

By the Committee on Children, Families, and Elder Affairs

586-00461-14

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1 A bill to be entitled
2 An act relating to assisted living facilities;
3 amending s. 394.4574, F.S.; providing that Medicaid
4 prepaid behavioral health plans are responsible for
5 enrolled mental health residents; providing that
6 managing entities under contract with the Department
7 of Children and Families are responsible for mental
8 health residents who are not enrolled with a Medicaid
9 prepaid behavioral health plan; deleting a provision
10 to conform to changes made by the act; requiring that
11 the community living support plan be completed and
12 provided to the administrator of a facility upon the
13 mental health resident's admission; requiring the
14 community living support plan to be updated when there
15 is a significant change to the mental health
16 resident's behavioral health; requiring the case
17 manager assigned to a mental health resident of an
18 assisted living facility that holds a limited mental
19 health license to keep a record of the date and time
20 of face-to-face interactions with the resident and to
21 make the record available to the responsible entity
22 for inspection; requiring that the record be
23 maintained for a specified time; requiring the
24 responsible entity to ensure that there is adequate
25 and consistent monitoring and enforcement of community
26 living support plans and cooperative agreements and
27 that concerns are reported to the appropriate
28 regulatory oversight organization under certain
29 circumstances; amending s. 400.0074, F.S.; requiring

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30 that an administrative assessment conducted by a local
31 council be comprehensive in nature and focus on
32 factors affecting the rights, health, safety, and
33 welfare of nursing home residents; requiring a local
34 council to conduct an exit consultation with the
35 facility administrator or administrator designee to
36 discuss issues and concerns in areas affecting the
37 rights, health, safety, and welfare of residents and
38 make recommendations for improvement; amending s.
39 400.0078, F.S.; requiring that a resident or a
40 representative of a resident of a long-term care
41 facility be informed that retaliatory action cannot be
42 taken against a resident for presenting grievances or
43 for exercising any other resident right; amending s.
44 429.02, F.S.; conforming a cross-reference; providing
45 a definition; amending s. 429.07, F.S.; requiring that
46 an extended congregate care license be issued to
47 certain facilities that have been licensed as assisted
48 living facilities under certain circumstances and
49 authorizing the issuance of such license if a
50 specified condition is met; providing the purpose of
51 an extended congregate care license; providing that
52 the initial extended congregate care license of an
53 assisted living facility is provisional under certain
54 circumstances; requiring a licensee to notify the
55 Agency for Health Care Administration if it accepts a
56 resident who qualifies for extended congregate care
57 services; requiring the agency to inspect the facility
58 for compliance with the requirements of an extended

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59 congregate care license; requiring the issuance of an
60 extended congregate care license under certain
61 circumstances; requiring the licensee to immediately
62 suspend extended congregate care services under
63 certain circumstances; requiring a registered nurse
64 representing the agency to visit the facility at least
65 twice a year, rather than quarterly, to monitor
66 residents who are receiving extended congregate care
67 services; authorizing the agency to waive one of the
68 required yearly monitoring visits under certain
69 circumstances; authorizing the agency to deny or
70 revoke a facility's extended congregate care license;
71 requiring a registered nurse representing the agency
72 to visit the facility at least annually, rather than
73 twice a year, to monitor residents who are receiving
74 limited nursing services; providing that such
75 monitoring visits may be conducted in conjunction with
76 other agency inspections; authorizing the agency to
77 waive the required yearly monitoring visit for a
78 facility that is licensed to provide limited nursing
79 services under certain circumstances; amending s.
80 429.075, F.S.; requiring an assisted living facility
81 that serves one or more mental health residents to
82 obtain a limited mental health license; amending s.
83 429.14, F.S.; revising the circumstances under which
84 the agency may deny, revoke, or suspend the license of
85 an assisted living facility and impose an
86 administrative fine; requiring the agency to deny or
87 revoke the license of an assisted living facility

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88 under certain circumstances; requiring the agency to
89 impose an immediate moratorium on the license of an
90 assisted living facility under certain circumstances;
91 deleting a provision requiring the agency to provide a
92 list of facilities with denied, suspended, or revoked
93 licenses to the Department of Business and
94 Professional Regulation; exempting a facility from the
95 45-day notice requirement if it is required to
96 relocate some or all of its residents; amending s.
97 429.178, F.S.; conforming cross-references; amending
98 s. 429.19, F.S.; revising the amounts and uses of
99 administrative fines; requiring the agency to levy a
100 fine for violations that are corrected before an
101 inspection if noncompliance occurred within a
102 specified period of time; deleting factors that the
103 agency is required to consider in determining
104 penalties and fines; amending s. 429.256, F.S.;
105 revising the term "assistance with self-administration
106 of medication" as it relates to the Assisted Living
107 Facilities Act; amending s. 429.28, F.S.; providing
108 notice requirements to inform facility residents that
109 the identity of the resident and complainant in any
110 complaint made to the State Long-Term Care Ombudsman
111 Program or a local long-term care ombudsman council is
112 confidential and that retaliatory action cannot be
113 taken against a resident for presenting grievances or
114 for exercising any other resident right; requiring
115 that a facility that terminates an individual's
116 residency after the filing of a complaint be fined if

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117 good cause is not shown for the termination; amending
118 s. 429.34, F.S.; requiring certain persons to report
119 elder abuse in assisted living facilities; requiring
120 the agency to regularly inspect every licensed
121 assisted living facility; requiring the agency to
122 conduct more frequent inspections under certain
123 circumstances; requiring the licensee to pay a fee for
124 the cost of additional inspections; requiring the
125 agency to annually adjust the fee; amending s. 429.41,
126 F.S.; providing that certain staffing requirements
127 apply only to residents in continuing care facilities
128 who are receiving the relevant service; amending s.
129 429.52, F.S.; requiring each newly hired employee of
130 an assisted living facility to attend a preservice
131 orientation provided by the assisted living facility;
132 requiring the administrator to attest to the
133 completion of the preservice orientation; requiring
134 two additional hours of training for assistance with
135 medication; conforming a cross-reference; creating s.
136 429.55, F.S.; providing that a facility may apply for
137 a flexible bed license; requiring a facility that has
138 a flexible bed license to keep a log, specify certain
139 information in a flexible bed contract, and retain
140 certain records; requiring a licensed flexible bed
141 facility to provide state surveyors with access to the
142 log and certain independent living units; authorizing
143 state surveyors to interview certain residents;
144 providing that a flexible bed license does not
145 preclude a resident from obtaining certain services;

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146 requiring the Office of Program Policy Analysis and
 147 Government Accountability to study the reliability of
 148 facility surveys and submit to the Governor and the
 149 Legislature its findings and recommendations;
 150 requiring the agency to implement a rating system of
 151 assisted living facilities by a specified date, adopt
 152 rules, and create content for the agency's website
 153 that makes available to consumers information
 154 regarding assisted living facilities; providing
 155 criteria for the content; providing an effective date.

