

1 A bill to be entitled
2 An act relating to assisted living facilities;
3 amending s. 429.11, F.S.; prohibiting a county or
4 municipality from issuing a business tax receipt,
5 rather than an occupational license, to an assisted
6 living facility under certain circumstances; amending
7 s. 429.19, F.S.; revising applicability relating to
8 violations and administrative fines; amending s.
9 429.23, F.S.; authorizing assisted living facilities
10 to use safety devices, equipment, and reasonable
11 security measures for specified purposes; amending s.
12 429.255, F.S.; authorizing a facility resident or his
13 or her representative to contract with a third party
14 under certain circumstances; amending s. 429.26, F.S.;
15 including medical examinations within criteria used
16 for admission to an assisted living facility;
17 providing specified criteria for determinations of
18 appropriateness for admission and continued residency
19 at an assisted living facility; requiring that a
20 resident receive a medical examination within a
21 specified timeframe after admission to a facility;
22 requiring that such examination be recorded on a
23 specified form; providing minimum requirements for
24 such form; revising provisions relating to the
25 placement of residents by the Department of Elderly

26 Affairs or the Department of Children and Families;
27 requiring a facility to notify a resident's
28 representative or designee of the need for health care
29 services and authorizing the facility to assist with
30 the arrangement of such services under certain
31 circumstances; removing provisions relating to the
32 retention of certain residents in a facility; amending
33 s. 429.28, F.S.; revising residents' rights relating
34 to a safe and secure living environment; amending s.
35 429.41, F.S.; removing provisions relating to
36 firesafety requirements; removing an obsolete
37 provision; requiring, rather than authorizing, the
38 Agency for Health Care Administration to use an
39 abbreviated biennial standard licensure inspection;
40 revising the criteria under which a facility must be
41 fully inspected; revising provisions requiring the
42 agency to develop key quality-of-care standards;
43 creating s. 429.435, F.S.; providing uniform
44 firesafety standards and requirements for assisted
45 living facilities; amending s. 429.52, F.S.; revising
46 provisions relating to facility staff training
47 requirements; requiring the Department of Elderly
48 Affairs to establish core training requirements for
49 facility administrators; providing a minimum required
50 score for passage of the core competency test;

51 revising the training and continuing education
 52 requirements for facility staff assisting residents
 53 with the self-administration of medications; revising
 54 provisions relating to the responsibilities of the
 55 Department of Elderly Affairs and the Agency for
 56 Health Care Administration regarding training;
 57 requiring the Department of Elderly Affairs to
 58 contract with another entity to administer the
 59 competency test; requiring the department to adopt a
 60 curriculum outline to be used by core trainers;
 61 providing an effective date.

62
 63 Be It Enacted by the Legislature of the State of Florida:
 64

65 Section 1. Subsection (7) of section 429.11, Florida
 66 Statutes, is amended to read:

67 429.11 Initial application for license; provisional
 68 license.-

69 (7) A county or municipality may not issue a business tax
 70 receipt ~~an occupational license~~ that is being obtained for the
 71 purpose of operating a facility regulated under this part
 72 without first ascertaining that the applicant has been licensed
 73 to operate such facility at the specified location or locations
 74 by the agency. The agency shall furnish to local agencies
 75 responsible for issuing business tax receipts ~~occupational~~

76 | ~~licenses~~ sufficient instruction for making such determinations.

77 | Section 2. Subsection (1) of section 429.19, Florida
78 | Statutes, is amended to read:

79 | 429.19 Violations; imposition of administrative fines;
80 | grounds.—

81 | (1) In addition to the requirements of part II of chapter
82 | 408, the agency shall impose an administrative fine in the
83 | manner provided in chapter 120 for the violation of any
84 | provision of this part, part II of chapter 408, and applicable
85 | rules by an assisted living facility, for the actions of any
86 | person subject to level 2 background screening under s. 408.809,
87 | for the actions of any facility employee, or for an intentional
88 | or negligent act seriously affecting the health, safety, or
89 | welfare of a resident of the facility. The provisions of part
90 | II, part III, or part IV of chapter 400 do not apply to assisted
91 | living facilities and, therefore, the agency may not issue a
92 | citation or impose an administrative fine for any violation of
93 | those provisions by an assisted living facility.

94 | Section 3. Subsection (10) of section 429.23, Florida
95 | Statutes, is renumbered as subsection (11), and a new subsection
96 | (10) is added to that section to read:

97 | 429.23 Internal risk management and quality assurance
98 | program; adverse incidents and reporting requirements.—

99 | (10) A facility may use safety devices, equipment, and
100 | reasonable security measures for wander management, emergency

101 response, staff risk management, and for the general safety and
102 security of residents, staff, and the facility.

