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LEGISLATIVE ACTION

Senate

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House

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The Committee on Appropriations (Passidomo) recommended the following:

**Senate Amendment (with title amendment)**

Delete everything after the enacting clause  
and insert:

Section 1. Section 393.506, Florida Statutes, is amended to  
read:

393.506 Administration of medication.—

(1) An unlicensed A direct service provider ~~who is not~~  
~~currently licensed to administer medication~~ may supervise the  
self-administration of medication or may administer oral,



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transdermal, ophthalmic, otic, rectal, inhaled, enteral, or topical prescription medications to a client if the unlicensed direct service provider meets the requirements of ~~as provided in~~ this section.

(2) In order to supervise the self-administration of medication or to administer medications as provided in subsection (1), an unlicensed ~~a~~ direct service provider must satisfactorily complete an initial ~~a~~ training course conducted by an agency-approved trainer of not less than 6 4 hours in medication administration and be found competent to supervise the self-administration of medication by a client and ~~or~~ to administer medication to a client in a safe and sanitary manner. ~~Competency must be assessed and validated at least annually in an onsite setting and must include personally observing the direct service provider satisfactorily:~~

(a) The competency of the unlicensed direct service provider to supervise and administer otic, transdermal, and topical medication must be assessed and validated using simulation during the initial training course, and need not be revalidated annually. ~~Supervising the self-administration of medication by a client; and~~

(b) Competency must be validated initially and revalidated annually for oral, enteral, ophthalmic, rectal, and inhaled medication administration. The initial validation and annual revalidations of medication administration must be performed onsite with an actual client using the client's actual medication and must include the validating practitioner personally observing the unlicensed direct service provider satisfactorily:



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40       1. Supervising the oral, enteral, ophthalmic, rectal, or  
41 inhaled self-administration of medication by a client; and

42       2. Administering medication to a client by oral, enteral,  
43 ophthalmic, rectal, or inhaled medication routes.

44       (c)1. An unlicensed direct service provider who completes  
45 the required initial training course and is validated in the  
46 oral or enteral route of medication administration is not  
47 required to retake the initial training course unless he or she  
48 fails to maintain annual validation in the oral or enteral  
49 route, in which case, the provider must complete the initial 6-  
50 hour training course again and obtain all required validations  
51 before he or she may supervise the self-administration of  
52 medication by a client or administer medication to a client.

53       2. If the unlicensed direct service provider has already  
54 completed an initial training course of at least 4 hours and has  
55 a current validation for oral or enteral routes of medication  
56 administration on or before July 1, 2018, he or she is not  
57 required to complete the initial 6-hour training course. If for  
58 any reason the unlicensed direct service provider fails to meet  
59 the annual validation requirement for oral or enteral medication  
60 administration, or the annual inservice training requirement in  
61 subsection (4), the unlicensed direct service provider must  
62 satisfactorily complete the initial training course again and  
63 obtain all required validations before he or she may supervise  
64 the self-administration of medication by a client or administer  
65 medication to a client.

66       3. If an unlicensed direct service provider has completed  
67 an initial training course of at least 4 hours but has not  
68 obtained validation for otic, transdermal, or topical medication



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administration before July 1, 2018, that direct service provider must obtain validation before administering otic, transdermal, and topical medication, which may be performed through simulation.

(3) An unlicensed direct service provider may administer medication to a client only if the provider has met the training requirements of this section and has been validated as competent. An unlicensed direct service provider may not supervise the self-administration of medication by a client or administer medication to a client unless the client or the client's guardian or legal representative has given his or her informed written consent.

(4) An unlicensed direct service provider must annually and satisfactorily complete a 2-hour agency-developed inservice training course in medication administration and medication error prevention conducted by an agency-approved trainer. The inservice training course shall count toward annual inservice training hours required by agency rule or by Agency for Health Care Administration rule. This subsection may not be construed to require an increase in the total number of hours required for annual inservice training for direct service providers administering medication to a client.

~~(3) A direct service provider may supervise the self-administration of medication by a client or may administer medication to a client only if the client, or the client's guardian or legal representative, has given his or her informed consent to self-administering medication under the supervision of an unlicensed direct service provider or to receiving medication administered by an unlicensed direct service~~



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~~provider. Such informed consent must be based on a description of the medication routes and procedures that the direct service provider is authorized to supervise or administer. Only a provider who has received appropriate training and has been validated as competent may supervise the self-administration of medication by a client or may administer medication to a client.~~

(5)-(4) The training, determination of competency, and initial and annual validations validation required in this section shall be conducted by a registered nurse licensed pursuant to chapter 464 or by a licensed practical nurse in accordance with the requirements of chapter 464. A physician licensed pursuant to chapter 458 or chapter 459 may validate or revalidate competency.

(6)-(5) The agency shall establish by rule standards and procedures that an unlicensed a direct service provider must follow when supervising the self-administration of medication by a client and when administering medication to a client. Such rules must, at a minimum, address qualification requirements for trainers, requirements for labeling medication, documentation and recordkeeping, the storage and disposal of medication, instructions concerning the safe administration of medication or supervision of self-administered medication, informed-consent requirements and records, and the training curriculum and validation procedures. The agency shall adopt rules to establish methods of enforcement to ensure compliance with this section.

Section 2. This act shall take effect July 1, 2018.

===== T I T L E   A M E N D M E N T =====  
And the title is amended as follows:



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127 Delete everything before the enacting clause  
128 and insert:

129 A bill to be entitled  
130 An act relating to medication administration; amending  
131 s. 393.506, F.S.; revising training requirements for  
132 unlicensed direct service providers to assist with the  
133 administration of or to supervise the self-  
134 administration of medication if specified requirements  
135 are met; providing validation requirements for the  
136 competency and skills of unlicensed direct service  
137 providers; providing that an unlicensed direct service  
138 provider may administer medication to a client only if  
139 he or she has met specified training requirements and  
140 has been validated as competent; prohibiting such  
141 administration and the supervision of self-  
142 administration without specified informed written  
143 consent; requiring unlicensed direct service providers  
144 to complete an annual inservice training course in  
145 medication administration and medication error  
146 prevention developed by the Agency for Persons with  
147 Disabilities; providing that such training counts  
148 toward training required by agency or Agency for  
149 Health Care Administration rule; providing  
150 construction; providing that training, the  
151 determination of competency, and initial and annual  
152 validations be conducted by a registered nurse or by a  
153 licensed practical nurse; providing that certain  
154 physicians may validate or revalidate competency;  
155 requiring the Agency for Persons with Disabilities to



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adopt certain rules; providing an effective date.