156
 157 Be It Enacted by the Legislature of the State of Florida:

158
 159 Section 1. Section 394.4574, Florida Statutes, is amended
 160 to read:

161 394.4574 ~~Department~~ Responsibilities for coordination of
 162 services for a mental health resident who resides in an assisted
 163 living facility that holds a limited mental health license.—

164 (1) As used in this section, the term "mental health
 165 resident" ~~"mental health resident,"~~ ~~for purposes of this~~
 166 ~~section,~~ means an individual who receives social security
 167 disability income due to a mental disorder as determined by the
 168 Social Security Administration or receives supplemental security
 169 income due to a mental disorder as determined by the Social
 170 Security Administration and receives optional state
 171 supplementation.

172 (2) Medicaid prepaid behavioral health plans are
 173 responsible for enrolled mental health residents, and managing
 174 entities under contract with the department are responsible for

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175 mental health residents who are not enrolled with a Medicaid
176 prepaid behavioral health plan. A Medicaid prepaid behavioral
177 health plan or a managing entity, as appropriate, shall ~~The~~
178 ~~department must ensure that:~~

179 (a) A mental health resident has been assessed by a
180 psychiatrist, clinical psychologist, clinical social worker, or
181 psychiatric nurse, or an individual who is supervised by one of
182 these professionals, and determined to be appropriate to reside
183 in an assisted living facility. The documentation must be
184 provided to the administrator of the facility within 30 days
185 after the mental health resident has been admitted to the
186 facility. An evaluation completed upon discharge from a state
187 mental hospital meets the requirements of this subsection
188 related to appropriateness for placement as a mental health
189 resident if it was completed within 90 days before ~~prior to~~
190 admission to the facility.

191 (b) A cooperative agreement, as required in s. 429.075, is
192 developed by ~~between~~ the mental health care services provider
193 that serves a mental health resident and the administrator of
194 the assisted living facility with a limited mental health
195 license in which the mental health resident is living. ~~Any~~
196 ~~entity that provides Medicaid prepaid health plan services shall~~
197 ~~ensure the appropriate coordination of health care services with~~
198 ~~an assisted living facility in cases where a Medicaid recipient~~
199 ~~is both a member of the entity's prepaid health plan and a~~
200 ~~resident of the assisted living facility. If the entity is at~~
201 ~~risk for Medicaid targeted case management and behavioral health~~
202 ~~services, the entity shall inform the assisted living facility~~
203 ~~of the procedures to follow should an emergent condition arise.~~

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204 (c) The community living support plan, as defined in s.
205 429.02, has been prepared by a mental health resident and his or
206 her ~~a mental health case manager of that resident~~ in
207 consultation with the administrator of the facility or the
208 administrator's designee. The plan must be completed and
209 provided to the administrator of the assisted living facility
210 with a limited mental health license in which the mental health
211 resident lives upon the resident's admission. The support plan
212 and the agreement may be in one document.

213 (d) The assisted living facility with a limited mental
214 health license is provided with documentation that the
215 individual meets the definition of a mental health resident.

216 (e) The mental health services provider assigns a case
217 manager to each mental health resident for whom the entity is
218 responsible ~~who lives in an assisted living facility with a~~
219 ~~limited mental health license.~~ The case manager shall coordinate
220 ~~is responsible for coordinating~~ the development ~~of~~ and
221 implementation of the community living support plan defined in
222 s. 429.02. The plan must be updated at least annually, or when
223 there is a significant change in the resident's behavioral
224 health status, such as an inpatient admission or a change in
225 medication, level of service, or residence. Each case manager
226 shall keep a record of the date and time of any face-to-face
227 interaction with the resident and make the record available to
228 the responsible entity for inspection. The record must be
229 retained for at least 2 years after the date of the most recent
230 interaction.

231 (f) Adequate and consistent monitoring and enforcement of
232 community living support plans and cooperative agreements are

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233 conducted by the resident's case manager.

234 (g) Concerns are reported to the appropriate regulatory
235 oversight organization if a regulated provider fails to deliver
236 appropriate services or otherwise acts in a manner that has the
237 potential to result in harm to the resident.

238 (3) The Secretary of Children and Families ~~Family Services~~,
239 in consultation with the Agency for Health Care Administration,
240 shall ~~annually~~ require each district administrator to develop,
241 with community input, a detailed annual plan that demonstrates
242 ~~detailed plans that demonstrate~~ how the district will ensure the
243 provision of state-funded mental health and substance abuse
244 treatment services to residents of assisted living facilities
245 that hold a limited mental health license. This plan ~~These plans~~
246 must be consistent with the substance abuse and mental health
247 district plan developed pursuant to s. 394.75 and must address
248 case management services; access to consumer-operated drop-in
249 centers; access to services during evenings, weekends, and
250 holidays; supervision of the clinical needs of the residents;
251 and access to emergency psychiatric care.

252 Section 2. Subsection (1) of section 400.0074, Florida
253 Statutes, is amended, and paragraph (h) is added to subsection
254 (2) of that section, to read:

255 400.0074 Local ombudsman council onsite administrative
256 assessments.—

257 (1) In addition to any specific investigation conducted
258 pursuant to a complaint, the local council shall conduct, at
259 least annually, an onsite administrative assessment of each
260 nursing home, assisted living facility, and adult family-care
261 home within its jurisdiction. This administrative assessment

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262 must be comprehensive in nature and must ~~shall~~ focus on factors
263 affecting residents' ~~the~~ rights, health, safety, and welfare ~~of~~
264 ~~the residents~~. Each local council is encouraged to conduct a
265 similar onsite administrative assessment of each additional
266 long-term care facility within its jurisdiction.

267 (2) An onsite administrative assessment conducted by a
268 local council shall be subject to the following conditions:

269 (h) The local council shall conduct an exit consultation
270 with the facility administrator or administrator designee to
271 discuss issues and concerns in areas affecting residents'
272 rights, health, safety, and welfare and, if needed, make
273 recommendations for improvement.

274 Section 3. Subsection (2) of section 400.0078, Florida
275 Statutes, is amended to read:

276 400.0078 Citizen access to State Long-Term Care Ombudsman
277 Program services.—

278 (2) ~~Every resident or representative of a resident shall~~
279 ~~receive~~, Upon admission to a long-term care facility, each
280 resident or representative of a resident must receive
281 information regarding the purpose of the State Long-Term Care
282 Ombudsman Program, the statewide toll-free telephone number for
283 receiving complaints, information that retaliatory action cannot
284 be taken against a resident for presenting grievances or for
285 exercising any other resident right, and other relevant
286 information regarding how to contact the program. Each resident
287 or his or her representative ~~Residents or their representatives~~
288 must be furnished additional copies of this information upon
289 request.

