards for hospice services that ensure the 74 provision of quality patient care. 75 Components of a patient plan of care. (d) Page 3 of 35

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76 (e) Procedures relating to the implementation of advanced77 directives and do-not-resuscitate orders.

(f) Procedures for maintaining and ensuringconfidentiality of patient records.

80 (g) Standards for hospice care provided in freestanding 81 inpatient facilities that are not otherwise licensed medical 82 facilities and in residential care facilities such as nursing 83 homes, assisted living facilities, adult family-care homes, and 84 hospice residential units and facilities.

(h) Components of a comprehensive emergency management plan, developed in consultation with the Department of Health₇ the Department of Elderly Affairs, and the Division of Emergency Management.

89 (i) Standards and procedures relating to the establishment
90 and activities of a quality assurance and utilization review
91 committee.

92 (j) Components and procedures relating to the collection 93 of patient demographic data and other information on the 94 provision of hospice care in this state.

95 Section 5. Section 400.60501, Florida Statutes, is amended 96 to read:

97 400.60501 Outcome measures; adoption of federal quality
98 measures; public reporting; annual report.-

99 (1) No later than December 31, 2019, the department, in
 100 conjunction with the agency, shall adopt the national hospice

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101 outcome measures and survey data in 42 C.F.R. part 418 to 102 determine the quality and effectiveness of hospice care for 103 hospices licensed in the state.

104

(2) The department, in conjunction with The agency, shall:

(a) Make available to the public the national hospice
outcome measures and survey data in a format that is
comprehensible by a layperson and that allows a consumer to
compare such measures of one or more hospices.

109 (b) Develop an annual report that analyzes and evaluates
110 the information collected under this act and any other data
111 collection or reporting provisions of law.

Section 6. Subsection (8) of section 400.6095, Florida Statutes, is amended to read:

114 400.6095 Patient admission; assessment; plan of care; 115 discharge; death.-

The hospice care team may withhold or withdraw 116 (8) 117 cardiopulmonary resuscitation if presented with an order not to 118 resuscitate executed pursuant to s. 401.45. The agency 119 department shall adopt rules providing for the implementation of such orders. Hospice staff shall not be subject to criminal 120 121 prosecution or civil liability, nor be considered to have 122 engaged in negligent or unprofessional conduct, for withholding or withdrawing cardiopulmonary resuscitation pursuant to such an 123 124 order and applicable rules. The absence of an order to 125 resuscitate executed pursuant to s. 401.45 does not preclude a

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126 physician from withholding or withdrawing cardiopulmonary 127 resuscitation as otherwise permitted by law.

128 Section 7. Paragraph (b) of subsection (1) of section 129 400.610, Florida Statutes, is amended to read:

400.610 Administration and management of a hospice.(1) A hospice shall have a clearly defined organized
governing body, consisting of a minimum of seven persons who are
representative of the general population of the community
served. The governing body shall have autonomous authority and

135 responsibility for the operation of the hospice and shall meet 136 at least quarterly. The governing body shall:

137 (b)1. Prepare and maintain a comprehensive emergency management plan that provides for continuing hospice services in 138 139 the event of an emergency that is consistent with local special 140 needs plans. The plan shall include provisions for ensuring continuing care to hospice patients who go to special needs 141 142 shelters. The plan shall include the means by which the hospice 143 provider will continue to provide staff to provide the same type 144 and quantity of services to their patients who evacuate to 145 special needs shelters which were being provided to those 146 patients prior to evacuation. The plan is subject to review and 147 approval by the county health department, except as provided in subparagraph 2. During its review, the county health department 148 shall contact state and local health and medical stakeholders 149 150 when necessary. The county health department shall complete its

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review to ensure that the plan complies with criteria in rules of the <u>agency Department of Elderly Affairs</u> within 90 days after receipt of the plan and shall either approve the plan or advise the hospice of necessary revisions. Hospice providers may establish links to local emergency operations centers to determine a mechanism by which to approach specific areas within a disaster area in order for the provider to reach its clients. A hospice shall demonstrate a good faith effort to comply with the requirements of this paragraph by documenting attempts of staff to follow procedures as outlined in the hospice's comprehensive emergency management plan and to provide continuing care for those hospice clients who have been identified as needing alternative caregiver services in the

164 event of an emergency. 165 2. For any hospice that operates in more than one county, 166 the Department of Health during its review shall contact state 167 and local health and medical stakeholders when necessary. The

169 the plan complies with criteria in rules of the <u>agency</u> 170 Department of Elderly Affairs within 90 days after receipt of 171 the plan and shall approve the plan or advise the hospice of 172 necessary revisions. The Department of Health shall make every 173 effort to avoid imposing differing requirements on a hospice 174 that operates in more than one county as a result of differing 175 or conflicting comprehensive plan requirements of the counties

Department of Health shall complete its review to ensure that

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176 in which the hospice operates.

