By the Committee on Banking and Insurance; and Senator Legg 597-02614-16 20161164c1 1 A bill to be entitled 2 An act relating to firesafety; amending s. 429.41, 3 F.S.; requiring the State Fire Marshal to establish 4 uniform firesafety standards for assisted living 5 facilities; revising provisions relating to the 6 minimum standards that must be adopted by the 7 Department of Elderly Affairs for firesafety in 8 assisted living facilities; clarifying the fees a utility may charge for the installation and 9 10 maintenance of an automatic fire sprinkler system; 11 providing an effective date. 12 13 Be It Enacted by the Legislature of the State of Florida: 14 15 Section 1. Subsection (1) of section 429.41, Florida Statutes, is amended to read: 16 17 429.41 Rules establishing standards.-18 (1) It is the intent of the Legislature that rules published and enforced pursuant to this section shall include 19 20 criteria by which a reasonable and consistent quality of resident care and quality of life may be ensured and the results 21 22 of such resident care may be demonstrated. Such rules shall also 23 ensure a safe and sanitary environment that is residential and 24 noninstitutional in design or nature. It is further intended 25 that reasonable efforts be made to accommodate the needs and 26 preferences of residents to enhance the quality of life in a 27 facility. Uniform firesafety standards for assisted living 28 facilities shall be established by the State Fire Marshal 29 pursuant to s. 633.206. The agency, in consultation with the 30 department, may adopt rules to administer the requirements of 31 part II of chapter 408. In order to provide safe and sanitary 32 facilities and the highest quality of resident care

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33	accommodating the needs and preferences of residents, the
34	department, in consultation with the agency, the Department of
35	Children and Families, and the Department of Health, shall adopt
36	rules, policies, and procedures to administer this part, which
37	must include reasonable and fair minimum standards in relation
38	to:
39	(a) The requirements for and maintenance of facilities, not
40	in conflict with chapter 553, relating to plumbing, heating,
41	cooling, lighting, ventilation, living space, and other housing
42	conditions, which will ensure the health, safety, and comfort of
43	residents and protection from fire hazard, including adequate
44	provisions for fire alarm and other fire protection suitable to
45	the size of the structure. Uniform firesafety standards shall be
46	established and enforced by the State Fire Marshal in
47	cooperation with the agency, the department, and the Department
48	of Health.
49	1. Firesafety evacuation capability determination
50	a. The National Fire Protection Association, NFPA 101A,
51	Chapter 5, 1995 edition, shall be used for determining the
52	ability of the residents, with or without staff assistance, to
53	relocate from or within a licensed facility to a point of safety
54	as provided in the fire codes adopted herein. An evacuation
55	capability evaluation for initial licensure shall be conducted
56	within 6 months after the date of licensure. <del>For existing</del>
57	licensed facilities that are not equipped with an automatic fire
58	sprinkler system, the administrator shall evaluate the
59	evacuation capability of residents at least annually. The
60	evacuation capability evaluation for each facility not equipped
61	with an automatic fire sprinkler system shall be validated,

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62	without liability, by the State Fire Marshal, by the local fire
63	marshal, or by the local authority having jurisdiction over
64	firesafety, before the license renewal date. If the State Fire
65	Marshal, local fire marshal, or local authority having
66	jurisdiction over firesafety has reason to believe that the
67	evacuation capability of a facility as reported by the
68	administrator may have changed, it may, with assistance from the
69	facility administrator, reevaluate the evacuation capability
70	through timed exiting drills. Translation of timed fire exiting
71	drills to evacuation capability may be determined:
72	(I) Three minutes or less: prompt.
73	(II) More than 3 minutes, but not more than 13 minutes:
74	slow.
75	(III) More than 13 minutes: impractical.
76	b. The Office of the State Fire Marshal shall provide or
77	cause the provision of training and education on the proper
78	application of Chapter 5, NFPA 101A, 1995 edition, to its
79	employees, to staff of the Agency for Health Care Administration
80	who are responsible for regulating facilities under this part,
81	and to local governmental inspectors. The Office of the State
82	Fire Marshal shall provide or cause the provision of this
83	training within its existing budget, but may charge a fee for
84	this training to offset its costs. The initial training must be
85	delivered within 6 months after July 1, 1995, and as needed
86	thereafter.
87	c. The Office of the State Fire Marshal, in cooperation
88	with provider associations, shall provide or cause the provision
89	of a training program designed to inform facility operators on
90	how to properly review bid documents relating to the