103 Section 4. Paragraph (a) of subsection (1) of section
104 429.255, Florida Statutes, is amended to read:

105 429.255 Use of personnel; emergency care.—

106 (1) (a) Persons under contract to the facility, facility
107 staff, or volunteers, who are licensed according to part I of
108 chapter 464, or those persons exempt under s. 464.022(1), and
109 others as defined by rule, may administer medications to
110 residents, take residents' vital signs, manage individual weekly
111 pill organizers for residents who self-administer medication,
112 give prepackaged enemas ordered by a physician, observe
113 residents, document observations on the appropriate resident's
114 record, and report observations to the resident's physician. A
115 resident, ~~and contract or allow residents~~ or a resident's
116 representative, designee, surrogate, guardian, or attorney in
117 fact may ~~to~~ contract with a third party, provided the resident
118 meets ~~residents meet~~ the criteria for appropriate placement as
119 defined in s. 429.26. Nursing assistants certified pursuant to
120 part II of chapter 464 may take residents' vital signs as
121 directed by a licensed nurse or physician.

122 Section 5. Subsection (10) of section 429.26, Florida
123 Statutes, is renumbered as subsection (9), subsections (1), (2),
124 (4), (5), (6), (7), and (11) and present subsection (9) of that
125 section are amended, to read:

126 429.26 Appropriateness of placements; examinations of
 127 residents.—

128 (1) The owner or administrator of a facility is
 129 responsible for determining the appropriateness of admission of
 130 an individual to the facility and for determining the continued
 131 appropriateness of residence of an individual in the facility. A
 132 determination shall be based upon the owner's or administrator's
 133 evaluation ~~an assessment~~ of the strengths, needs, and
 134 preferences of the resident; a medical examination; ~~the care~~
 135 and services offered or arranged for by the facility in
 136 accordance with facility policy; ~~and any limitations in law or~~
 137 rule related to admission criteria or continued residency for
 138 the type of license held by the facility under this part. The
 139 following criteria apply to the determination of appropriateness
 140 for admission and continued residency of an individual in a
 141 facility:

142 (a) A facility may admit or retain a resident who receives
 143 a health care service or treatment that is designed to be
 144 provided within a private residential setting if all
 145 requirements for providing such service or treatment are met by
 146 the facility or a third party.

147 (b) A facility may admit or retain a resident who requires
 148 the use of safety and assistive devices for performing the
 149 activities of daily living; for transitioning from a sitting
 150 position to a standing position, including the use of sit-to-

151 stand lifts; for preventing and managing falls; and for
152 preventing and managing elopement.

153 (c) A facility may not admit or retain a resident who
154 requires 24-hour nursing supervision, except for a resident who
155 is enrolled in hospice services pursuant to part IV of chapter
156 400. An individual receiving hospice services may be admitted or
157 retained in a facility if the arrangement is agreed to by the
158 facility and the resident, additional care is provided by a
159 licensed hospice, and the resident is under the care of a
160 physician who agrees that the physical needs of the resident can
161 be met at the facility.

162 (d)1. A facility may not admit or retain a resident who is
163 bedridden. For the purposes of this paragraph, the term
164 "bedridden" means a resident is:

165 a. Confined to a bed because of his or her inability to
166 ambulate;

167 b. Unable to transition to a wheelchair without
168 assistance; or

169 c. Unable to sit safely in a chair or wheelchair without
170 personal assistance or the assistance of a physical restraint.

171 2. A resident may be retained in a facility if, during
172 residency, the resident is bedridden for no more than 7
173 consecutive days.

174 3. If a facility is licensed to provide extended
175 congregate care, a resident may be retained in a facility if,

176 during residency, the resident is bedridden for no more than 14
177 consecutive days.

178 4. A resident may be admitted or retained in a facility if
179 the resident is enrolled in hospice services and meets the
180 criteria described in paragraph (b).

181
182 A resident may not be moved from one facility to another without
183 consultation with and agreement from the resident or, if
184 applicable, the resident's representative or designee or the
185 resident's family, guardian, surrogate, or attorney in fact. In
186 the case of a resident who has been placed by ~~the department or~~
187 the Department of Children and Families, the administrator must
188 notify the appropriate contact person in the ~~applicable~~
189 Department of Children and Families.

190 (2) A physician, physician assistant, or advanced practice
191 registered nurse practitioner who is employed by an assisted
192 living facility to provide an initial examination for admission
193 purposes may not have financial interest in the facility.