Section 8. Subsections (13) and (17) of section 429.02,Florida Statutes, are amended to read:

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429.02 Definitions.-When used in this part, the term: (13) "Limited nursing services" means acts that may be performed by a person licensed under part I of chapter 464. Limited nursing services shall be for persons who meet the admission criteria established by the <u>agency</u> department for

184 assisted living facilities, but are and shall not be complex 185 enough to require 24-hour nursing supervision and may include 186 such services as the application and care of routine dressings, 187 and care of casts, braces, and splints.

(17) "Personal services" means direct physical assistance with or supervision of the activities of daily living, the selfadministration of medication, or other similar services <u>that</u> which the <u>agency</u> department may define by rule. The term may not be construed to mean the provision of medical, nursing, dental, or mental health services.

Section 9. Subsection (6) of section 429.17, FloridaStatutes, is amended to read:

196 429.17 Expiration of license; renewal; conditional 197 license.-

(6) The <u>agency</u> department may by rule establish renewal
 procedures, identify forms, and specify documentation necessary
 to administer this section and. The agency, in consultation with

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201 the department, may adopt rules to administer the requirements
202 of part II of chapter 408.

203 Section 10. Subsection (9) of section 429.19, Florida 204 Statutes, is amended to read:

205 429.19 Violations; imposition of administrative fines; 206 grounds.-

207 (9) The agency shall develop and disseminate an annual list of all facilities sanctioned or fined for violations of 208 state standards, the number and class of violations involved, 209 210 the penalties imposed, and the current status of cases. The list shall be disseminated, at no charge, to the Department of 211 212 Elderly Affairs, the Department of Health, the Department of 213 Children and Families, the Agency for Persons with Disabilities, 214 the area agencies on aging, the Florida Statewide Advocacy 215 Council, the State Long-Term Care Ombudsman Program, and state 216 and local ombudsman councils. The Department of Children and 217 Families shall disseminate the list to service providers under 218 contract with to the department who are responsible for 219 referring persons to a facility for residency. The agency may 220 charge a fee commensurate with the cost of printing and postage 221 to other interested parties requesting a copy of this list. This 222 information may be provided electronically or through the agency's Internet site. 223

224 Section 11. Subsection (10) of section 429.23, Florida 225 Statutes, is amended to read:

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226 429.23 Internal risk management and quality assurance 227 program; adverse incidents and reporting requirements.-228 (10)The agency Department of Elderly Affairs may adopt 229 rules necessary to administer this section. 230 Section 12. Subsection (8) of section 429.24, Florida 231 Statutes, is amended to read: 232 429.24 Contracts.-233 The agency department may by rule clarify terms, (8) establish procedures, clarify refund policies and contract 234 235 provisions, and specify documentation as necessary to administer 236 this section. 237 Section 13. Subsections (4) and (5) of section 429.255, 238 Florida Statutes, are amended to read: 239 429.255 Use of personnel; emergency care.-240 Facility staff may withhold or withdraw (4) 241 cardiopulmonary resuscitation or the use of an automated 242 external defibrillator if presented with an order not to 243 resuscitate executed pursuant to s. 401.45. The agency 244 department shall adopt rules providing for the implementation of 245 such orders. Facility staff and facilities may shall not be 246 subject to criminal prosecution or civil liability, nor be 247 considered to have engaged in negligent or unprofessional conduct, for withholding or withdrawing cardiopulmonary 248 resuscitation or use of an automated external defibrillator 249 pursuant to such an order and rules adopted by the agency 250

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251 department. The absence of an order to resuscitate executed 252 pursuant to s. 401.45 does not preclude a physician from 253 withholding or withdrawing cardiopulmonary resuscitation or use 254 of an automated external defibrillator as otherwise permitted by 255 law.

(5) The <u>agency</u> Department of Elderly Affairs may adopt
 rules to implement the provisions of this section relating to
 use of an automated external defibrillator.

259 Section 14. Subsection (6) of section 429.256, Florida 260 Statutes, is amended to read:

261 429.256 Assistance with self-administration of 262 medication.-

(6) The <u>agency</u> department may by rule establish facility
procedures and interpret terms as necessary to implement this
section.