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91 installation of automatic fire sprinklers. The Office of the 92 State Fire Marshal shall provide or cause the provision of this training within its existing budget, but may charge a fee for 93 this training to offset its costs. The initial training must be 94 95 delivered within 6 months after July 1, 1995, and as needed 96 thereafter. 97 d. The administrator of a licensed facility shall sign an affidavit verifying the number of residents occupying the 98 facility at the time of the evacuation capability evaluation. 99 2. Firesafety requirements.-100 101 a. Except for the special applications provided herein, 102 effective January 1, 1996, The National Fire Protection 103 Association, Life Safety Code, NFPA 101 and 101A, current editions 1994 edition, Chapter 22 for new facilities and Chapter 104 23 for existing facilities shall be used in determining the 105 106 uniform firesafety fire code adopted applied by the State Fire 107 Marshal for assisted living facilities, pursuant to s. 633.206. b. Any new facility, regardless of size, that applies for a 108 license on or after January 1, 1996, must be equipped with an 109 110 automatic fire sprinkler system. The exceptions as provided in 111 s. 22-2.3.5.1, NFPA 101, 1994 edition, as adopted herein, apply to any new facility housing eight or fewer residents. On July 1, 112 113 1995, local governmental entities responsible for the issuance of permits for construction shall inform, without liability, any 114 115 facility whose permit for construction is obtained before 116 January 1, 1996, of this automatic fire sprinkler requirement. As used in this part, the term "a new facility" does not mean an 117 existing facility that has undergone change of ownership. 118 c. Notwithstanding any provision of s. 633.206 or of the 119

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597-02614-16 20161164c1 120 National Fire Protection Association, NFPA 101A, Chapter 5, 1995 121 edition, to the contrary, any existing facility housing eight or 122 fewer residents is not required to install an automatic fire 123 sprinkler system, nor to comply with any other requirement in 124 Chapter 23, NFPA 101, 1994 edition, that exceeds the firesafety 125 requirements of NFPA 101, 1988 edition, that applies to this 126 size facility, unless the facility has been classified as 127 impractical to evacuate. Any existing facility housing eight or 128 fewer residents that is classified as impractical to evacuate 129 must install an automatic fire sprinkler system within the 130 timeframes granted in this section. 131 d. Any existing facility that is required to install an

automatic fire sprinkler system under this paragraph need not meet other firesafety requirements of Chapter 23, NFPA 101, 1994 edition, which exceed the provisions of NFPA 101, 1988 edition. The mandate contained in this paragraph which requires certain facilities to install an automatic fire sprinkler system supersedes any other requirement.

138 c. This paragraph does not supersede the exceptions granted
 139 in NFPA 101, 1988 edition or 1994 edition.

140 f. This paragraph does not exempt facilities from other 141 firesafety provisions adopted under s. 633.206 and local 142 building code requirements in effect before July 1, 1995.

<u>b.g.</u> A local government <u>or a utility</u> may charge fees only
in an amount not to exceed the actual expenses incurred by <u>the</u>
local government <u>or the utility</u> relating to the installation and
maintenance of an automatic fire sprinkler system in an existing
and properly licensed assisted living facility structure as of
January 1, 1996.

