A bill to be entitled 1 2 An act relating to adult protection and care; amending s. 3 322.142, F.S.; authorizing the Department of Children and Family Services to obtain copies of driver's license files 4 maintained by the Department of Highway Safety and Motor 5 Vehicles for the purpose of conducting protective 6 7 investigations; amending s. 415.103, F.S.; requiring that 8 reports to the central abuse hotline relating to 9 vulnerable adults be transferred to the county sheriff's office under certain circumstances; amending s. 415.1051, 10 F.S.; authorizing the Department of Children and Family 11 Services to file a petition within 60 days to determine 12 incapacity in adult protection proceedings; prohibiting 13 the department from serving as the quardian or providing 14 legal counsel to the guardian under certain circumstances; 15 16 amending s. 415.112, F.S.; providing authority and requirements for department rules; amending s. 429.28, 17 F.S.; revising and specifying certain conditions in an 18 19 assisted living facility's resident bill of rights for a resident's relocation or termination of residency; 20 creating s. 429.285, F.S.; prohibiting resident relocation 21 or termination of residency in the absence of certain 22 specified conditions; requiring the administrator or 23 employee of a facility to sign a notice of relocation or 24 25 termination of residency and requiring a physician's 26 signature under certain circumstances; requiring a 27 licensee to provide advance written notice to the resident and other specified persons regarding relocation or 28

Page 1 of 21

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termination of residency; providing that the notice contain certain information; providing for the creation of a form to submit relocation or termination of residency information and specifying information to be included therein; requiring a licensee to report relocation or termination of residency to the Office of State Long-term Care Ombudsman within a certain timeframe; permitting residents to seek the assistance of the local long-term care ombudsmen council in reviewing a notice of relocation or termination of residency; providing for emergency relocation and termination of residency; permitting the local long-term care ombudsmen council to request private informal contact with a resident upon receipt of a notice of relocation or termination of residency; authorizing the agency to adopt rules; amending ss. 429.07 and 429.31, F.S.; conforming cross-references; providing an effective date.

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

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- Section 1. Subsection (4) of section 322.142, Florida Statutes, is amended to read:
  - 322.142 Color photographic or digital imaged licenses. --
- (4) The department may maintain a film negative or print file. The department shall maintain a record of the digital image and signature of the licensees, together with other data required by the department for identification and retrieval.

  Reproductions from the file or digital record are exempt from

Page 2 of 21

the provisions of s. 119.07(1) and shall be made and issued only for departmental administrative purposes; for the issuance of duplicate licenses; in response to law enforcement agency requests; to the Department of State pursuant to an interagency agreement to facilitate determinations of eligibility of voter registration applicants and registered voters in accordance with ss. 98.045 and 98.075; to the Department of Revenue pursuant to an interagency agreement for use in establishing paternity and establishing, modifying, or enforcing support obligations in Title IV-D cases; to the Department of Children and Family Services pursuant to an interagency agreement to conduct protective investigations under chapter 415; or to the Department of Financial Services pursuant to an interagency agreement to facilitate the location of owners of unclaimed property, the validation of unclaimed property claims, and the identification of fraudulent or false claims, and are exempt from the provisions of s. 119.07(1).

Section 2. Subsection (2) of section 415.103, Florida Statutes, is amended to read:

415.103 Central abuse hotline.--

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- (2) Upon receiving an oral or written report of known or suspected abuse, neglect, or exploitation of a vulnerable adult, the central abuse hotline <a href="mailto:shall must">shall must</a> determine if the report requires an immediate onsite protective investigation.
- (a) For reports requiring an immediate onsite protective investigation, the central abuse hotline must immediately notify the department's designated protective investigative district

staff responsible for protective investigations to ensure prompt initiation of an onsite investigation.

- (b) For reports not requiring an immediate onsite protective investigation, the central abuse hotline must notify the department's designated protective investigative district staff responsible for protective investigations in sufficient time to allow for an investigation to be commenced within 24 hours. At the time of notification of district staff with respect to the report, the central abuse hotline must also provide any known information on any previous reports report concerning the a subject of the present report or any pertinent information relative to the present report or any noted earlier reports.
- (c) If the report is of known or suspected abuse of a vulnerable adult by someone other than a relative, caregiver, or household member, the report shall be immediately transferred to the appropriate county sheriff's office.
- Section 3. Paragraph (e) of subsection (1) and paragraph (g) of subsection (2) of section 415.1051, Florida Statutes, are amended to read:
- 415.1051 Protective services interventions when capacity to consent is lacking; nonemergencies; emergencies; orders; limitations.--
- (1) NONEMERGENCY PROTECTIVE SERVICES INTERVENTIONS.--If the department has reasonable cause to believe that a vulnerable adult or a vulnerable adult in need of services is being abused, neglected, or exploited and is in need of protective services but lacks the capacity to consent to protective services, the

Page 4 of 21

department shall petition the court for an order authorizing the provision of protective services.