266 Section 15. Subsection (8) of section 429.27, Florida 267 Statutes, is amended to read:

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429.27 Property and personal affairs of residents.-

(8) The <u>agency</u> department may by rule clarify terms and specify procedures and documentation necessary to administer the provisions of this section relating to the proper management of residents' funds and personal property and the execution of surety bonds.

274 Section 16. Subsection (4) of section 429.275, Florida 275 Statutes, is amended to read:

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429.275 Business practice; personnel records; liability insurance.—The assisted living facility shall be administered on a sound financial basis that is consistent with good business practices.

(4) The <u>agency</u> department may by rule clarify terms,
establish requirements for financial records, accounting
procedures, personnel procedures, insurance coverage, and
reporting procedures, and specify documentation as necessary to
implement the requirements of this section.

285 Section 17. Subsection (2) of section 429.31, Florida 286 Statutes, is amended to read:

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298

429.31 Closing of facility; notice; penalty.-

288 Immediately upon the notice by the agency of the (2) voluntary or involuntary termination of such operation, the 289 290 agency shall monitor the transfer of residents to other 291 facilities and ensure that residents' rights are being 292 protected. The agency department, in consultation with the Department of Children and Families, shall specify procedures 293 294 for ensuring that all residents who receive services are 295 appropriately relocated.

296 Section 18. Subsection (1) of section 429.34, Florida 297 Statutes, is amended to read:

429.34 Right of entry and inspection.-

(1) In addition to the requirements of s. 408.811, a duly
 designated officer or employee of the <u>agency</u> department, <u>of</u> the

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301 Department of Children and Families, of the Medicaid Fraud 302 Control Unit of the Office of the Attorney General, or of the 303 state or local fire marshal, or a representative of the State 304 Long-Term Care Ombudsman Program or a member of the state or 305 local long-term care ombudsman council has the right to enter 306 unannounced upon and into the premises of any facility licensed 307 under this part in order to determine the state of compliance 308 with this part, part II of chapter 408, and applicable rules. 309 Data collected by the State Long-Term Care Ombudsman Program, 310 local long-term care ombudsman councils, or the state or local advocacy councils may be used by the agency in investigations 311 312 involving violations of regulatory standards. A person specified 313 in this section who knows or has reasonable cause to suspect 314 that a vulnerable adult has been or is being abused, neglected, 315 or exploited shall immediately report such knowledge or suspicion to the central abuse hotline pursuant to chapter 415. 316 317 Section 19. Section 429.41, Florida Statutes, is amended

318 319 to read:

429.41 Rules establishing standards.-

(1) It is the intent of the Legislature that rules published and enforced pursuant to this section shall include criteria by which a reasonable and consistent quality of resident care and quality of life may be ensured and the results of such resident care may be demonstrated. Such rules shall also ensure a safe and sanitary environment that is residential and

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326 noninstitutional in design or nature. It is further intended 327 that reasonable efforts be made to accommodate the needs and 328 preferences of residents to enhance the quality of life in a 329 facility. Uniform firesafety standards for assisted living 330 facilities shall be established by the State Fire Marshal 331 pursuant to s. 633.206. The agency τ in consultation with the 332 department, may adopt rules to administer the requirements of 333 part II of chapter 408. In order to provide safe and sanitary 334 facilities and the highest quality of resident care 335 accommodating the needs and preferences of residents, the agency 336 department, in consultation with the agency, the Department of 337 Children and Families, and the Department of Health, shall adopt 338 rules, policies, and procedures to administer this part, which 339 must include reasonable and fair minimum standards in relation 340 to:

(a) The requirements for and maintenance of facilities,
not in conflict with chapter 553, relating to plumbing, heating,
cooling, lighting, ventilation, living space, and other housing
conditions, which will ensure the health, safety, and comfort of
residents suitable to the size of the structure.

Firesafety evacuation capability determination.—An
 evacuation capability evaluation for initial licensure shall be
 conducted within 6 months after the date of licensure.

- 349
- 350
- 2. Firesafety requirements.-
- a. The National Fire Protection Association, Life Safety

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351 Code, NFPA 101 and 101A, current editions, shall be used in 352 determining the uniform firesafety code adopted by the State 353 Fire Marshal for assisted living facilities, pursuant to s. 354 633.206.