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149	h. If a licensed facility undergoes major reconstruction or
150	addition to an existing building on or after January 1, 1996,
151	the entire building must be equipped with an automatic fire
152	sprinkler system. Major reconstruction of a building means
153	repair or restoration that costs in excess of 50 percent of the
154	value of the building as reported on the tax rolls, excluding
155	land, before reconstruction. Multiple reconstruction projects
156	within a 5-year period the total costs of which exceed 50
157	percent of the initial value of the building when the first
158	reconstruction project was permitted are to be considered as
159	major reconstruction. Application for a permit for an automatic
160	fire sprinkler system is required upon application for a permit
161	for a reconstruction project that creates costs that go over the
162	50-percent threshold.
163	i. Any facility licensed before January 1, 1996, that is
164	required to install an automatic fire sprinkler system shall
165	ensure that the installation is completed within the following
166	timeframes based upon evacuation capability of the facility as
167	determined under subparagraph 1.:
168	(I) Impractical evacuation capability, 24 months.
169	(II) Slow evacuation capability, 48 months.
170	(III) Prompt evacuation capability, 60 months.
171	
172	The beginning date from which the deadline for the automatic
173	fire sprinkler installation requirement must be calculated is
174	upon receipt of written notice from the local fire official that
175	an automatic fire sprinkler system must be installed. The local
176	fire official shall send a copy of the document indicating the
177	requirement of a fire sprinkler system to the Agency for Health
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597-02614-16 20161164c1 178 Care Administration. 179 i. It is recognized that the installation of an automatic 180 fire sprinkler system may create financial hardship for some 181 facilities. The appropriate local fire official shall, without 182 liability, grant two 1-year extensions to the timeframes for 183 installation established herein, if an automatic fire sprinkler 184 installation cost estimate and proof of denial from two 185 financial institutions for a construction loan to install the 186 automatic fire sprinkler system are submitted. However, for any 187 facility with a class I or class II, or a history of uncorrected 188 class III, firesafety deficiencies, an extension must not be 189 granted. The local fire official shall send a copy of the 190 document granting the time extension to the Agency for Health 191 Care Administration. 192 k. A facility owner whose facility is required to be 193 equipped with an automatic fire sprinkler system under Chapter 194 23, NFPA 101, 1994 edition, as adopted herein, must disclose to 195 any potential buyer of the facility that an installation of an 196 automatic fire sprinkler requirement exists. The sale of the facility does not alter the timeframe for the installation of 197 198 the automatic fire sprinkler system. 199 1. Existing facilities required to install an automatic 200 fire sprinkler system as a result of construction-type restrictions in Chapter 23, NFPA 101, 1994 edition, as adopted 201 202 herein, or evacuation capability requirements shall be notified 203 by the local fire official in writing of the automatic fire 204 sprinkler requirement, as well as the appropriate date for final 205 compliance as provided in this subparagraph. The local fire 206 official shall send a copy of the document to the Agency for

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207	Health Care Administration.
208	m. Except in cases of life-threatening fire hazards, if an
209	existing facility experiences a change in the evacuation
210	capability, or if the local authority having jurisdiction
211	identifies a construction-type restriction, such that an
212	automatic fire sprinkler system is required, it shall be given
213	time for installation as provided in this subparagraph.
214	
215	Facilities that are fully sprinkled and in compliance with other
216	firesafety standards are not required to conduct more than one
217	of the required fire drills between the hours of 11 p.m. and 7
218	a.m., per year. In lieu of the remaining drills, staff
219	responsible for residents during such hours may be required to
220	participate in a mock drill that includes a review of evacuation
221	procedures. Such standards must be included or referenced in the
222	rules adopted by the State Fire Marshal. Pursuant to s.
223	633.206(1)(b), the State Fire Marshal is the final
224	administrative authority for firesafety standards established
225	and enforced pursuant to this section.
226	<u>c.</u> All licensed facilities must have an annual fire
227	inspection conducted by the local fire marshal or authority
228	having jurisdiction.
229	3. Resident elopement requirementsFacilities are required
230	to conduct a minimum of two resident elopement prevention and
231	response drills per year. All administrators and direct care
232	staff must participate in the drills which shall include a
233	review of procedures to address resident elopement. Facilities
234	must document the implementation of the drills and ensure that
235	the drills are conducted in a manner consistent with the

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597-02614-16 20161164c1 236 facility's resident elopement policies and procedures.