194 (4) ~~If possible,~~ Each resident shall have been examined by
195 a licensed physician, a licensed physician assistant, or a
196 licensed advanced practice registered nurse practitioner within
197 60 days before admission to the facility or within 30 days after
198 admission to the facility except as provided in s. 429.07. The
199 information from the medical examination may be recorded on the
200 practitioner's form or on a form provided by the agency. The

201 ~~signed and~~ completed medical examination form, signed by the
 202 practitioner, ~~report~~ shall be submitted to the owner or
 203 administrator of the facility who shall use the information
 204 contained therein to assist in the determination of the
 205 appropriateness of the resident's admission and continued stay
 206 in the facility. The medical examination form ~~report~~ shall
 207 become a permanent part of the record of the resident at the
 208 facility and shall be made available to the agency during
 209 inspection or upon request. An assessment that has been
 210 completed through the Comprehensive Assessment and Review for
 211 Long-Term Care Services (CARES) Program fulfills the
 212 requirements for a medical examination under this subsection and
 213 s. 429.07(3)(b)6.

214 (5) The medical examination form provided by the agency
 215 shall include, at a minimum, the following information relating
 216 to the resident:

- 217 (a) Height, weight, and known allergies.
- 218 (b) Significant medical history and diagnoses.
- 219 (c) Physical or sensory limitations.
- 220 (d) Cognitive or behavioral status.
- 221 (e) Nursing, treatment, or therapy service requirements.
- 222 (f) Whether assistance or total care is needed for the
 223 activities of ambulating, eating, and transferring.
- 224 (g) Special diet instructions.
- 225 (h) The existence of communicable diseases.

226 (i) Bedridden and pressure sore status.

227 (j) Whether the resident needs 24-hour nursing or
 228 psychiatric care.

229 (k) A list of current prescribed medications which
 230 identifies each medication by name and describes the dosage;
 231 directions for use; route; prescription quantity; and whether
 232 the resident can self-administer medications, needs assistance,
 233 or needs medication administration ~~Except as provided in s.~~
 234 ~~429.07, if a medical examination has not been completed within~~
 235 ~~60 days before the admission of the resident to the facility, a~~
 236 ~~licensed physician, licensed physician assistant, or licensed~~
 237 ~~nurse practitioner shall examine the resident and complete a~~
 238 ~~medical examination form provided by the agency within 30 days~~
 239 ~~following the admission to the facility to enable the facility~~
 240 ~~owner or administrator to determine the appropriateness of the~~
 241 ~~admission. The medical examination form shall become a permanent~~
 242 ~~part of the record of the resident at the facility and shall be~~
 243 ~~made available to the agency during inspection by the agency or~~
 244 ~~upon request.~~

245 (6) Any resident accepted in a facility and placed by ~~the~~
 246 ~~department or~~ the Department of Children and Families shall have
 247 been examined by medical personnel within 30 days before
 248 placement in the facility. The examination shall include an
 249 assessment of the appropriateness of placement in a facility.
 250 The findings of this examination shall be recorded on the

251 examination form provided by the agency. The completed form
252 shall accompany the resident and shall be submitted to the
253 facility owner or administrator. Additionally, in the case of a
254 mental health resident, the Department of Children and Families
255 must provide documentation that the individual has been assessed
256 by a psychiatrist, clinical psychologist, clinical social
257 worker, or psychiatric nurse, or an individual who is supervised
258 by one of these professionals, and determined to be appropriate
259 to reside in an assisted living facility. The documentation must
260 be in the facility within 30 days after the mental health
261 resident has been admitted to the facility. An evaluation
262 completed upon discharge from a state mental hospital meets the
263 requirements of this subsection related to appropriateness for
264 placement as a mental health resident providing it was completed
265 within 90 days prior to admission to the facility. The
266 ~~applicable~~ Department of Children and Families shall provide to
267 the facility administrator any information about the resident
268 that would help the administrator meet his or her
269 responsibilities under subsection (1). Further, Department of
270 Children and Families personnel shall explain to the facility
271 operator any special needs of the resident and advise the
272 operator whom to call should problems arise. The ~~applicable~~
273 Department of Children and Families shall advise and assist the
274 facility administrator where the special needs of residents who
275 are recipients of optional state supplementation require such

276 assistance.

277 (7) The facility must notify a licensed physician when a
278 resident exhibits signs of dementia or cognitive impairment or
279 has a change of condition in order to rule out the presence of
280 an underlying physiological condition that may be contributing
281 to such dementia or impairment. The notification must occur
282 within 30 days after the acknowledgment of such signs by
283 facility staff. If an underlying condition is determined to
284 exist, the facility shall notify the resident's representative
285 or designee of the need for health care services and may assist
286 with the arrangement of ~~arrange, with the appropriate health~~
287 ~~care provider,~~ the necessary care and services to treat the
288 condition.