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

360 c. All licensed facilities must have an annual fire
361 inspection conducted by the local fire marshal or authority
362 having jurisdiction.

d. An assisted living facility that is issued a building 363 364 permit or certificate of occupancy before July 1, 2016, may at 365 its option and after notifying the authority having 366 jurisdiction, remain under the provisions of the 1994 and 1995 367 editions of the National Fire Protection Association, Life Safety Code, NFPA 101, and NFPA 101A. The facility opting to 368 369 remain under such provisions may make repairs, modernizations, 370 renovations, or additions to, or rehabilitate, the facility in 371 compliance with NFPA 101, 1994 edition, and may utilize the 372 alternative approaches to life safety in compliance with NFPA 101A, 1995 edition. However, a facility for which a building 373 374 permit or certificate of occupancy is issued before July 1, 2016, that undergoes Level III building alteration or 375

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376 rehabilitation, as defined in the Florida Building Code, or 377 seeks to utilize features not authorized under the 1994 or 1995 378 editions of the Life Safety Code must thereafter comply with all 379 aspects of the uniform firesafety standards established under s. 380 633.206, and the Florida Fire Prevention Code, in effect for 381 assisted living facilities as adopted by the State Fire Marshal.

382 3. Resident elopement requirements.-Facilities are 383 required to conduct a minimum of two resident elopement 384 prevention and response drills per year. All administrators and 385 direct care staff must participate in the drills, which shall include a review of procedures to address resident elopement. 386 387 Facilities must document the implementation of the drills and ensure that the drills are conducted in a manner consistent with 388 389 the facility's resident elopement policies and procedures.

390 The preparation and annual update of a comprehensive (b) 391 emergency management plan. Such standards must be included in 392 the rules adopted by the agency department after consultation 393 with the Division of Emergency Management. At a minimum, the 394 rules must provide for plan components that address emergency 395 evacuation transportation; adequate sheltering arrangements; 396 postdisaster activities, including provision of emergency power, 397 food, and water; postdisaster transportation; supplies; staffing; emergency equipment; individual identification of 398 residents and transfer of records; communication with families; 399 400 and responses to family inquiries. The comprehensive emergency

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401 management plan is subject to review and approval by the local 402 emergency management agency. During its review, the local 403 emergency management agency shall ensure that the following 404 agencies, at a minimum, are given the opportunity to review the 405 plan: the Department of Elderly Affairs, the Department of 406 Health, the Agency for Health Care Administration, and the 407 Division of Emergency Management. Also, appropriate volunteer 408 organizations must be given the opportunity to review the plan. The local emergency management agency shall complete its review 409 within 60 days and either approve the plan or advise the 410 411 facility of necessary revisions.

(c) The number, training, and qualifications of all personnel having responsibility for the care of residents. The rules must require adequate staff to provide for the safety of all residents. Facilities licensed for 17 or more residents are required to maintain an alert staff for 24 hours per day.

417 (d) All sanitary conditions within the facility and its surroundings which will ensure the health and comfort of 418 419 residents. The rules must clearly delineate the responsibilities 420 of the agency's licensure and survey staff, the county health 421 departments, and the local authority having jurisdiction over 422 firesafety and ensure that inspections are not duplicative. The agency may collect fees for food service inspections conducted 423 424 by the county health departments and transfer such fees to the Department of Health. 425

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450	(j) The establishment of specific criteria to define
449	congregate care, or limited mental health license.
448	(i) Facilities holding a limited nursing, extended
447	8. Internal risk management and quality assurance.
446	7. Resident records; and
445	6. The nutritional needs of residents;
444	5. The management of medication;
443	as needed by residents;
442	appropriate medical, dental, nursing, or mental health services,
441	4. The arrangement for appointments and transportation to
440	leisure activities;
439	3. The provision of, or arrangement for, social and
438	2. The provision of personal services;
437	1. The supervision of residents;
436	include, but is not limited to:
435	(h) The care and maintenance of residents, which must
434	specified in s. 429.28.
433	(g) The enforcement of the resident bill of rights
432	penalties, and use of income from fees and fines.
431	classification of deficiencies, levying and enforcement of
430	(f) Inspections, complaint investigations, moratoriums,
429	financial ability to operate, and facility and staff records.
428	property, surety bonds, resident contracts, refund policies,
427	ownership, proper management of resident funds and personal
426	(e) License application and license renewal, transfer of

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451 appropriateness of resident admission and continued residency in
452 a facility holding a standard, limited nursing, extended
453 congregate care, and limited mental health license.

