The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT (This document is based on the provisions contained in the legislation as of the latest date listed below.) Prepared By: The Professional Staff of the Committee on Children, Families, and Elder Affairs CS/SB 1788 BILL: Senator Passidomo INTRODUCER: Agency for Persons With Disabilities SUBJECT: January 30, 2018 DATE: **REVISED:** ANALYST STAFF DIRECTOR REFERENCE ACTION 1. Delia CF Fav/CS Hendon AHS 2. 3. AP

Please see Section IX. for Additional Information:

COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

CS/SB 1788 revises requirements for unlicensed staff that administer or assist with the administration of prescription medications to persons with developmental disabilities.

The bill expands the minimum number of hours of an initial training course that unlicensed staff must complete from no less than 4 hours to no less than 8 hours. The bill also implements new competency assessment and validation requirements based on the routes of medication administered, and requires all direct service providers to complete a 2-hour annual update course in medication administration and error prevention.

The bill is part of the Agency for Persons with Disabilities' (APD) legislative package, has an effective date of July 1, 2018, and will likely have a fiscal impact.

II. Present Situation:

Direct Service Providers

Clients receiving services from APD in home and community-based settings often receive care from direct service providers.¹ A direct service provider is defined in statute as a person 18 years

¹ Agency for Persons with Disabilities Agency Analysis, Agency Bill Analysis for Senate Bill 1788, *available at* <u>http://abar.laspbs.state.fl.us/ABAR/Document.aspx?id=22337&yr=2018</u> (last visited January 29, 2018).

of age or older who has direct face-to-face contact with a client while providing services to the client or has access to a client's living areas or to a client's funds or personal property.²

Administration of Medication

Direct service providers provide supervision of a client's self-administration of medication or direct administration of the medication to the client.³ Section 393.506, F.S., provides that a direct service provider who is not currently licensed to administer medication may supervise the self-administration of medication or may administer several types of prescription medications to clients, including:

- Oral,
- Transdermal,
- Ophthalmic,
- Otic,
- Rectal,
- Inhaled,
- Enteral, or
- Topical.

In order to supervise the self-administration of medication or to administer medications, a direct service provider must satisfactorily complete a training course of not less than four hours in medication administration and be found competent to supervise the self-administration of medication by a client or to administer medication to a client in a safe and sanitary manner.⁴ Currently, competency must be assessed and validated at least annually by a registered nurse licensed pursuant to ch. 464, F.S., or a physician licensed pursuant to ch. 458 or ch. 459, F.S., in an onsite setting and must include the registered nurse or physician personally observing the direct service provider satisfactorily supervising the self-administration of medication by a client, and administering medication to a client.⁵

The client or the client's guardian or legal representative must give 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 provider.⁶

III. Effect of Proposed Changes:

Section 1 amends s. 393.506, F.S., to require that direct service providers must complete a training course of no less than 8 hours, an increase from the previous requirement of at least 4 hours.

The bill also requires that all direct service providers annually complete a two-hour course in medication administration provided by APD or an agency designee. The bill removes the annual

² S. 393.063, F.S.

³ Supra at Note 1.

⁴ S 393.506(2), F.S.

⁵ See ss. 393.506(2) and (4), F.S.

⁶ S 393.506(3), F.S.

revalidation requirement for ophthalmic, rectal, or inhaled routes of medication administration while maintaining that initial assessment and validation require onsite administration of medication on an actual client. For otic, transdermal, or topical medications, the bill removes the annual onsite competency revalidation requirement and provides that competency may be validated by simulation during a training course required under s. 393.506(2), F.S.

Section 2 provides an effective date of July 1, 2018.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

Providers will no longer have to pay for nurses or doctors to come to their facility to validate direct service providers on otic, topical, and transdermal routes, as these would be done by simulation at the time of the required initial coursework. Providers would only have to pay once for initial validation at their facility for ophthalmic, rectal, and inhaled routes. The only routes which will continue to require annual validation are oral and enteral.

Providers will also be required to pay for the increased training hours for direct service providers. The impact of these changes is indeterminate.

C. Government Sector Impact:

None.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 393.506.

IX. Additional Information:

A. Committee Substitute – Statement of Changes: (Summarizing differences between the Committee Substitute and the prior version of the bill.)

X. Additional Information:

A. Committee Substitute – Statement of Substantial Changes: (Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Children, Families, and Elder Affairs on January 29, 2018:

- Removes language requiring that new comprehensive transitional education programs (CTEPs) may not be licensed in Florida after July 1, 2018, and existing licenses may not be renewed after December 31, 2020.
- Expands the requirement for direct service providers to complete an annual 2-hour training course on medication administration and error prevention to apply to all unlicensed staff administering or supervising self-administration of medication, not strictly those who administer oral or enteral medications.
- B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.