(e) Continued protective services. --

- 1.  $\underline{\text{Within}}$  No more than 60 days after the date of the order authorizing the provision of protective services, the department shall petition the court to determine whether:
- a. Protective services <u>are to will</u> be continued with the consent of the vulnerable adult pursuant to this subsection;
- b. Protective services <u>are to</u> will be continued for the vulnerable adult who lacks capacity;
  - c. Protective services are to will be discontinued; or
- d. A petition for guardianship  $\underline{shall}$   $\underline{should}$  be filed pursuant to chapter 744.
- 2. If the court determines that a petition for guardianship <u>shall</u> should be filed pursuant to chapter 744, the court, for good cause shown, may order continued protective services until it makes a determination regarding capacity.
- 3. If the department has a good faith belief that the vulnerable adult lacks capacity, the petition to determine incapacity under s. 744.3201 may be filed by the department.

  Once the petition is filed, the department may not be appointed guardian and may not provide legal counsel for the guardian.
- (2) EMERGENCY PROTECTIVE SERVICES INTERVENTION.--If the department has reasonable cause to believe that a vulnerable adult is suffering from abuse or neglect that presents a risk of death or serious physical injury to the vulnerable adult and that the vulnerable adult lacks the capacity to consent to emergency protective services, the department may take action

Page 5 of 21

under this subsection. If the vulnerable adult has the capacity to consent and refuses consent to emergency protective services, emergency protective services may not be provided.

(g) Continued emergency protective services .--

- 1. Within Not more than 60 days after the date of the order authorizing the provision of emergency protective services, the department shall petition the court to determine whether:
- a. Emergency protective services <u>are to</u> will be continued with the consent of the vulnerable adult;
- b. Emergency protective services <u>are to</u> will be continued for the vulnerable adult who lacks capacity;
- c. Emergency protective services  $\underline{\text{are to}}$  will be discontinued; or
  - d. A petition <u>shall</u> <del>should</del> be filed under chapter 744.
- 2. If it is decided to file a petition under chapter 744, for good cause shown, the court may order continued emergency protective services until a determination is made by the court.
- 3. If the department has a good faith belief that the vulnerable adult lacks capacity, the petition to determine incapacity under s. 744.3201 may be filed by the department.

  Once the petition is filed, the department may not be appointed guardian and may not provide legal counsel for the guardian.
- Section 4. Section 415.112, Florida Statutes, is amended to read:
- 415.112 <u>Specific rulemaking authority</u> <del>Rules for</del> implementation of ss. 415.101-415.113</del>.--The department shall adopt <del>promulgate</del> rules to administer this chapter, including,

Page 6 of 21

but not limited to: for the implementation of ss. 415.101

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- (1) Background screening of department employees and applicants for employment, which shall include a criminal records check and drug testing of adult protective investigators and adult protective investigator supervisors.
- (2) Reporting of adult abuse, neglect, and exploitation; reporting of a vulnerable adult in need of services; false reporting; and adult protective investigations.
- (3) Confidentiality and retention of department records, access to records, and record requests.
  - (4) Injunctions and other protective orders.
- (5) The provision of emergency and nonemergency protective services intervention.
- (6) Agreements with law enforcement and other state agencies.
- (7) Legal and casework procedures, including, but not limited to, diligent search, petitions, emergency removals, capacity to consent, and adult protection teams.
- (8) Legal and casework management of cases involving protective supervision, protective orders, judicial reviews, administrative reviews, case plans, and documentation requirements.
- Section 5. Paragraphs (k) and (l) of subsection (1), subsection (2), and paragraph (b) of subsection (3) of section 429.28, Florida Statutes, are amended to read:
- 429.28 Resident bill of rights.--

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

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- Receive at least 45 days' written notice of relocation or termination of residency from the licensee as provided in s. 429.285, unless the relocation or termination of residency is initiated by the resident or the resident designee; facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care; or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally incapacitated, the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for relocation shall be set forth in writing. In order for a licensee facility to terminate the residency of an individual without notice as provided in this paragraph herein, the licensee facility shall show good cause in a court of competent jurisdiction. Admission to a facility licensed under this part may not be conditioned upon a waiver of such right, and any document or provision in a document that purports to waive or preclude such right is void and unenforceable.
- (1) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without restraint, interference,