454 The use of physical or chemical restraints. The use of (k) 455 physical restraints is limited to half-bed rails as prescribed 456 and documented by the resident's physician with the consent of 457 the resident or, if applicable, the resident's representative or 458 designee or the resident's surrogate, guardian, or attorney in fact. The use of chemical restraints is limited to prescribed 459 dosages of medications authorized by the resident's physician 460 461 and must be consistent with the resident's diagnosis. Residents 462 who are receiving medications that can serve as chemical restraints must be evaluated by their physician at least 463 464 annually to assess:

465

1. The continued need for the medication.

466 467 2. The level of the medication in the resident's blood.

3. The need for adjustments in the prescription.

(1) The establishment of specific policies and procedures on resident elopement. Facilities shall conduct a minimum of two resident elopement drills each year. All administrators and direct care staff shall participate in the drills. Facilities shall document the drills.

473 (2) In adopting any rules pursuant to this part, the
474 department, in conjunction with the agency, shall make distinct
475 standards for facilities based upon facility size; the types of

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476 care provided; the physical and mental capabilities and needs of 477 residents; the type, frequency, and amount of services and care 478 offered; and the staffing characteristics of the facility. Rules 479 developed pursuant to this section may not restrict the use of 480 shared staffing and shared programming in facilities that are 481 part of retirement communities that provide multiple levels of 482 care and otherwise meet the requirements of law and rule. If a 483 continuing care facility licensed under chapter 651 or a 484 retirement community offering multiple levels of care licenses a 485 building or part of a building designated for independent living for assisted living, staffing requirements established in rule 486 487 apply only to residents who receive personal, limited nursing, 488 or extended congregate care services under this part. Such 489 facilities shall retain a log listing the names and unit number 490 for residents receiving these services. The log must be 491 available to surveyors upon request. Except for uniform 492 firesafety standards, the agency department shall adopt by rule separate and distinct standards for facilities with 16 or fewer 493 494 beds and for facilities with 17 or more beds. The standards for 495 facilities with 16 or fewer beds must be appropriate for a 496 noninstitutional residential environment; however, the structure 497 may not be more than two stories in height and all persons who cannot exit the facility unassisted in an emergency must reside 498 on the first floor. The department, in conjunction with the 499 500 agency τ may make other distinctions among types of facilities as

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501 necessary to enforce this part. Where appropriate, the agency 502 shall offer alternate solutions for complying with established 503 standards, based on distinctions made by the department and the 504 agency relative to the physical characteristics of facilities 505 and the types of care offered.

506 (3) The department shall submit a copy of proposed rules 507 to the Speaker of the House of Representatives, the President of 508 the Senate, and appropriate committees of substance for review 509 and comment prior to the promulgation thereof. Rules promulgated 510 by the department shall encourage the development of homelike 511 facilities which promote the dignity, individuality, personal 512 strengths, and decisionmaking ability of residents.

513 (3) (4) The agency, in consultation with the department, 514 may waive rules adopted under promulgated pursuant to this part 515 in order to demonstrate and evaluate innovative or cost-516 effective congregate care alternatives that which enable 517 individuals to age in place. Such waivers may be granted only in 518 instances where there is reasonable assurance that the health, 519 safety, or welfare of residents will not be endangered. To apply 520 for a waiver, the licensee shall submit to the agency a written 521 description of the concept to be demonstrated, including goals, 522 objectives, and anticipated benefits; the number and types of residents who will be affected, if applicable; a brief 523 524 description of how the demonstration will be evaluated; and any 525 other information deemed appropriate by the agency. Any facility

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526 granted a waiver shall submit a report of findings to the agency 527 and the department within 12 months. At such time, the agency 528 may renew or revoke the waiver or pursue any regulatory or 529 statutory changes necessary to allow other facilities to adopt 530 the same practices. The agency department may by rule clarify 531 terms and establish waiver application procedures, criteria for 532 reviewing waiver proposals, and procedures for reporting 533 findings, as necessary to implement this subsection.

534 (4) (4) (5) The agency may use an abbreviated biennial standard licensure inspection that consists of a review of key quality-535 536 of-care standards in lieu of a full inspection in a facility 537 that has a good record of past performance. However, a full inspection must be conducted in a facility that has a history of 538 539 class I or class II violations, uncorrected class III 540 violations, confirmed ombudsman council complaints, or confirmed 541 licensure complaints τ within the previous licensure period 542 immediately preceding the inspection or if a potentially serious 543 problem is identified during the abbreviated inspection. The 544 agency, in consultation with the department, shall develop the 545 key quality-of-care standards with input from the State Long-546 Term Care Ombudsman Council and representatives of provider 547 groups for incorporation into its rules.