290 Section 4. Subsection (11) of section 429.02, Florida

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291 Statutes, is amended, present subsections (12) through (26) of
292 that section are redesignated as subsections (13) through (27),
293 respectively, and a new subsection (12) is added to that
294 section, to read:

295 429.02 Definitions.—When used in this part, the term:

296 (11) "Extended congregate care" means acts beyond those
297 authorized in subsection (17) which ~~(16) that~~ may be performed
298 by persons licensed under pursuant to part I of chapter 464 by
299 ~~persons licensed thereunder~~ while carrying out their
300 professional duties, and other supportive services which may be
301 specified by rule. The purpose of such services is to enable
302 residents to age in place in a residential environment despite
303 mental or physical limitations that might otherwise disqualify
304 them from residency in a facility licensed under this part.

305 (12) "Flexible bed" means a licensed bed designated to
306 allow a continuing care facility licensed under chapter 651 or a
307 retirement community that offers other services pursuant to this
308 part in addition to nursing home, home health, or adult day care
309 services licensed under this chapter or chapter 400 on a single
310 campus to provide assisted living services for up to 15 percent
311 of independent living residents residing in residential units
312 designated for independent living on the campus. A flexible bed
313 allows a resident who needs personal care services, but who does
314 not require a secure care setting, to age in place. A flexible
315 bed is reserved for individuals who have been a contract holder
316 of a facility licensed under chapter 651 or a resident of a
317 retirement community for at least 6 months.

318 Section 5. Paragraphs (b) and (c) of subsection (3) of
319 section 429.07, Florida Statutes, are amended to read:

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320 429.07 License required; fee.—

321 (3) In addition to the requirements of s. 408.806, each
322 license granted by the agency must state the type of care for
323 which the license is granted. Licenses shall be issued for one
324 or more of the following categories of care: standard, extended
325 congregate care, limited nursing services, or limited mental
326 health.

327 (b) An extended congregate care license shall be issued to
328 each facility that has been licensed as an assisted living
329 facility for 2 or more years and that provides services
330 ~~facilities providing~~, directly or through contract, ~~services~~
331 beyond those authorized in paragraph (a), including services
332 performed by persons licensed under part I of chapter 464 and
333 supportive services, as defined by rule, to persons who would
334 otherwise be disqualified from continued residence in a facility
335 licensed under this part. An extended congregate care license
336 may be issued to a facility that has a provisional extended
337 congregate care license and meets the requirements for licensure
338 under subparagraph 2. The primary purpose of extended congregate
339 care services is to allow residents the option of remaining in a
340 familiar setting from which they would otherwise be disqualified
341 for continued residency as they become more impaired. A facility
342 licensed to provide extended congregate care services may also
343 admit an individual who exceeds the admission criteria for a
344 facility with a standard license, if he or she is determined
345 appropriate for admission to the extended congregate care
346 facility.

347 1. In order for extended congregate care services to be
348 provided, the agency must first determine that all requirements

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349 established in law and rule are met and must specifically
350 designate, on the facility's license, that such services may be
351 provided and whether the designation applies to all or part of
352 the facility. This ~~Such~~ designation may be made at the time of
353 initial licensure or relicensure, or upon request in writing by
354 a licensee under this part and part II of chapter 408. The
355 notification of approval or the denial of the request shall be
356 made in accordance with part II of chapter 408. Each existing
357 facility that qualifies ~~facilities qualifying~~ to provide
358 extended congregate care services must have maintained a
359 standard license and may not have been subject to administrative
360 sanctions during the previous 2 years, or since initial
361 licensure if the facility has been licensed for less than 2
362 years, for any of the following reasons:

- 363 a. A class I or class II violation;
- 364 b. Three or more repeat or recurring class III violations
365 of identical or similar resident care standards from which a
366 pattern of noncompliance is found by the agency;
- 367 c. Three or more class III violations that were not
368 corrected in accordance with the corrective action plan approved
369 by the agency;
- 370 d. Violation of resident care standards which results in
371 requiring the facility to employ the services of a consultant
372 pharmacist or consultant dietitian;
- 373 e. Denial, suspension, or revocation of a license for
374 another facility licensed under this part in which the applicant
375 for an extended congregate care license has at least 25 percent
376 ownership interest; or
- 377 f. Imposition of a moratorium pursuant to this part or part

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378 II of chapter 408 or initiation of injunctive proceedings.

379
380 The agency may deny or revoke a facility's extended congregate
381 care license for not meeting the criteria for an extended
382 congregate care license as provided in this subparagraph.

383 2. If an assisted living facility has been licensed for
384 less than 2 years but meets all other licensure requirements for
385 an extended congregate care license, it shall be issued a
386 provisional extended congregate care license for a period of 6
387 months. Within the first 3 months after the provisional license
388 is issued, the licensee shall notify the agency when it has
389 admitted an extended congregate care resident, after which an
390 unannounced inspection shall be made to determine compliance
391 with requirements of an extended congregate care license. If the
392 licensee demonstrates compliance with all of the requirements of
393 an extended congregate care license during the inspection, the
394 licensee shall be issued an extended congregate care license. In
395 addition to sanctions authorized under this part, if violations
396 are found during the inspection and the licensee fails to
397 demonstrate compliance with all assisted living requirements
398 during a followup inspection, the licensee shall immediately
399 suspend extended congregate care services, and the provisional
400 extended congregate care license expires.

401 3.2. A facility that is licensed to provide extended
402 congregate care services shall maintain a written progress
403 report on each person who receives services which describes the
404 type, amount, duration, scope, and outcome of services that are
405 rendered and the general status of the resident's health. A
406 registered nurse, or appropriate designee, representing the

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407 agency shall visit the facility at least twice a year ~~quarterly~~
408 to monitor residents who are receiving extended congregate care
409 services and to determine if the facility is in compliance with
410 this part, part II of chapter 408, and relevant rules. One of
411 the visits may be in conjunction with the regular survey. The
412 monitoring visits may be provided through contractual
413 arrangements with appropriate community agencies. A registered
414 nurse shall serve as part of the team that inspects the
415 facility. The agency may waive one of the required yearly
416 monitoring visits for a facility that has:

417 a. Held an extended congregate care license for at least 24
418 months; ~~been licensed for at least 24 months to provide extended~~
419 ~~congregate care services, if, during the inspection, the~~
420 ~~registered nurse determines that extended congregate care~~
421 ~~services are being provided appropriately, and if the facility~~
422 ~~has~~

423 b. No class I or class II violations and no uncorrected
424 class III violations; and-

425 c. No confirmed ombudsman council complaints that resulted
426 in a citation for licensure ~~The agency must first consult with~~
427 ~~the long-term care ombudsman council for the area in which the~~
428 ~~facility is located to determine if any complaints have been~~
429 ~~made and substantiated about the quality of services or care.~~
430 ~~The agency may not waive one of the required yearly monitoring~~
431 ~~visits if complaints have been made and substantiated.~~

432 4.3- A facility that is licensed to provide extended
433 congregate care services must:

434 a. Demonstrate the capability to meet unanticipated
435 resident service needs.