289 ~~(9) A terminally ill resident who no longer meets the~~
290 ~~criteria for continued residency may remain in the facility if~~
291 ~~the arrangement is mutually agreeable to the resident and the~~
292 ~~facility; additional care is rendered through a licensed~~
293 ~~hospice, and the resident is under the care of a physician who~~
294 ~~agrees that the physical needs of the resident are being met.~~

295 ~~(11) No resident who requires 24-hour nursing supervision,~~
296 ~~except for a resident who is an enrolled hospice patient~~
297 ~~pursuant to part IV of chapter 400, shall be retained in a~~
298 ~~facility licensed under this part.~~

299 Section 6. Paragraphs (a) and (d) of subsection (1) of
300 section 429.28, Florida Statutes, are amended to read:

301 429.28 Resident bill of rights.-

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

307 (a) Live in a safe and decent living environment that
 308 meets the requirements of the uniform firesafety standards
 309 established under s. 633.206 and the environmental health and
 310 safety practices established under ss. 381.006, 381.0072, and
 311 381.0098, and is free from abuse, ~~and~~ neglect, or exploitation.

312 (d) Unrestricted private communication, including
 313 receiving and sending unopened correspondence, access to a
 314 telephone, and visiting with any person of his or her choice, at
 315 any time between the hours of 9 a.m. and 9 p.m. at a minimum.
 316 Guests must comply with the facility's security procedures and
 317 may not pose a health or safety risk to other residents and
 318 facility staff. Upon request, the facility shall make provisions
 319 to extend visiting hours for caregivers and out-of-town guests,
 320 and in other similar situations.

321 Section 7. Section 429.41, Florida Statutes, is amended to
 322 read:

323 429.41 Rules establishing standards.-

324 (1) It is the intent of the Legislature that rules
 325 published and enforced pursuant to this section shall include

326 criteria by which a reasonable and consistent quality of
327 resident care and quality of life may be promoted ~~ensured and~~
328 ~~the results of such resident care may be demonstrated~~. Such
329 rules shall also promote ~~ensure~~ a safe and sanitary environment
330 that is residential and noninstitutional in design or nature and
331 which allows for technological advances in the provision of
332 care, safety, and security. It is further intended that
333 reasonable efforts be made to accommodate the needs and
334 preferences of residents to enhance the quality of life in a
335 facility. ~~Uniform firesafety standards for assisted living~~
336 ~~facilities shall be established by the State Fire Marshal~~
337 ~~pursuant to s. 633.206~~. The agency, in consultation with the
338 department, may adopt rules to administer the requirements of
339 part II of chapter 408. ~~In order to provide safe and sanitary~~
340 ~~facilities and the highest quality of resident care~~
341 ~~accommodating the needs and preferences of residents~~, The
342 department, in consultation with the agency, the Department of
343 Children and Families, and the Department of Health, shall adopt
344 rules, ~~policies, and procedures~~ to administer this part, which
345 must include reasonable and fair minimum standards in relation
346 to:

347 (a) The requirements for ~~and~~ maintenance and the sanitary
348 condition of facilities, not in conflict with, or duplicative
349 of, the requirements in chapter 381 or chapter 553 and the rules
350 adopted thereunder, relating to furnishings for resident

351 bedrooms or sleeping areas, locking devices, linens, laundry
352 services plumbing, heating, cooling, lighting, ventilation,
353 living space, and similar physical plant standards ~~other housing~~
354 ~~conditions,~~ which will reasonably promote ~~ensure~~ the health,
355 safety, and welfare ~~comfort~~ of residents suitable to the size of
356 the structure. The rules must clearly delineate the
357 responsibilities of the agency's licensure and survey staff and
358 county health departments and ensure that inspections are not
359 duplicative. The agency may collect fees for food service
360 inspections conducted by a county health department and transfer
361 such fees to the Department of Health.