548Section 20.Subsection (4) of section 429.42, Florida549Statutes, is amended to read:

429.42 Pharmacy and dietary services.-

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551 (4) The agency department may by rule establish procedures 552 and specify documentation as necessary to implement this 553 section. 554 Section 21. Subsections (2), (3), (4), and (6) through 555 (12) of section 429.52, Florida Statutes, are amended to read: 556 429.52 Staff training and educational programs; core 557 educational requirement.-558 (2) Administrators and other assisted living facility 559 staff must meet minimum training and education requirements 560 established by the agency Department of Elderly Affairs by rule. 561 This training and education is intended to assist facilities to 562 appropriately respond to the needs of residents, to maintain 563 resident care and facility standards, and to meet licensure 564 requirements. 565 The agency, in conjunction with providers, department (3)566 shall develop establish a competency test and a minimum required 567 score to indicate successful completion of the training and 568 educational requirements. The competency test must be developed 569 by the department in conjunction with the agency and providers. 570 The required training and education must cover at least the 571 following topics: 572 State law and rules relating to assisted living (a) facilities. 573 574 Resident rights and identifying and reporting abuse, (b) neglect, and exploitation. 575 Page 23 of 35

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576 (c) Special needs of elderly persons, persons with mental
577 illness, and persons with developmental disabilities and how to
578 meet those needs.

579 (d) Nutrition and food service, including acceptable580 sanitation practices for preparing, storing, and serving food.

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

(f) Firesafety requirements, including fire evacuationdrill procedures and other emergency procedures.

586 (g) Care of persons with Alzheimer's disease and related 587 disorders.

588 (4) A new facility administrator must complete the 589 required training and education, including the competency test, 590 within 90 days after date of employment as an administrator. 591 Failure to do so is a violation of this part and subjects the 592 violator to an administrative fine as prescribed in s. 429.19. Administrators licensed in accordance with part II of chapter 593 594 468 are exempt from this requirement. Other licensed 595 professionals may be exempted, as determined by the agency 596 department by rule.

597 (6) Staff involved with the management of medications and
598 assisting with the self-administration of medications under s.
599 429.256 must complete a minimum of 6 additional hours of
600 training provided by a registered nurse, <u>a</u> licensed pharmacist,

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or <u>agency</u> department staff. The <u>agency</u> department shall
establish by rule the minimum requirements of this additional
training.

604 (7) Other facility staff shall participate in training
605 relevant to their job duties as specified by rule of the <u>agency</u>
606 department.

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

(9) The <u>agency</u> department shall adopt rules related to these training requirements, the competency test, necessary procedures, and competency test fees and shall adopt or contract with another entity to develop a curriculum, which shall be used as the minimum core training requirements. The <u>agency</u> department shall consult with representatives of stakeholder associations and agencies in the development of the curriculum.

(10) The training required by this section other than the preservice orientation must be conducted by persons registered with the <u>agency</u> department as having the requisite experience and credentials to conduct the training. A person seeking to register as a trainer must provide the <u>agency</u> department with proof of completion of the minimum core training education

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626 requirements, successful passage of the competency test 627 established under this section, and proof of compliance with the 628 continuing education requirement in subsection (5). 629 (11) A person seeking to register as a trainer must also: 630 Provide proof of completion of a 4-year degree from an (a) 631 accredited college or university and must have worked in a 632 management position in an assisted living facility for 3 years 633 after being core certified; 634 Have worked in a management position in an assisted (b) 635 living facility for 5 years after being core certified and have 1 year of teaching experience as an educator or staff trainer 636 637 for persons who work in assisted living facilities or other 638 long-term care settings; 639 (c) Have been previously employed as a core trainer for 640 the agency or department; or Meet other qualification criteria as defined in rule, 641 (d) 642 which the agency department is authorized to adopt. 643 The agency department shall adopt rules to establish (12)644 trainer registration requirements. 645 Section 22. Section 429.54, Florida Statutes, is amended 646 to read: 647 429.54 Collection of information; local subsidy.-648 (1)To enable the agency department to collect the information requested by the Legislature regarding the actual 649 650 cost of providing room, board, and personal care in facilities, Page 26 of 35

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651 the agency department is authorized to conduct field visits and 652 audits of facilities as may be necessary. The owners of randomly 653 sampled facilities shall submit such reports, audits, and 654 accountings of cost as the agency department may require by 655 rule; provided that such reports, audits, and accountings shall 656 be the minimum necessary to implement the provisions of this section. Any facility selected to participate in the study shall 657 658 cooperate with the agency department by providing cost of operation information to interviewers. 659

660 (2) Local governments or organizations may contribute to
661 the cost of care of local facility residents by further
662 subsidizing the rate of state-authorized payment to such
663 facilities. Implementation of local subsidy <u>requires agency</u>
664 shall require departmental approval and <u>may shall</u> not result in
665 reductions in the state supplement.