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436 b. Offer a physical environment that promotes a homelike
437 setting, provides for resident privacy, promotes resident
438 independence, and allows sufficient congregate space as defined
439 by rule.

440 c. Have sufficient staff available, taking into account the
441 physical plant and firesafety features of the building, to
442 assist with the evacuation of residents in an emergency.

443 d. Adopt and follow policies and procedures that maximize
444 resident independence, dignity, choice, and decisionmaking to
445 permit residents to age in place, so that moves due to changes
446 in functional status are minimized or avoided.

447 e. Allow residents or, if applicable, a resident's
448 representative, designee, surrogate, guardian, or attorney in
449 fact to make a variety of personal choices, participate in
450 developing service plans, and share responsibility in
451 decisionmaking.

452 f. Implement the concept of managed risk.

453 g. Provide, directly or through contract, the services of a
454 person licensed under part I of chapter 464.

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

458 5.4. A facility that is licensed to provide extended
459 congregate care services is exempt from the criteria for
460 continued residency set forth in rules adopted under s. 429.41.
461 A licensed facility must adopt its own requirements within
462 guidelines for continued residency set forth by rule. However,
463 the facility may not serve residents who require 24-hour nursing
464 supervision. A licensed facility that provides extended

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465 congregate care services must also provide each resident with a
466 written copy of facility policies governing admission and
467 retention.

468 ~~5. The primary purpose of extended congregate care services~~
469 ~~is to allow residents, as they become more impaired, the option~~
470 ~~of remaining in a familiar setting from which they would~~
471 ~~otherwise be disqualified for continued residency. A facility~~
472 ~~licensed to provide extended congregate care services may also~~
473 ~~admit an individual who exceeds the admission criteria for a~~
474 ~~facility with a standard license, if the individual is~~
475 ~~determined appropriate for admission to the extended congregate~~
476 ~~care facility.~~

477 6. Before the admission of an individual to a facility
478 licensed to provide extended congregate care services, the
479 individual must undergo a medical examination as provided in s.
480 429.26(4) and the facility must develop a preliminary service
481 plan for the individual.

482 7. If ~~When~~ a facility can no longer provide or arrange for
483 services in accordance with the resident's service plan and
484 needs and the facility's policy, the facility must ~~shall~~ make
485 arrangements for relocating the person in accordance with s.
486 429.28(1)(k).

487 ~~8. Failure to provide extended congregate care services may~~
488 ~~result in denial of extended congregate care license renewal.~~

489 (c) A limited nursing services license shall be issued to a
490 facility that provides services beyond those authorized in
491 paragraph (a) and as specified in this paragraph.

492 1. In order for limited nursing services to be provided in
493 a facility licensed under this part, the agency must first

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494 determine that all requirements established in law and rule are
495 met and must specifically designate, on the facility's license,
496 that such services may be provided. This ~~Such~~ designation may be
497 made at the time of initial licensure or licensure renewal
498 ~~relicensure~~, or upon request in writing by a licensee under this
499 part and part II of chapter 408. Notification of approval or
500 denial of such request shall be made in accordance with part II
501 of chapter 408. An existing facility that qualifies ~~facilities~~
502 ~~qualifying~~ to provide limited nursing services must ~~shall~~ have
503 maintained a standard license and may not have been subject to
504 administrative sanctions that affect the health, safety, and
505 welfare of residents for the previous 2 years or since initial
506 licensure if the facility has been licensed for less than 2
507 years.

508 2. A facility ~~Facilities~~ that is ~~are~~ licensed to provide
509 limited nursing services shall maintain a written progress
510 report on each person who receives such nursing services. The
511 ~~which~~ report must describe ~~describes~~ the type, amount, duration,
512 scope, and outcome of services that are rendered and the general
513 status of the resident's health. A registered nurse representing
514 the agency shall visit the facility ~~such facilities~~ at least
515 annually ~~twice a year~~ to monitor residents who are receiving
516 limited nursing services and to determine if the facility is in
517 compliance with applicable provisions of this part, part II of
518 chapter 408, and related rules. The monitoring visits may be
519 provided through contractual arrangements with appropriate
520 community agencies. A registered nurse shall also serve as part
521 of the team that inspects such facility. Visits may be in
522 conjunction with other agency inspections. The agency may waive

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523 the required yearly monitoring visit for a facility that has:

524 a. Had a limited nursing services license for at least 24
525 months;

526 b. No class I or class II violations and no uncorrected
527 class III violations; and

528 c. No confirmed ombudsman council complaints that resulted
529 in a citation for licensure.

530 3. A person who receives limited nursing services under
531 this part must meet the admission criteria established by the
532 agency for assisted living facilities. When a resident no longer
533 meets the admission criteria for a facility licensed under this
534 part, arrangements for relocating the person shall be made in
535 accordance with s. 429.28(1)(k), unless the facility is licensed
536 to provide extended congregate care services.

537 Section 6. Section 429.075, Florida Statutes, is amended to
538 read:

539 429.075 Limited mental health license.—An assisted living
540 facility that serves one ~~three~~ or more mental health residents
541 must obtain a limited mental health license.

542 (1) To obtain a limited mental health license, a facility
543 must hold a standard license as an assisted living facility,
544 must not have any current uncorrected ~~deficiencies or~~
545 violations, and must ensure that, within 6 months after
546 receiving a limited mental health license, the facility
547 administrator and the staff of the facility who are in direct
548 contact with mental health residents must complete training of
549 no less than 6 hours related to their duties. This ~~Such~~
550 designation may be made at the time of initial licensure or
551 relicensure or upon request in writing by a licensee under this

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552 part and part II of chapter 408. Notification of approval or
553 denial of such request shall be made in accordance with this
554 part, part II of chapter 408, and applicable rules. This
555 training must ~~will~~ be provided by or approved by the Department
556 of Children and Families ~~Family Services~~.

557 (2) A facility that is ~~Facilities~~ licensed to provide
558 services to mental health residents must ~~shall~~ provide
559 appropriate supervision and staffing to provide for the health,
560 safety, and welfare of such residents.

561 (3) A facility that has a limited mental health license
562 must:

563 (a) Have a copy of each mental health resident's community
564 living support plan and the cooperative agreement with the
565 mental health care services provider. The support plan and the
566 agreement may be combined.

567 (b) Have documentation ~~that is~~ provided by the Department
568 of Children and Families ~~Family Services~~ that each mental health
569 resident has been assessed and determined to be able to live in
570 the community in an assisted living facility that has ~~with~~ a
571 limited mental health license.

572 (c) Make the community living support plan available for
573 inspection by the resident, the resident's legal guardian or
574 ~~the resident's~~ health care surrogate, and other individuals who
575 have a lawful basis for reviewing this document.

576 (d) Assist the mental health resident in carrying out the
577 activities identified in the individual's community living
578 support plan.