Page 8 of 21

coercion, discrimination, or reprisal. Each <u>licensee</u> <u>facility</u> shall establish a <u>written</u> grievance procedure to facilitate the residents' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or special interest groups. <u>Each licensee shall maintain a written log of grievances that shall be available for inspection and shall be maintained for at least 2 years. Residents may provide verbal or written grievances.</u>

(2) The administrator of a facility shall ensure that a written notice of the rights, obligations, and prohibitions set forth in this part is posted in a prominent place in each facility and read or explained to residents who cannot read. This notice shall include the name, address, and telephone numbers of the local ombudsman council and central abuse hotline and, when applicable, the Advocacy Center for Persons with Disabilities, Inc., and the Florida local advocacy council, where complaints may be lodged. The <a href="Licensee facility">Licensee facility</a> must ensure a resident's access to a telephone to call the local ombudsman council, central abuse hotline, Advocacy Center for Persons with Disabilities, Inc., and the Florida local advocacy council.

(3)

(b) In order to determine whether the <u>licensee</u> facility is adequately protecting residents' rights, the biennial survey shall include private informal conversations with a sample of residents and consultation with the ombudsman council in the

planning and service area in which the facility is located to discuss residents' experiences within the facility.

Section 6. Section 429.285, Florida Statutes, is created to read:

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- 429.285 Resident relocation or termination of residency; requirements and procedures.--
- (1) A facility licensed under this part must permit a resident to remain in the facility. Relocation or termination of residency of a resident may not occur unless:
- (a) The relocation or termination of residency is necessary for the resident's welfare and the resident's needs cannot be met in the facility;
- (b) The relocation or termination of residency is appropriate because the resident's health has improved sufficiently so that the resident no longer needs the services provided by the facility;
- (c) The health and safety of other residents or facility employees would be endangered;
- (d) The resident has failed, after at least 30 days' notice, to provide payment for his or her stay in the facility;
  - (e) The facility ceases to operate;
- (f) There is a documented pattern of harmful and offensive behavior by the resident; or
- (g) The contract provided for under s. 429.24(1) between the licensee and the resident expires on its own terms.
- (2) When a relocation or termination of residency is initiated by the licensee, the administrator that is relocating the resident or terminating residency, or an individual employed

Page 10 of 21

by the facility who is designated by the administrator to act on behalf of the administration, must sign the notice of relocation or termination of residency. Any notice indicating a medical reason for relocation or termination of residency must be signed by the resident's physician or include an attached physician's written order for the relocation or termination of residency.

- (3) At least 45 days prior to a proposed relocation or termination of residency, a licensee must provide by certified mail advance written notice of the proposed relocation or termination of residency to the resident and, if known, to a family member or the resident's legal guardian or representative.
- (4) The notice must be in writing and contain all information required by state and federal laws, rules, and regulations. A copy of the notice must be placed in the resident's file. The agency shall develop a standard form to be used by all facilities licensed under this part for purposes of notifying residents of a relocation or termination of residency. In addition to any other pertinent information included, the form shall:
- (a) Specify the reason allowed under state law justifying the relocation or termination of the residency, with an explanation to support this action.
- (b) State the effective date of the relocation or termination of residency and the location to which the resident is being relocated.
- (c) Include the right and means to request the local longterm care ombudsman council to review the notice of relocation

Page 11 of 21

or termination of residency.

initiated by a licensee must be reported to the Office of State
Long-Term Care Ombudsman by mail, electronic mail, or facsimile
within 5 business days after a resident's receipt of a notice to
relocate or terminate residency. The Office of State Long-Term
Care Ombudsman shall compile and publish the information
collected from such notices in the annual report required by s.
400.0065(2)(i). A resident may request that the local long-term
care ombudsman council review any notice of relocation or
termination of residency given to the resident. When requested
by a resident to review such notice, the local long-term care
ombudsman council shall do so within 5 business days after
receipt of the request.

- (6) In the event of an emergency relocation or termination of residency, as provided under s. 429.28(1)(k), notice shall be provided to the resident, the resident's legal guardian or representative, and the local long-term care ombudsman council by telephone or in person. The written notice shall be given before the relocation or termination of residency, if possible, and no later than 5 business days after the relocation or termination of residency. A local long-term care ombudsman council conducting a review under this section shall do so within 2 business days after receipt of the request. The resident's file must include documentation indicating who was contacted, whether the contact was by telephone or in person, and the date and time of the contact.
  - (7) After receipt of a notice required under this section,

Page 12 of 21

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the local long-term care ombudsman council may request a private informal conversation with a resident to whom the notice is directed, and, if known, a family member or the resident's legal guardian or representative, to ensure that the licensee is proceeding with the relocation or termination of residency in accordance with the requirements of this section.