Section 23. Subsections (4) and (5) of section 429.63,Florida Statutes, are amended to read:

668

429.63 Legislative intent; purpose.-

(4) The Legislature further finds and declares that
licensure under this part is a public trust and a privilege, and
not an entitlement. This principle must guide the finder of fact
or trier of law at any administrative proceeding or circuit
court action initiated by the <u>agency</u> department to enforce this
part.

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(5) Rules of the agency department relating to adult

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family-care homes shall be as minimal and flexible as possible 676 677 to ensure the protection of residents while minimizing the 678 obstacles that could inhibit the establishment of adult family-679 care homes. Section 24. Subsections (9), (10), and (11) of section 680 681 429.67, Florida Statutes, are amended to read: 682 429.67 Licensure.-683 (9) In addition to the license categories available in s. 408.808, the agency may issue a conditional license to a 684 provider for the purpose of bringing the adult family-care home 685 686 into compliance with licensure requirements. A conditional 687 license must be limited to a specific period, not exceeding 6 688 months. The agency department shall, by rule, establish criteria 689 for issuing conditional licenses. 690 (10) The agency department may adopt rules to establish 691 procedures, identify forms, specify documentation, and clarify 692 terms, as necessary, to administer this section. 693 (11) The agency may adopt rules to administer the 694 requirements of part II of chapter 408. 695 Section 25. Subsection (6) of section 429.71, Florida 696 Statutes, is amended to read: 697 429.71 Classification of deficiencies; administrative fines.-698 The agency shall establish department shall set forth, 699 (6) 700 by rule, notice requirements and procedures for correction of Page 28 of 35

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701 deficiencies.

702 Section 26. Section 429.73, Florida Statutes, is amended 703 to read:

704 429.73 Rules and standards relating to adult family-care 705 homes.-

706 The agency, in consultation with the department, may (1)707 adopt rules to administer the requirements of part II of chapter 708 408. The department, in consultation with the Department of 709 Health and, the Department of Children and Families, and the 710 agency shall, by rule, establish by rule minimum standards to 711 ensure the health, safety, and well-being of each resident in 712 the adult family-care home pursuant to this part. The rules must 713 address:

(a) Requirements for the physical site of the facility andfacility maintenance.

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

719 1. Room and board.

720 2. Assistance necessary to perform the activities of daily721 living.

722 3. Assistance necessary to administer medication.

- 723 4. Supervision of residents.
- 5. Health monitoring.
- 725 6. Social and leisure activities.

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(c) Standards and procedures for license application and annual license renewal, advertising, proper management of each resident's funds and personal property and personal affairs, financial ability to operate, medication management, inspections, complaint investigations, and facility, staff, and resident records.

(d) Qualifications, training, standards, andresponsibilities for providers and staff.

(e) Compliance with chapter 419, relating to communityresidential homes.

(f) Criteria and procedures for determining the appropriateness of a resident's placement and continued residency in an adult family-care home. A resident who requires 24-hour nursing supervision may not be retained in an adult family-care home unless such resident is an enrolled hospice patient and the resident's continued residency is mutually agreeable to the resident and the provider.

(g) Procedures for providing notice and assuring the least possible disruption of residents' lives when residents are relocated, an adult family-care home is closed, or the ownership of an adult family-care home is transferred.

747 (h) Procedures to protect the residents' rights as 748 provided in s. 429.85.

749 (i) Procedures to promote the growth of adult family-care750 homes as a component of a long-term care system.

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(j) Procedures to promote the goal of aging in place forresidents of adult family-care homes.

(2) The <u>agency</u> department shall by rule provide by rule
minimum standards and procedures for emergencies. Pursuant to s.
633.206, the State Fire Marshal, in consultation with the
department and the agency, shall adopt uniform firesafety
standards for adult family-care homes.

758 The agency department shall adopt rules providing for (3) 759 the implementation of orders not to resuscitate. The provider 760 may withhold or withdraw cardiopulmonary resuscitation if 761 presented with an order not to resuscitate executed pursuant to 762 s. 401.45. The provider shall not be subject to criminal 763 prosecution or civil liability, nor be considered to have 764 engaged in negligent or unprofessional conduct, for withholding 765 or withdrawing cardiopulmonary resuscitation pursuant to such an 766 order and applicable rules.