579 (4) A facility that has ~~with~~ a limited mental health
580 license may enter into a cooperative agreement with a private

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581 mental health provider. For purposes of the limited mental
582 health license, the private mental health provider may act as
583 the case manager.

584 Section 7. Section 429.14, Florida Statutes, is amended to
585 read:

586 429.14 Administrative penalties.—

587 (1) In addition to the requirements of part II of chapter
588 408, the agency may deny, revoke, and suspend any license issued
589 under this part and impose an administrative fine in the manner
590 provided in chapter 120 against a licensee for a violation of
591 any provision of this part, part II of chapter 408, or
592 applicable rules, or for any of the following actions by a
593 licensee, ~~for the actions of~~ any person subject to level 2
594 background screening under s. 408.809, or ~~for the actions of~~ any
595 facility staff ~~employee~~:

596 (a) An intentional or negligent act seriously affecting the
597 health, safety, or welfare of a resident of the facility.

598 (b) A ~~The~~ determination by the agency that the owner lacks
599 the financial ability to provide continuing adequate care to
600 residents.

601 (c) Misappropriation or conversion of the property of a
602 resident of the facility.

603 (d) Failure to follow the criteria and procedures provided
604 under part I of chapter 394 relating to the transportation,
605 voluntary admission, and involuntary examination of a facility
606 resident.

607 (e) A citation for ~~of~~ any of the following violations
608 ~~deficiencies~~ as specified in s. 429.19:

609 1. One or more cited class I violations ~~deficiencies~~.

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610 2. Three or more cited class II violations ~~deficiencies~~.

611 3. Five or more cited class III violations ~~deficiencies~~
612 that have been cited on a single survey and have not been
613 corrected within the times specified.

614 (f) Failure to comply with the background screening
615 standards of this part, s. 408.809(1), or chapter 435.

616 (g) Violation of a moratorium.

617 (h) Failure of the license applicant, the licensee during
618 relicensure, or a licensee that holds a provisional license to
619 meet the minimum license requirements of this part, or related
620 rules, at the time of license application or renewal.

621 (i) An intentional or negligent life-threatening act in
622 violation of the uniform firesafety standards for assisted
623 living facilities or other firesafety standards which ~~that~~
624 threatens the health, safety, or welfare of a resident of a
625 facility, as communicated to the agency by the local authority
626 having jurisdiction or the State Fire Marshal.

627 (j) Knowingly operating any unlicensed facility or
628 providing without a license any service that must be licensed
629 under this chapter or chapter 400.

630 (k) Any act constituting a ground upon which application
631 for a license may be denied.

632 (2) Upon notification by the local authority having
633 jurisdiction or by the State Fire Marshal, the agency may deny
634 or revoke the license of an assisted living facility that fails
635 to correct cited fire code violations that affect or threaten
636 the health, safety, or welfare of a resident of a facility.

637 (3) The agency may deny or revoke a license of an ~~to any~~
638 applicant or controlling interest as defined in part II of

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639 chapter 408 which has or had a 25 percent ~~25 percent~~ or greater
640 financial or ownership interest in any other facility that is
641 licensed under this part, or in any entity licensed by this
642 state or another state to provide health or residential care, if
643 that ~~which~~ facility or entity during the 5 years prior to the
644 application for a license closed due to financial inability to
645 operate; had a receiver appointed or a license denied,
646 suspended, or revoked; was subject to a moratorium; or had an
647 injunctive proceeding initiated against it.

648 (4) The agency shall deny or revoke the license of an
649 assisted living facility if:

650 (a) There are two moratoria, issued pursuant to this part
651 or part II of chapter 408, within a 2-year period which are
652 imposed by final order;

653 (b) The facility is cited for two or more class I
654 violations arising from unrelated circumstances during the same
655 survey or investigation; or

656 (c) The facility is cited for two or more class I
657 violations arising from separate surveys or investigations
658 within a 2-year period ~~that has two or more class I violations~~
659 ~~that are similar or identical to violations identified by the~~
660 ~~agency during a survey, inspection, monitoring visit, or~~
661 ~~complaint investigation occurring within the previous 2 years.~~

662 (5) An action taken by the agency to suspend, deny, or
663 revoke a facility's license under this part or part II of
664 chapter 408, in which the agency claims that the facility owner
665 or an employee of the facility has threatened the health,
666 safety, or welfare of a resident of the facility, must be heard
667 by the Division of Administrative Hearings of the Department of

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668 Management Services within 120 days after receipt of the
669 facility's request for a hearing, unless that time limitation is
670 waived by both parties. The administrative law judge shall ~~must~~
671 render a decision within 30 days after receipt of a proposed
672 recommended order.

673 (6) As provided under s. 408.814, the agency shall impose
674 an immediate moratorium on an assisted living facility that
675 fails to provide the agency access to the facility or prohibits
676 the agency from conducting a regulatory inspection. The licensee
677 may not restrict agency staff in accessing and copying records
678 or in conducting confidential interviews with facility staff or
679 any individual who receives services from the facility provide
680 ~~to the Division of Hotels and Restaurants of the Department of~~
681 ~~Business and Professional Regulation, on a monthly basis, a list~~
682 ~~of those assisted living facilities that have had their licenses~~
683 ~~denied, suspended, or revoked or that are involved in an~~
684 ~~appellate proceeding pursuant to s. 120.60 related to the~~
685 ~~denial, suspension, or revocation of a license.~~

686 (7) Agency notification of a license suspension or
687 revocation, or denial of a license renewal, shall be posted and
688 visible to the public at the facility.

689 (8) If a facility is required to relocate some or all of
690 its residents due to agency action, that facility is exempt from
691 the 45-days' notice requirement imposed under s. 429.28(1)(k).
692 This subsection does not exempt the facility from any deadlines
693 for corrective action set by the agency.

694 Section 8. Paragraphs (a) and (b) of subsection (2) of
695 section 429.178, Florida Statutes, are amended to read:

696 429.178 Special care for persons with Alzheimer's disease

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697 or other related disorders.-

698 (2) (a) An individual who is employed by a facility that
699 provides special care for residents who have ~~with~~ Alzheimer's
700 disease or other related disorders, and who has regular contact
701 with such residents, must complete up to 4 hours of initial
702 dementia-specific training developed or approved by the
703 department. The training must ~~shall~~ be completed within 3 months
704 after beginning employment and satisfy ~~shall satisfy~~ the core
705 training requirements of s. 429.52(3)(g) ~~s. 429.52(2)(g)~~.

706 (b) A direct caregiver who is employed by a facility that
707 provides special care for residents who have ~~with~~ Alzheimer's
708 disease or other related disorders, ~~and who~~ provides direct care
709 to such residents, ~~and~~ must complete the required initial training
710 and 4 additional hours of training developed or approved by the
711 department. The training must ~~shall~~ be completed within 9 months
712 after beginning employment and satisfy ~~shall satisfy~~ the core
713 training requirements of s. 429.52(3)(g) ~~s. 429.52(2)(g)~~.