362 ~~1. Firesafety evacuation capability determination.—An~~
363 ~~evacuation capability evaluation for initial licensure shall be~~
364 ~~conducted within 6 months after the date of licensure.~~

365 ~~2. Firesafety requirements.—~~

366 ~~a. The National Fire Protection Association, Life Safety~~
367 ~~Code, NFPA 101 and 101A, current editions, shall be used in~~
368 ~~determining the uniform firesafety code adopted by the State~~
369 ~~Fire Marshal for assisted living facilities, pursuant to s.~~
370 ~~633.206.~~

371 ~~b. A local government or a utility may charge fees only in~~
372 ~~an amount not to exceed the actual expenses incurred by the~~
373 ~~local government or the utility relating to the installation and~~
374 ~~maintenance of an automatic fire sprinkler system in a licensed~~
375 ~~assisted living facility structure.~~

376 ~~e. All licensed facilities must have an annual fire~~
377 ~~inspection conducted by the local fire marshal or authority~~
378 ~~having jurisdiction.~~

379 ~~d. An assisted living facility that is issued a building~~
380 ~~permit or certificate of occupancy before July 1, 2016, may at~~
381 ~~its option and after notifying the authority having~~
382 ~~jurisdiction, remain under the provisions of the 1994 and 1995~~
383 ~~editions of the National Fire Protection Association, Life~~
384 ~~Safety Code, NFPA 101, and NFPA 101A. The facility opting to~~
385 ~~remain under such provisions may make repairs, modernizations,~~
386 ~~renovations, or additions to, or rehabilitate, the facility in~~
387 ~~compliance with NFPA 101, 1994 edition, and may utilize the~~
388 ~~alternative approaches to life safety in compliance with NFPA~~
389 ~~101A, 1995 edition. However, a facility for which a building~~
390 ~~permit or certificate of occupancy is issued before July 1,~~
391 ~~2016, that undergoes Level III building alteration or~~
392 ~~rehabilitation, as defined in the Florida Building Code, or~~
393 ~~seeks to utilize features not authorized under the 1994 or 1995~~
394 ~~editions of the Life Safety Code must thereafter comply with all~~
395 ~~aspects of the uniform firesafety standards established under s.~~
396 ~~633.206, and the Florida Fire Prevention Code, in effect for~~
397 ~~assisted living facilities as adopted by the State Fire Marshal.~~

398 ~~3. Resident elopement requirements. Facilities are~~
399 ~~required to conduct a minimum of two resident elopement~~
400 ~~prevention and response drills per year. All administrators and~~

401 ~~direct care staff must participate in the drills which shall~~
402 ~~include a review of procedures to address resident elopement.~~
403 ~~Facilities must document the implementation of the drills and~~
404 ~~ensure that the drills are conducted in a manner consistent with~~
405 ~~the facility's resident elopement policies and procedures.~~

406 (b) The preparation and annual update of a comprehensive
407 emergency management plan. Such standards must be included in
408 the rules adopted by the department after consultation with the
409 Division of Emergency Management. At a minimum, the rules must
410 provide for plan components that address emergency evacuation
411 transportation; adequate sheltering arrangements; postdisaster
412 activities, including provision of emergency power, food, and
413 water; postdisaster transportation; supplies; staffing;
414 emergency equipment; individual identification of residents and
415 transfer of records; communication with families; and responses
416 to family inquiries. The comprehensive emergency management plan
417 is subject to review and approval by the local emergency
418 management agency. During its review, the local emergency
419 management agency shall ensure that the following agencies, at a
420 minimum, are given the opportunity to review the plan: the
421 Department of Elderly Affairs, the Department of Health, the
422 Agency for Health Care Administration, and the Division of
423 Emergency Management. Also, appropriate volunteer organizations
424 must be given the opportunity to review the plan. The local
425 emergency management agency shall complete its review within 60

426 days and either approve the plan or advise the facility of
 427 necessary revisions.

428 (c) The number, training, and qualifications of all
 429 personnel having responsibility for the care of residents. The
 430 rules must require adequate staff to provide for the safety of
 431 all residents. Facilities licensed for 17 or more residents are
 432 required to maintain an alert staff for 24 hours per day.

433 ~~(d) All sanitary conditions within the facility and its~~
 434 ~~surroundings which will ensure the health and comfort of~~
 435 ~~residents. The rules must clearly delineate the responsibilities~~
 436 ~~of the agency's licensure and survey staff, the county health~~
 437 ~~departments, and the local authority having jurisdiction over~~
 438 ~~firesafety and ensure that inspections are not duplicative. The~~
 439 ~~agency may collect fees for food service inspections conducted~~
 440 ~~by the county health departments and transfer such fees to the~~
 441 ~~Department of Health.~~

442 (d)(e) Licensure requirements not in conflict with part II
 443 of chapter 408 License application and license renewal, transfer
 444 of ownership, proper management of resident funds and personal
 445 property, surety bonds, resident contracts, refund policies,
 446 financial ability to operate, and facility and staff records.

447 (e)(f) Inspections, complaint investigations, moratoriums,
 448 classification of deficiencies, levying and enforcement of
 449 penalties, and use of income from fees and fines.