- (8) The agency may adopt rules pursuant to ss. 120.536(1) and 120.54 to administer this section.
- Section 7. Paragraphs (b) and (c) of subsection (3) of section 429.07, Florida Statutes, are amended to read:
  - 429.07 License required; fee.--

- (3) In addition to the requirements of s. 408.806, each license granted by the agency must state the type of care for which the license is granted. Licenses shall be issued for one or more of the following categories of care: standard, extended congregate care, limited nursing services, or limited mental health.
- (b) An extended congregate care license shall be issued to facilities providing, directly or through contract, services beyond those authorized in paragraph (a), including acts performed pursuant to part I of chapter 464 by persons licensed thereunder, and supportive services defined by rule to persons who otherwise would be disqualified from continued residence in a facility licensed under this part.
- 1. In order for extended congregate care services to be provided in a facility licensed under this part, the agency must first determine that all requirements established in law and rule are met and must specifically designate, on the facility's

Page 13 of 21

license, that such services may be provided and whether the designation applies to all or part of a facility. Such designation may be made at the time of initial licensure or relicensure, or upon request in writing by a licensee under this part and part II of chapter 408. Notification of approval or denial of such request shall be made in accordance with part II of chapter 408. Existing facilities qualifying to provide extended congregate care services must have maintained a standard license and may not have been subject to administrative sanctions during the previous 2 years, or since initial licensure if the facility has been licensed for less than 2 years, for any of the following reasons:

a. A class I or class II violation;

- b. Three or more repeat or recurring class III violations of identical or similar resident care standards as specified in rule from which a pattern of noncompliance is found by the agency;
- c. Three or more class III violations that were not corrected in accordance with the corrective action plan approved by the agency;
- d. Violation of resident care standards resulting in a requirement to employ the services of a consultant pharmacist or consultant dietitian;
- e. Denial, suspension, or revocation of a license for another facility under this part in which the applicant for an extended congregate care license has at least 25 percent ownership interest; or

Page 14 of 21

f. Imposition of a moratorium pursuant to this part or part II of chapter 408 or initiation of injunctive proceedings.

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Facilities that are licensed to provide extended congregate care services shall maintain a written progress report on each person who receives such services, which report describes the type, amount, duration, scope, and outcome of services that are rendered and the general status of the resident's health. A registered nurse, or appropriate designee, representing the agency shall visit such facilities at least quarterly to monitor residents who are receiving extended congregate care services and to determine if the facility is in compliance with this part, part II of chapter 408, and rules that relate to extended congregate care. One of these visits may be in conjunction with the regular survey. The monitoring visits may be provided through contractual arrangements with appropriate community agencies. A registered nurse shall serve as part of the team that inspects such facility. The agency may waive one of the required yearly monitoring visits for a facility that has been licensed for at least 24 months to provide extended congregate care services, if, during the inspection, the registered nurse determines that extended congregate care services are being provided appropriately, and if the facility has no class I or class II violations and no uncorrected class III violations. Before such decision is made, the agency shall consult with the long-term care ombudsman council for the area in which the facility is located to determine if any complaints have been made and substantiated about the quality of services or care. The agency may not waive

Page 15 of 21

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one of the required yearly monitoring visits if complaints have been made and substantiated.

3. Facilities that are licensed to provide extended congregate care services shall:

- a. Demonstrate the capability to meet unanticipated resident service needs.
- b. Offer a physical environment that promotes a homelike setting, provides for resident privacy, promotes resident independence, and allows sufficient congregate space as defined by rule.
- c. Have sufficient staff available, taking into account the physical plant and firesafety features of the building, to assist with the evacuation of residents in an emergency, as necessary.
- d. Adopt and follow policies and procedures that maximize resident independence, dignity, choice, and decisionmaking to permit residents to age in place to the extent possible, so that moves due to changes in functional status are minimized or avoided.
- e. Allow residents or, if applicable, a resident's representative, designee, surrogate, guardian, or attorney in fact to make a variety of personal choices, participate in developing service plans, and share responsibility in decisionmaking.
  - f. Implement the concept of managed risk.
- g. Provide, either directly or through contract, the services of a person licensed pursuant to part I of chapter 464.

h. In addition to the training mandated in s. 429.52, provide specialized training as defined by rule for facility staff.