714 Section 9. Section 429.19, Florida Statutes, is amended to
715 read:

716 429.19 Violations; imposition of administrative fines;
717 grounds.-

718 (1) In addition to the requirements of part II of chapter
719 408, the agency shall impose an administrative fine in the
720 manner provided in chapter 120 for the violation of any
721 provision of this part, part II of chapter 408, and applicable
722 rules by an assisted living facility, for the actions of any
723 person subject to level 2 background screening under s. 408.809,
724 for the actions of any facility employee, or for an intentional
725 or negligent act seriously affecting the health, safety, or

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726 welfare of a resident of the facility.

727 (2) Each violation of this part and adopted rules must
728 ~~shall~~ be classified according to the nature of the violation and
729 the gravity of its probable effect on facility residents. The
730 agency shall indicate the classification on the written notice
731 of the violation as follows:

732 (a) Class "I" violations are defined in s. 408.813. The
733 agency shall impose an administrative fine of \$7,500 for each a
734 cited class I violation in a facility that is licensed for fewer
735 than 100 beds at the time of the violation ~~in an amount not less~~
736 ~~than \$5,000 and not exceeding \$10,000 for each violation.~~ The
737 agency shall impose an administrative fine of \$11,250 for each
738 cited class I violation in a facility that is licensed for 100
739 or more beds at the time of the violation. If the noncompliance
740 occurred within the prior 12 months, the fine must be levied for
741 violations that are corrected before an inspection.

742 (b) Class "II" violations are defined in s. 408.813. The
743 agency shall impose an administrative fine of \$3,000 for each a
744 cited class II violation in a facility that is licensed for
745 fewer than 100 beds at the time of the violation ~~in an amount~~
746 ~~not less than \$1,000 and not exceeding \$5,000 for each~~
747 ~~violation.~~ The agency shall impose an administrative fine of
748 \$4,500 for each cited class II violation in a facility that is
749 licensed for 100 or more beds at the time of the violation.

750 (c) Class "III" violations are defined in s. 408.813. The
751 agency shall impose an administrative fine of \$750 for each a
752 cited class III violation in a facility that is licensed for
753 fewer than 100 beds at the time of the violation ~~in an amount~~
754 ~~not less than \$500 and not exceeding \$1,000 for each violation.~~

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755 The agency shall impose an administrative fine of \$1,125 for
756 each cited class III violation in a facility that is licensed
757 for 100 or more beds at the time of the violation.

758 (d) Class "IV" violations are defined in s. 408.813. The
759 agency shall impose an administrative fine of \$150 for each a
760 cited class IV violation in a facility that is licensed for
761 fewer than 100 beds at the time of the violation ~~in an amount~~
762 ~~not less than \$100 and not exceeding \$200 for each violation.~~
763 The agency shall impose an administrative fine of \$225 for each
764 cited class IV violation in a facility that is licensed for 100
765 or more beds at the time of the violation.

766 (e) Any fine imposed for a class I violation or a class II
767 violation must be doubled if a facility was previously cited for
768 one or more class I or class II violations during the agency's
769 last licensure inspection or any inspection or complaint
770 investigation since the last licensure inspection.

771 (f) Notwithstanding s. 408.813(2)(c) and (d) and s.
772 408.832, a fine must be imposed for each class III or class IV
773 violation, regardless of correction, if a facility was
774 previously cited for one or more class III or class IV
775 violations during the agency's last licensure inspection or any
776 inspection or complaint investigation since the last licensure
777 inspection for the same regulatory violation. A fine imposed for
778 class III or class IV violations must be doubled if a facility
779 was previously cited for one or more class III or class IV
780 violations during the agency's last two licensure inspections
781 for the same regulatory violation.

782 (g) Regardless of the class of violation cited, instead of
783 the fine amounts listed in paragraphs (a)-(d), the agency shall

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784 impose an administrative fine of \$500 if a facility is found not
 785 to be in compliance with the background screening requirements
 786 as provided in s. 408.809.

787 ~~(3) For purposes of this section, in determining if a~~
 788 ~~penalty is to be imposed and in fixing the amount of the fine,~~
 789 ~~the agency shall consider the following factors:~~

790 ~~(a) The gravity of the violation, including the probability~~
 791 ~~that death or serious physical or emotional harm to a resident~~
 792 ~~will result or has resulted, the severity of the action or~~
 793 ~~potential harm, and the extent to which the provisions of the~~
 794 ~~applicable laws or rules were violated.~~

795 ~~(b) Actions taken by the owner or administrator to correct~~
 796 ~~violations.~~

797 ~~(c) Any previous violations.~~

798 ~~(d) The financial benefit to the facility of committing or~~
 799 ~~continuing the violation.~~

800 ~~(e) The licensed capacity of the facility.~~

801 (3)~~(4)~~ Each day of continuing violation after the date
 802 established by the agency ~~fixed for correction~~ termination of
 803 the violation, ~~as ordered by the agency,~~ constitutes an
 804 additional, separate, and distinct violation.

805 (4)~~(5)~~ An ~~Any~~ action taken to correct a violation shall be
 806 documented in writing by the owner or administrator of the
 807 facility and verified through followup visits by agency
 808 personnel. The agency may impose a fine and, in the case of an
 809 owner-operated facility, revoke or deny a facility's license
 810 when a facility administrator fraudulently misrepresents action
 811 taken to correct a violation.

812 (5)~~(6)~~ A ~~Any~~ facility whose owner fails to apply for a

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813 change-of-ownership license in accordance with part II of
814 chapter 408 and operates the facility under the new ownership is
815 subject to a fine of \$5,000.

816 (6)~~(7)~~ In addition to any administrative fines imposed, the
817 agency may assess a survey fee, equal to the lesser of one half
818 of the facility's biennial license and bed fee or \$500, to cover
819 the cost of conducting initial complaint investigations that
820 result in the finding of a violation that was the subject of the
821 complaint or monitoring visits conducted under s. 429.28(3)(c)
822 to verify the correction of the violations.

823 (7)~~(8)~~ During an inspection, the agency shall make a
824 reasonable attempt to discuss each violation with the owner or
825 administrator of the facility, prior to written notification.

826 (8)~~(9)~~ The agency shall develop and disseminate an annual
827 list of all facilities sanctioned or fined for violations of
828 state standards, the number and class of violations involved,
829 the penalties imposed, and the current status of cases. The list
830 shall be disseminated, at no charge, to the Department of
831 Elderly Affairs, the Department of Health, the Department of
832 Children and Families ~~Family Services~~, the Agency for Persons
833 with Disabilities, the area agencies on aging, the Florida
834 Statewide Advocacy Council, and the state and local ombudsman
835 councils. The Department of Children and Families ~~Family~~
836 ~~Services~~ shall disseminate the list to service providers under
837 contract to the department who are responsible for referring
838 persons to a facility for residency. The agency may charge a fee
839 commensurate with the cost of printing and postage to other
840 interested parties requesting a copy of this list. This
841 information may be provided electronically or through the

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842 agency's website ~~Internet site~~.