450 (f)(g) The enforcement of the resident bill of rights

451 specified in s. 429.28.

452 (g)~~(h)~~ The care ~~and maintenance~~ of residents, which must
453 allow for technological advances in the provisions of care,
454 safety, and security to include,~~but is not limited to:~~

455 1. The supervision of residents;

456 2. The provision of personal services;

457 3. The provision of, or arrangement for, social and
458 leisure activities;

459 4. The assistance in making arrangements ~~arrangement~~ for
460 appointments and transportation to appropriate medical, dental,
461 nursing, or mental health services, as needed by residents;

462 5. The management of medication stored within the facility
463 and as needed by residents;

464 6. The dietary ~~nutritional~~ needs of residents;

465 7. Resident records, including services provided by the
466 facility; and

467 8. Internal risk management and quality assurance.

468 (h)~~(i)~~ Facilities holding a limited nursing, extended
469 congregate care, or limited mental health license.

470 (i)~~(j)~~ The establishment of specific criteria to define
471 appropriateness of resident admission and continued residency in
472 a facility holding a standard, limited nursing, extended
473 congregate care, and limited mental health license.

474 (j)~~(k)~~ The use of physical or chemical restraints. The use
475 of physical restraints is limited to half-bed rails and other

476 measures as prescribed and documented by the resident's
477 physician with the consent of the resident or, if applicable,
478 the resident's representative or designee or the resident's
479 surrogate, guardian, or attorney in fact. The use of chemical
480 restraints is limited to prescribed dosages of medications
481 authorized by the resident's physician and must be consistent
482 with the resident's diagnosis. Residents who are receiving
483 medications that can serve as chemical restraints must be
484 evaluated by their physician at least annually to assess:

- 485 1. The continued need for the medication.
- 486 2. The level of the medication in the resident's blood.
- 487 3. The need for adjustments in the prescription.

488 (k) ~~(l)~~ Resident elopement drill requirements ~~The~~
489 ~~establishment of specific policies and procedures on resident~~
490 ~~elopement~~. Facilities shall conduct a minimum of two resident
491 elopement drills each year. All administrators and direct care
492 staff must shall participate in the drills, which must include a
493 review of the facility's procedures to prevent and manage
494 resident elopement. Facilities shall document the drills.

495 (2) In adopting any rules pursuant to this part, the
496 department, in conjunction with the agency, shall make distinct
497 standards for facilities based upon facility size; the types of
498 care provided; the physical and mental capabilities and needs of
499 residents; the type, frequency, and amount of services and care
500 offered; and the staffing characteristics of the facility. Rules

501 developed pursuant to this section may not restrict the use of
502 shared staffing and shared programming in facilities that are
503 part of retirement communities that provide multiple levels of
504 care and otherwise meet the requirements of law and rule. If a
505 continuing care facility licensed under chapter 651 or a
506 retirement community offering multiple levels of care licenses a
507 building or part of a building designated for independent living
508 for assisted living, staffing requirements established in rule
509 apply only to residents who receive personal, limited nursing,
510 or extended congregate care services under this part. Such
511 facilities shall retain a log listing the names and unit number
512 for residents receiving these services. The log must be
513 available to surveyors upon request. ~~Except for uniform~~
514 ~~firesafety standards,~~ The department shall adopt by rule
515 separate and distinct standards for facilities with 16 or fewer
516 beds and for facilities with 17 or more beds. The standards for
517 facilities with 16 or fewer beds must be appropriate for a
518 noninstitutional residential environment; however, the structure
519 may not be more than two stories in height and all persons who
520 cannot exit the facility unassisted in an emergency must reside
521 on the first floor. The department, in conjunction with the
522 agency, may make other distinctions among types of facilities as
523 necessary to enforce this part. Where appropriate, the agency
524 shall offer alternate solutions for complying with established
525 standards, based on distinctions made by the department and the

526 agency relative to the physical characteristics of facilities
527 and the types of care offered.

528 ~~(3) The department shall submit a copy of proposed rules~~
529 ~~to the Speaker of the House of Representatives, the President of~~
530 ~~the Senate, and appropriate committees of substance for review~~
531 ~~and comment prior to the promulgation thereof.~~ Rules promulgated
532 by the department shall encourage the development of homelike
533 facilities which promote the dignity, individuality, personal
534 strengths, and decisionmaking ability of residents.