767 Section 27. Subsections (3), (4), and (5) of section
768 429.75, Florida Statutes, are amended to read:

429.75 Training and education programs.-

(3) Providers must complete the training and education
program within a reasonable time determined by the <u>agency</u>
department. Failure to complete the training and education
program within the time set by the <u>agency</u> department is a
violation of this part and subjects the provider to revocation
of the license.

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776 If the Department of Children and Families or τ the (4) 777 agency, or the department determines that there are problems in 778 an adult family-care home which could be reduced through 779 specific training or education beyond that required under this 780 section, the agency may require the provider or staff to 781 complete such training or education. 782 (5) The agency department may adopt rules as necessary to 783 administer this section. 784 Section 28. Subsection (2) of section 429.81, Florida 785 Statutes, is amended to read: 786 429.81 Residency agreements.-787 (2) Each residency agreement must specify the personal 788 care and accommodations to be provided by the adult family-care 789 home, the rates or charges, a requirement of at least 30 days' 790 notice before a rate increase, and any other provisions required 791 by rule of the agency department. 792 Section 29. Section 429.929, Florida Statutes, is amended 793 to read: 794 429.929 Rules establishing standards.-795 The agency, in consultation with the department, may (1)796 adopt rules to administer the requirements of part II of chapter 797 408. The Department of Elderly Affairs, in conjunction with the 798 agency, shall adopt rules to implement the provisions of this part. The rules must include reasonable and fair standards. Any 799 800 conflict between these standards and those that may be set forth Page 32 of 35

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801 in local, county, or municipal ordinances shall be resolved in 802 favor of those having statewide effect. Such standards must 803 relate to:

(a) The maintenance of adult day care centers with respect
to plumbing, heating, lighting, ventilation, and other building
conditions, including adequate meeting space, to ensure the
health, safety, and comfort of participants and protection from
fire hazard. Such standards may not conflict with chapter 553
and must be based upon the size of the structure and the number
of participants.

(b) The number and qualifications of all personnel
employed by adult day care centers who have responsibilities for
the care of participants.

(c) All sanitary conditions within adult day care centers
and their surroundings, including water supply, sewage disposal,
food handling, and general hygiene, and maintenance of sanitary
conditions, to ensure the health and comfort of participants.

818 (c

(d) Basic services provided by adult day care centers.

819 (e) Supportive and optional services provided by adult day820 care centers.

(f) Data and information relative to participants and programs of adult day care centers, including, but not limited to, the physical and mental capabilities and needs of the participants, the availability, frequency, and intensity of basic services and of supportive and optional services provided,

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the frequency of participation, the distances traveled by 826 827 participants, the hours of operation, the number of referrals to 828 other centers or elsewhere, and the incidence of illness. 829 Components of a comprehensive emergency management (q) 830 plan, developed in consultation with the Department of Health $_{\tau}$ 831 the Agency for Health Care Administration, and the Division of 832 Emergency Management. 833 Pursuant to this part, s. 408.811, and applicable (2) 834 rules, the agency may conduct an abbreviated biennial inspection 835 of key quality-of-care standards, in lieu of a full inspection, 836 of a center that has a record of good performance. However, the 837 agency must conduct a full inspection of a center that has had one or more confirmed complaints within the licensure period 838 839 immediately preceding the inspection or which has a serious 840 problem identified during the abbreviated inspection. The agency 841 shall develop the key quality-of-care standards, taking into 842 consideration the comments and recommendations of the Department of Elderly Affairs and of provider groups. These standards shall 843 844 be included in rules adopted by the agency Department of Elderly 845 Affairs. 846 Section 30. Subsection (4) of section 765.110, Florida 847 Statutes, is amended to read: 765.110 Health care facilities and providers; discipline.-848 The Department of Elderly Affairs for hospices and, in 849 (4) 850 consultation with the Department of Elderly Affairs, the

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851 Department of Health, in consultation with the Department of 852 Elderly Affairs, for health care providers; the Agency for 853 Health Care Administration for hospitals, hospices, nursing homes, home health agencies, and health maintenance 854 855 organizations; and the Department of Children and Families for 856 facilities subject to part I of chapter 394 shall adopt rules to implement this the provisions of the section. 857 Section 31. This act shall take effect July 1, 2019.

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