843 Section 10. Subsection (3) and paragraph (c) of subsection
844 (4) of section 429.256, Florida Statutes, are amended to read:

845 429.256 Assistance with self-administration of medication.—

846 (3) Assistance with self-administration of medication
847 includes:

848 (a) Taking the medication, in its previously dispensed,
849 properly labeled container, including an insulin syringe that is
850 prefilled with the proper dosage by a pharmacist and an insulin
851 pen that is prefilled by the manufacturer, from where it is
852 stored, and bringing it to the resident.

853 (b) In the presence of the resident, reading the label,
854 opening the container, removing a prescribed amount of
855 medication from the container, and closing the container,
856 including removing the cap of a nebulizer, opening the unit dose
857 of nebulizer solution, and pouring the prescribed premeasured
858 dose of medication into the dispensing cup of the nebulizer.

859 (c) Placing an oral dosage in the resident's hand or
860 placing the dosage in another container and helping the resident
861 by lifting the container to his or her mouth.

862 (d) Applying topical medications.

863 (e) Returning the medication container to proper storage.

864 (f) Keeping a record of when a resident receives assistance
865 with self-administration under this section.

866 (g) Assisting with the use of a nebulizer.

867 (h) Using a glucometer to perform blood-glucose level
868 checks.

869 (i) Assisting with putting on and taking off antiembolism
870 stockings.

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871 (j) Assisting with applying and removing an oxygen cannula.

872 (k) Assisting with the use of a continuous positive airway
 873 pressure (CPAP) device.

874 (l) Assisting with measuring vital signs.

875 (m) Assisting with colostomy bags.

876 (4) Assistance with self-administration does not include:

877 ~~(c) Administration of medications through intermittent~~
 878 ~~positive pressure breathing machines or a nebulizer.~~

879 Section 11. Subsections (2), (5), and (6) of section
 880 429.28, Florida Statutes, are amended to read:

881 429.28 Resident bill of rights.—

882 (2) The administrator of a facility shall ensure that a
 883 written notice of the rights, obligations, and prohibitions set
 884 forth in this part is posted in a prominent place in each
 885 facility and read or explained to residents who cannot read. The
 886 ~~This~~ notice must ~~shall~~ include the name, address, and telephone
 887 numbers of the local ombudsman council, the ~~and~~ central abuse
 888 hotline, and, if ~~when~~ applicable, Disability Rights Florida ~~the~~
 889 ~~Advocacy Center for Persons with Disabilities, Inc., and the~~
 890 ~~Florida local advocacy council~~, where complaints may be lodged.
 891 The notice must state that a complaint made to the Office of
 892 State Long-Term Care Ombudsman or a local long-term care
 893 ombudsman council, the names and identities of the residents
 894 involved in the complaint, and the identity of complainants are
 895 kept confidential pursuant to s. 400.0077 and that retaliatory
 896 action cannot be taken against a resident for presenting
 897 grievances or for exercising any other resident right. The
 898 facility must ensure a resident's access to a telephone to call
 899 the local ombudsman council, central abuse hotline, and

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900 ~~Disability Rights Florida Advocacy Center for Persons with~~
 901 ~~Disabilities, Inc., and the Florida local advocacy council.~~

902 (5) ~~A~~ No facility or employee of a facility may not serve
 903 notice upon a resident to leave the premises or take any other
 904 retaliatory action against any person who:

905 (a) Exercises any right set forth in this section.

906 (b) Appears as a witness in any hearing, inside or outside
 907 the facility.

908 (c) Files a civil action alleging a violation of the
 909 provisions of this part or notifies a state attorney or the
 910 Attorney General of a possible violation of such provisions.

911 (6) A ~~Any~~ facility that ~~which~~ terminates the residency of
 912 an individual who participated in activities specified in
 913 subsection (5) must ~~shall~~ show good cause in a court of
 914 competent jurisdiction. If good cause is not shown, the agency
 915 shall impose a fine of \$2,500 in addition to any other penalty
 916 assessed against the facility.

917 Section 12. Section 429.34, Florida Statutes, is amended to
 918 read:

919 429.34 Right of entry and inspection.—

920 (1) In addition to the requirements of s. 408.811, any duly
 921 designated officer or employee of the department, the Department
 922 of Children and Families ~~Family Services~~, the Medicaid Fraud
 923 Control Unit of the Office of the Attorney General, the state or
 924 local fire marshal, or a member of the state or local long-term
 925 care ombudsman council has ~~shall have~~ the right to enter
 926 unannounced upon and into the premises of any facility licensed
 927 pursuant to this part in order to determine the state of
 928 compliance with ~~the provisions of~~ this part, part II of chapter

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929 408, and applicable rules. Data collected by the state or local
930 long-term care ombudsman councils or the state or local advocacy
931 councils may be used by the agency in investigations involving
932 violations of regulatory standards. A person specified in this
933 section who knows or has reasonable cause to suspect that a
934 vulnerable adult has been or is being abused, neglected, or
935 exploited shall immediately report such knowledge or suspicion
936 to the central abuse hotline pursuant to chapter 415.

937 (2) The agency shall inspect each licensed assisted living
938 facility at least once every 24 months to determine compliance
939 with this chapter and related rules. If an assisted living
940 facility is cited for one or more class I violations or two or
941 more class II violations arising from separate surveys within a
942 60-day period or due to unrelated circumstances during the same
943 survey, the agency must conduct an additional licensure
944 inspection within 6 months. In addition to any fines imposed on
945 the facility under s. 429.19, the licensee shall pay a fee for
946 the cost of the additional inspection equivalent to the standard
947 assisted living facility license and per-bed fees, without
948 exception for beds designated for recipients of optional state
949 supplementation. The agency shall adjust the fee in accordance
950 with s. 408.805.

951 Section 13. Subsection (2) of section 429.41, Florida
952 Statutes, is amended to read:

953 429.41 Rules establishing standards.—

954 (2) In adopting any rules pursuant to this part, the
955 department, in conjunction with the agency, shall make distinct
956 standards for facilities based upon facility size; the types of
957 care provided; the physical and mental capabilities and needs of

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958 residents; the type, frequency, and amount of services and care
959 offered; and the staffing characteristics of the facility. Rules
960 developed pursuant to this section may ~~shall~~ not restrict the
961 use of shared staffing and shared programming in facilities that
962 are part of retirement communities that provide multiple levels
963 of care and otherwise meet the requirements of law and rule. If
964 a continuing care facility licensed under chapter 651 or a
965 retirement community offering multiple levels of care authorizes
966 assisted living services in a building or part of a building
967 designated for independent living, staffing requirements
968 established in rule apply only to residents who have contracted
969 for, and are receiving, assisted living services. If a facility
970 uses flexible beds, staffing requirements established in rule
971 apply only to residents receiving services through the flexible
972 bed license provided for by department rule. Except for uniform
973 firesafety standards, the department shall adopt by rule
974 separate and distinct standards for facilities with 16 or fewer
975 beds and for facilities with 17 or more beds. The standards for
976 facilities with 16 or fewer beds must ~~shall~~ be appropriate for a
977 noninstitutional residential environment;7 however, provided
978 ~~that~~ the structure may not be ~~is no~~ more than two stories in
979 height and all persons who cannot exit the facility unassisted
980 in an emergency must reside on the first floor. The department,
981 in conjunction with the agency, may make other distinctions
982 among types of facilities as necessary to enforce the provisions
983 of this part. Where appropriate, the agency shall offer
984 alternate solutions for complying with established standards,
985 based on distinctions made by the department and the agency
986 relative to the physical characteristics of facilities and the

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987 types of care offered ~~therein~~.