535 (4) The agency, in consultation with the department, may
536 waive rules promulgated pursuant to this part in order to
537 demonstrate and evaluate innovative or cost-effective congregate
538 care alternatives which enable individuals to age in place. Such
539 waivers may be granted only in instances where there is
540 reasonable assurance that the health, safety, or welfare of
541 residents will not be endangered. To apply for a waiver, the
542 licensee shall submit to the agency a written description of the
543 concept to be demonstrated, including goals, objectives, and
544 anticipated benefits; the number and types of residents who will
545 be affected, if applicable; a brief description of how the
546 demonstration will be evaluated; and any other information
547 deemed appropriate by the agency. Any facility granted a waiver
548 shall submit a report of findings to the agency and the
549 department within 12 months. At such time, the agency may renew
550 or revoke the waiver or pursue any regulatory or statutory

551 changes necessary to allow other facilities to adopt the same
552 practices. The department may by rule clarify terms and
553 establish waiver application procedures, criteria for reviewing
554 waiver proposals, and procedures for reporting findings, as
555 necessary to implement this subsection.

556 (5) The agency shall ~~may~~ use an abbreviated biennial
557 standard licensure inspection that consists of a review of key
558 quality-of-care standards in lieu of a full inspection in a
559 facility that has a good record of past performance. However, a
560 full inspection must be conducted in a facility that has a
561 history of class I or class II violations, uncorrected class III
562 violations, a long-term care ombudsman complaint referred to a
563 regulatory agency for further action ~~confirmed ombudsman council~~
564 ~~complaints~~, or confirmed licensure complaints, within the
565 previous licensure period immediately preceding the inspection
566 or if a potentially serious problem is identified during the
567 abbreviated inspection. The agency, ~~in consultation with the~~
568 ~~department~~, shall develop the key quality-of-care standards with
569 ~~input from the State Long-Term Care Ombudsman Council and~~
570 ~~representatives of provider groups~~ for incorporation into its
571 rules.

572 Section 8. Section 429.435, Florida Statutes, is created
573 to read:

574 429.435 Uniform firesafety standards.—Uniform firesafety
575 standards for assisted living facilities shall be established by

576 the State Fire Marshal pursuant to s. 633.206.

577 (1) A firesafety evacuation capability determination shall
578 be conducted within 6 months after the date of initial
579 licensure.

580 (2) (a) The National Fire Protection Association, Life
581 Safety Code, NFPA 101 and 101A, current editions, shall be used
582 in determining the uniform firesafety code adopted by the State
583 Fire Marshal for assisted living facilities, pursuant to s.
584 633.206.

585 (b) A local government or a utility may charge fees only
586 in an amount not to exceed the actual expenses incurred by the
587 local government or the utility relating to the installation and
588 maintenance of an automatic fire sprinkler system in a licensed
589 assisted living facility structure.

590 (c) All licensed facilities must have an annual fire
591 inspection conducted by the local fire marshal or authority
592 having jurisdiction.

593 (d) An assisted living facility that is issued a building
594 permit or certificate of occupancy before July 1, 2016, may at
595 its option and after notifying the authority having
596 jurisdiction, remain under the provisions of the 1994 and 1995
597 editions of the National Fire Protection Association, the Life
598 Safety Code, NFPA 101, and NFPA 101A. The facility opting to
599 remain under such provisions may make repairs, modernizations,
600 renovations, or additions to, or rehabilitate, the facility in

601 compliance with NFPA 101, 1994 edition, and may utilize the
602 alternative approaches to life safety in compliance with NFPA
603 101A, 1995 edition. However, a facility for which a building
604 permit or certificate of occupancy is issued before July 1,
605 2016, that undergoes Level III building alteration or
606 rehabilitation, as defined in the Florida Building Code, or
607 seeks to utilize features not authorized under the 1994 or 1995
608 editions of the Life Safety Code must thereafter comply with all
609 aspects of the uniform firesafety standards established under s.
610 633.206, and the Florida Fire Prevention Code, in effect for
611 assisted living facilities as adopted by the State Fire Marshal.

612 Section 9. Section 429.52, Florida Statutes, is amended to
613 read:

614 429.52 Staff training ~~and educational~~ programs; core
615 training educational requirement.-

616 (1) ~~Effective October 1, 2015,~~ Each new assisted living
617 facility employee who has not previously completed core training
618 must attend a preservice orientation provided by the facility
619 before interacting with residents. The preservice orientation
620 must be at least 2 hours in duration and cover topics that help
621 the employee provide responsible care and respond to the needs
622 of facility residents. Upon completion, the employee and the
623 administrator of the facility must sign a statement that the
624 employee completed the required preservice orientation. The
625 facility must keep the signed statement in the employee's

626 personnel record.