237 (b) The preparation and annual update of a comprehensive 238 emergency management plan. Such standards must be included in 239 the rules adopted by the department after consultation with the 240 Division of Emergency Management. At a minimum, the rules must 241 provide for plan components that address emergency evacuation 242 transportation; adequate sheltering arrangements; postdisaster 243 activities, including provision of emergency power, food, and water; postdisaster transportation; supplies; staffing; 244 245 emergency equipment; individual identification of residents and 246 transfer of records; communication with families; and responses 247 to family inquiries. The comprehensive emergency management plan 248 is subject to review and approval by the local emergency 249 management agency. During its review, the local emergency 250 management agency shall ensure that the following agencies, at a 251 minimum, are given the opportunity to review the plan: the 252 Department of Elderly Affairs, the Department of Health, the Agency for Health Care Administration, and the Division of 253 254 Emergency Management. Also, appropriate volunteer organizations 255 must be given the opportunity to review the plan. The local 256 emergency management agency shall complete its review within 60 257 days and either approve the plan or advise the facility of 258 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. (d) All sanitary conditions within the facility and its

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265	surroundings which will ensure the health and comfort of
266	residents. The rules must clearly delineate the responsibilities
267	of the agency's licensure and survey staff, the county health
268	departments, and the local authority having jurisdiction over
269	firesafety and ensure that inspections are not duplicative. The
270	agency may collect fees for food service inspections conducted
271	by the county health departments and transfer such fees to the
272	Department of Health.
273	(e) License application and license renewal, transfer of
274	ownership, proper management of resident funds and personal
275	property, surety bonds, resident contracts, refund policies,
276	financial ability to operate, and facility and staff records.
277	(f) Inspections, complaint investigations, moratoriums,
278	classification of deficiencies, levying and enforcement of
279	penalties, and use of income from fees and fines.
280	(g) The enforcement of the resident bill of rights
281	specified in s. 429.28.
282	(h) The care and maintenance of residents, which must
283	include, but is not limited to:
284	1. The supervision of residents;
285	2. The provision of personal services;
286	3. The provision of, or arrangement for, social and leisure
287	activities;
288	4. The arrangement for appointments and transportation to
289	appropriate medical, dental, nursing, or mental health services,
290	as needed by residents;
291	5. The management of medication;
292	6. The nutritional needs of residents;
293	7. Resident records; and
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294
          8. Internal risk management and quality assurance.
295
          (i) Facilities holding a limited nursing, extended
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     congregate care, or limited mental health license.
297
           (j) The establishment of specific criteria to define
298
     appropriateness of resident admission and continued residency in
299
     a facility holding a standard, limited nursing, extended
300
     congregate care, and limited mental health license.
301
           (k) The use of physical or chemical restraints. The use of
302
     physical restraints is limited to half-bed rails as prescribed
303
     and documented by the resident's physician with the consent of
304
     the resident or, if applicable, the resident's representative or
305
     designee or the resident's surrogate, guardian, or attorney in
306
     fact. The use of chemical restraints is limited to prescribed
307
     dosages of medications authorized by the resident's physician
     and must be consistent with the resident's diagnosis. Residents
308
309
     who are receiving medications that can serve as chemical
310
     restraints must be evaluated by their physician at least
311
     annually to assess:
312
          1. The continued need for the medication.
313
          2. The level of the medication in the resident's blood.
314
          3. The need for adjustments in the prescription.
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(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.

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Section 2. This act shall take effect July 1, 2016.

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