988 Section 14. Present subsections (1) through (11) of section
989 429.52, Florida Statutes, are renumbered as subsections (2)
990 through (12), respectively, a new subsection (1) is added to
991 that section, and present subsections (5) and (9) of that
992 section are amended, to read:

993 429.52 Staff training and educational programs; core
994 educational requirement.—

995 (1) Effective October 1, 2014, each new assisted living
996 facility employee who has not previously completed core training
997 must attend a preservice orientation provided by the facility
998 before interacting with residents. The preservice orientation
999 must be at least 2 hours in duration and cover topics that help
1000 the employee provide responsible care and respond to the needs
1001 of facility residents. At the time of license renewal and as
1002 part of the license renewal application, each administrator of a
1003 facility licensed by the agency must attest, under penalty of
1004 perjury, to compliance with the provisions of this subsection.

1005 ~~(6)(5)~~ Staff involved with the management of medications
1006 and assisting with the self-administration of medications under
1007 s. 429.256 must complete a minimum of 6 ~~4~~ additional hours of
1008 training provided by a registered nurse, licensed pharmacist, or
1009 department staff. The department shall establish by rule the
1010 minimum requirements of this additional training.

1011 ~~(10)(9)~~ The training required by this section other than
1012 the preservice orientation must ~~shall~~ be conducted by persons
1013 registered with the department as having the requisite
1014 experience and credentials to conduct the training. A person
1015 seeking to register as a trainer must provide the department

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1016 with proof of completion of the minimum core training education
1017 requirements, successful passage of the competency test
1018 established under this section, and proof of compliance with the
1019 continuing education requirement in subsection (5)~~(4)~~.

1020 Section 15. Section 429.55, Florida Statutes, is created to
1021 read:

1022 429.55 Facilities licensed for flexible beds.-

1023 (1) Beginning January 1, 2015, a facility may apply for a
1024 flexible bed license.

1025 (2) A facility that has a flexible bed license shall:

1026 (a) Retain a log that lists the name of each resident who
1027 has contracted for and is receiving assisted living services in
1028 flexible bed living units, the unit number in which the resident
1029 resides, the date the contract for the services commenced, the
1030 date that services ended in the flexible bed living unit if
1031 applicable, and documentation to demonstrate that minimum
1032 staffing standards are met;

1033 (b) Specify in the flexible bed contract the process that
1034 will be used to determine when a resident is no longer eligible
1035 for services provided through the flexible bed license. This
1036 contract for services must also outline if the delivery of
1037 services in a flexible bed living unit will be covered under the
1038 existing residency agreement or will require a fee for service
1039 payment; and

1040 (c) Retain each flexible bed contract for 5 years after the
1041 assisted living services end. All other records must be retained
1042 for at least 2 years from the date of termination of the
1043 services.

1044 (3) Upon request, a facility that has a flexible bed

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1045 license must provide state surveyors with access to the log
1046 described in paragraph (2) (a). State surveyors shall also have
1047 access to independent living units occupied by residents who are
1048 receiving services through the flexible bed license at the time
1049 of any survey. State surveyors may interview any resident who
1050 has received services through the flexible bed license since the
1051 last biennial survey, but who is no longer receiving such
1052 services.

1053 (4) A flexible bed license does not preclude a resident who
1054 lives in a building that has such a license from obtaining home
1055 health services in accordance with the policies of the facility.

1056 Section 16. The Legislature finds that consistent
1057 regulation of assisted living facilities benefits residents and
1058 operators of such facilities. To determine whether surveys are
1059 consistent between surveys and surveyors, the Office of Program
1060 Policy Analysis and Government Accountability (OPPAGA) shall
1061 conduct a study of intersurveyor reliability for assisted living
1062 facilities. By November 1, 2014, OPPAGA shall report its
1063 findings to the Governor, the President of the Senate, and the
1064 Speaker of the House of Representatives and make any
1065 recommendations for improving intersurveyor reliability.

1066 Section 17. The Legislature finds that consumers need
1067 additional information on the quality of care and service in
1068 assisted living facilities in order to select the best facility
1069 for themselves or their loved ones. Therefore, the Agency for
1070 Health Care Administration shall:

1071 (1) Implement a rating system for assisted living
1072 facilities by November 1, 2014. The agency shall adopt rules to
1073 administer this subsection.

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1074 (2) By January 1, 2015, create content that is easily
1075 accessible through the front page of the agency's website. At a
1076 minimum, the content must include:

1077 (a) Information on each licensed assisted living facility,
1078 including, but not limited to:

1079 1. The name and address of the facility.

1080 2. The number and type of licensed beds in the facility.

1081 3. The types of licenses held by the facility.

1082 4. The facility's license expiration date and status.

1083 5. Other relevant information that the agency currently
1084 collects.

1085 (b) A list of the facility's violations, including, for
1086 each violation:

1087 1. A summary of the violation which is presented in a
1088 manner understandable by the general public;

1089 2. Any sanctions imposed by final order; and

1090 3. A summary of any corrective action taken by the
1091 facility.

1092 (c) Links to inspection reports that the agency has on
1093 file.

1094 (d) A monitored comment page, maintained by the agency,
1095 which allows members of the public to anonymously comment on
1096 assisted living facilities that are licensed to operate in this
1097 state. This comment page must, at a minimum, allow members of
1098 the public to post comments on their experiences with, or
1099 observations of, an assisted living facility and to review other
1100 people's comments. Comments posted to the agency's comment page
1101 may not contain profanity and are intended to provide meaningful
1102 feedback about the assisted living facility. The agency shall

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1103 review comments for profane content before the comments are
1104 posted to the page. A controlling interest, as defined in s.
1105 408.803, Florida Statutes, in an assisted living facility, or an
1106 employee or owner of an assisted living facility, is prohibited
1107 from posting comments on the page, except that a controlling
1108 interest, employee, or owner may respond to comments on the
1109 page, and the agency shall ensure that the responses are
1110 identified as being from a representative of the facility.

1111 Section 18. This act shall take effect July 1, 2014.