627 (2) Administrators and other assisted living facility
628 staff must meet minimum training ~~and education~~ requirements
629 established by the Department of Elderly Affairs by rule. This
630 training ~~and education~~ is intended to assist facilities to
631 appropriately respond to the needs of residents, to maintain
632 resident care and facility standards, and to meet licensure
633 requirements.

634 (3) The department shall establish core training
635 requirements for administrators consisting of minimum core
636 training and a competency test. ~~The and a~~ minimum required score
637 to indicate successful passage completion of the core competency
638 test is 75 percent ~~training and educational requirements~~. The
639 competency test must be developed by the department in
640 conjunction with the agency and providers. The required
641 competency test ~~training and education~~ must cover at least the
642 following topics:

643 (a) State law and rules relating to assisted living
644 facilities.

645 (b) Resident rights and identifying and reporting abuse,
646 neglect, and exploitation.

647 (c) Special needs of elderly persons, persons with mental
648 illness, and persons with developmental disabilities and how to
649 meet those needs.

650 (d) Nutrition and food service, including acceptable

651 sanitation practices for preparing, storing, and serving food.

652 (e) Medication management, recordkeeping, and proper
653 techniques for assisting residents with self-administered
654 medication.

655 (f) Firesafety requirements, including fire evacuation
656 drill procedures and other emergency procedures.

657 (g) Care of persons with Alzheimer's disease and related
658 disorders.

659 (4) A ~~new~~ facility administrator must complete the
660 required core training ~~and education~~, including the competency
661 test, within 90 days after date of employment as an
662 administrator. Failure to do so is a violation of this part and
663 subjects the violator to an administrative fine as prescribed in
664 s. 429.19. Administrators licensed in accordance with part II of
665 chapter 468 are exempt from this requirement. Other licensed
666 professionals may be exempted, as determined by the department
667 by rule.

668 (5) Administrators are required to participate in
669 continuing education for a minimum of 12 contact hours every 2
670 years.

671 (6) Staff ~~involved with the management of medications and~~
672 assisting with the self-administration of medications under s.
673 429.256 must complete a minimum of 6 ~~additional~~ hours of
674 training provided by a registered nurse or a licensed
675 pharmacist before providing assistance, ~~or department staff. Two~~

676 hours of continuing education is required annually thereafter.
677 The department shall establish by rule the minimum requirements
678 of this ~~additional~~ training.

679 (7) Other facility staff shall participate in in-service
680 training relevant to their job duties as specified by rule of
681 the department. Topics covered during the preservice orientation
682 are not required to be repeated during in-service training. A
683 single certificate of completion that covers all required in-
684 service training topics may be issued to a participating staff
685 member if the training is provided in a single training session.

686 (8) If ~~the department or~~ the agency determines that there
687 are problems in a facility that could be reduced through
688 specific staff training ~~or education~~ beyond that already
689 required under this section, ~~the department or~~ the agency may
690 require, and provide, or cause to be provided, the training ~~or~~
691 ~~education~~ of any personal care staff in the facility.

692 (9) The department shall adopt rules related to these
693 training requirements, the competency test, necessary
694 procedures, and competency test fees and shall adopt or contract
695 with another entity to develop and administer the competency
696 test. The department must also adopt a curriculum outline to be
697 used by core trainers, ~~which shall be used~~ as the minimum core
698 training content requirements. The department shall consult with
699 representatives of stakeholder associations and agencies in the
700 development of the curriculum outline.

701 (10) The core training required by this section ~~other than~~
 702 ~~the preservice orientation~~ must be conducted by persons
 703 registered with the department as having the requisite
 704 experience and credentials to conduct the training. A person
 705 seeking to register as a core trainer must provide the
 706 department with proof of completion of the ~~minimum~~ core training
 707 ~~education~~ requirements, successful passage of the competency
 708 test established under this section, and proof of compliance
 709 with the continuing education requirement in subsection (5).

710 (11) A person seeking to register as a core trainer must
 711 also:

712 (a) Provide proof of completion of a 4-year degree from an
 713 accredited college or university and must have worked in a
 714 management position in an assisted living facility for 3 years
 715 after being core certified;

716 (b) Have worked in a management position in an assisted
 717 living facility for 5 years after being core certified and have
 718 1 year of teaching experience as an educator or staff trainer
 719 for persons who work in assisted living facilities or other
 720 long-term care settings;

721 (c) Have been previously employed as a core trainer for
 722 the department; or

723 (d) Meet other qualification criteria as defined in rule,
 724 which the department is authorized to adopt.

725 (12) The department shall adopt rules to establish trainer

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726 | registration requirements.

727 | Section 10. This act shall take effect July 1, 2019.