- 4. Facilities licensed to provide extended congregate care services are exempt from the criteria for continued residency as set forth in rules adopted under s. 429.41. Facilities so licensed shall adopt their own requirements within guidelines for continued residency set forth by rule. However, such facilities may not serve residents who require 24-hour nursing supervision. Facilities licensed to provide extended congregate care services shall provide each resident with a written copy of facility policies governing admission and retention.
- 5. The primary purpose of extended congregate care services is to allow residents, as they become more impaired, the option of remaining in a familiar setting from which they would otherwise be disqualified for continued residency. A facility licensed to provide extended congregate care services may also admit an individual who exceeds the admission criteria for a facility with a standard license, if the individual is determined appropriate for admission to the extended congregate care facility.
- 6. Before admission of an individual to a facility licensed to provide extended congregate care services, the individual must undergo a medical examination as provided in s. 429.26(4) and the facility must develop a preliminary service plan for the individual.
- 7. When a facility can no longer provide or arrange for services in accordance with the resident's service plan and

Page 17 of 21

needs and the facility's policy, the facility shall make
arrangements for relocating the person in accordance with s.
474 429.285 429.28(1)(k).

- 8. Failure to provide extended congregate care services may result in denial of extended congregate care license renewal.
- 9. No later than January 1 of each year, the department, in consultation with the agency, shall prepare and submit to the Governor, the President of the Senate, the Speaker of the House of Representatives, and the chairs of appropriate legislative committees, a report on the status of, and recommendations related to, extended congregate care services. The status report must include, but need not be limited to, the following information:
- a. A description of the facilities licensed to provide such services, including total number of beds licensed under this part.
- b. The number and characteristics of residents receiving such services.
- c. The types of services rendered that could not be provided through a standard license.
- d. An analysis of deficiencies cited during licensure inspections.
- e. The number of residents who required extended congregate care services at admission and the source of admission.
  - f. Recommendations for statutory or regulatory changes.

Page 18 of 21

g. The availability of extended congregate care to state clients residing in facilities licensed under this part and in need of additional services, and recommendations for appropriations to subsidize extended congregate care services for such persons.

- h. Such other information as the department considers appropriate.
- (c) A limited nursing services license shall be issued to a facility that provides services beyond those authorized in paragraph (a) and as specified in this paragraph.
- 1. In order for limited nursing services to be provided in a facility licensed under this part, the agency must first determine that all requirements established in law and rule are met and must specifically designate, on the facility's license, that such services may be provided. Such designation may be made at the time of initial licensure or relicensure, or upon request in writing by a licensee under this part and part II of chapter 408. Notification of approval or denial of such request shall be made in accordance with part II of chapter 408. Existing facilities qualifying to provide limited nursing services shall have maintained a standard license and may not have been subject to administrative sanctions that affect the health, safety, and welfare of residents for the previous 2 years or since initial licensure if the facility has been licensed for less than 2 years.
- 2. Facilities that are licensed to provide limited nursing services shall maintain a written progress report on each person who receives such nursing services, which report describes the

Page 19 of 21

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type, amount, duration, scope, and outcome of services that are rendered and the general status of the resident's health. A registered nurse representing the agency shall visit such facilities at least twice a year to monitor residents who are receiving limited nursing services and to determine if the facility is in compliance with applicable provisions of this part, part II of chapter 408, and related rules. The monitoring visits may be provided through contractual arrangements with appropriate community agencies. A registered nurse shall also serve as part of the team that inspects such facility.

- 3. A person who receives limited nursing services under this part must meet the admission criteria established by the agency for assisted living facilities. When a resident no longer meets the admission criteria for a facility licensed under this part, arrangements for relocating the person shall be made in accordance with s.  $\underline{429.285}$   $\underline{429.28(1)}$  (k), unless the facility is licensed to provide extended congregate care services.
- Section 8. Subsection (1) of section 429.31, Florida Statutes, is amended to read:
  - 429.31 Closing of facility; notice; penalty.--
- (1) In addition to the requirements of part II of chapter 408, the facility shall inform each resident or the next of kin, legal representative, or agency acting on each resident's behalf, of the fact and the proposed time of discontinuance of operation, following the notification requirements provided in s. 429.285 429.28(1)(k). In the event a resident has no person to represent him or her, the facility shall be responsible for referral to an appropriate social service agency for placement.

Page 20 of 21

Section 9. This act shall take effect October 1, 2008.

Page 21 of 21