

1 A bill to be entitled
2 An act relating to improving screening for and
3 treatment of blood clots; providing a short title;
4 amending s. 385.102, F.S.; revising legislative
5 findings under the Chronic Diseases Act; amending s.
6 395.30381, F.S.; requiring the stroke registry to
7 include a blood clot and pulmonary embolism registry;
8 requiring certain facilities to report specified
9 information to the registry beginning on a certain
10 date; requiring the Agency for Health Care
11 Administration to submit specified information to the
12 Governor and Legislature; providing a limitation on
13 the purpose of the publication of information from the
14 registry; amending s. 395.1012, F.S.; requiring
15 hospitals with emergency departments and ambulatory
16 surgical centers to develop and implement policies and
17 procedures and conduct training for the rendering of
18 appropriate medical attention for persons at risk of
19 forming blood clots, pulmonary embolisms, or deep vein
20 thromboses; amending s. 400.211, F.S.; revising
21 requirements for certain annual inservice training for
22 certified nursing assistants employed by nursing home
23 facilities; revising training requirements for certain
24 certified nursing assistants who may be delegated
25 tasks in nursing home facilities; amending s. 429.41,

26 F.S.; revising minimum standards for the care of
 27 residents in assisted living facilities; amending s.
 28 429.52, F.S.; revising requirements for the core
 29 competency test for administrators of assisted living
 30 facilities; providing an effective date.

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

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 34 **Section 1.** This act may be cited as the "Emily Adkins
 35 Family Protection Act."

36 **Section 2. Subsection (1) of section 385.102, Florida**
 37 **Statutes, is amended to read:**

38 385.102 Legislative intent.—It is the finding of the
 39 Legislature that:

40 (1) Chronic diseases exist in high proportions among the
 41 people of this state. These chronic diseases include, but are
 42 not limited to, heart disease, hypertension, diabetes, renal
 43 disease, chronic obstructive pulmonary disease, cancer, chronic
 44 critical illness, and genetic predisposition for developing
 45 blood clots and pulmonary embolisms ~~chronic obstructive lung~~
 46 ~~disease~~. These diseases are often interrelated, and they
 47 directly and indirectly account for a high rate of death and
 48 illness.

49 **Section 3. Section 395.30381, Florida Statutes, is amended**
 50 **to read:**

51 395.30381 Statewide stroke registry.—

52 (1) Subject to a specific appropriation, the department
53 shall contract with a private entity to establish and maintain a
54 statewide stroke, blood clot, and pulmonary embolism registry to
55 ensure that the stroke, blood clot, and pulmonary embolism
56 performance measures required to be submitted under subsections
57 (2) and (3) ~~subsection (2)~~ are maintained and available for use
58 to improve or modify the stroke, blood clot, and pulmonary
59 embolism care systems ~~system~~, ensure compliance with standards
60 and nationally recognized guidelines, and monitor stroke, blood
61 clot, and pulmonary embolism patient outcomes.

62 (2) Each acute stroke ready center, primary stroke center,
63 thrombectomy-capable stroke center, and comprehensive stroke
64 center shall regularly report to the statewide stroke registry
65 information containing nationally recognized stroke performance
66 measures.

67 (3) Beginning July 1, 2026, each hospital with an
68 emergency department and each ambulatory surgical center shall
69 regularly report to the statewide stroke, blood clot, and
70 pulmonary embolism registry information containing nationally
71 recognized blood clot and pulmonary embolism performance
72 measures and data on the incidence and prevalence of blood clots
73 and pulmonary embolisms. Such data must include the following
74 information:

75 (a) The number of blood clots, pulmonary embolisms, and

76 deep vein thromboses identified and diagnosed.

77 (b) The age of the patient.

78 (c) The zip code of the patient.

79 (d) The sex of the patient.

80 (e) Whether the patient is a resident of a licensed
81 nursing home or assisted living facility.

82 (f) Whether the blood clot, pulmonary embolism, or deep
83 vein thrombosis was fatal.

84 (g) How the diagnosis was made, such as by using imaging
85 modalities.

86 (h) The treatment that was recommended for the blood clot,
87 pulmonary embolism, or deep vein thrombosis, as applicable.

88 (4)-(3) The department shall require the contracted private
89 entity to use a nationally recognized platform to collect data
90 from each stroke center on the stroke performance measures
91 required in subsection (2) and from each hospital with an
92 emergency department and each ambulatory surgical center on the
93 performance measures required in subsection (3). The contracted
94 private entity shall provide regular reports to the department
95 on the data collected.

96 (5) By March 1, 2026, the agency must submit to the
97 Governor, the President of the Senate, and the Speaker of the
98 House of Representatives a detailed report on the incidence of
99 blood clots and pulmonary embolisms using inpatient, outpatient,
100 and ambulatory surgical center data for services provided

101 between July 1, 2024, and July 1, 2025. The report shall provide
102 analyses of all of the following:

103 (a) Age category, initial primary diagnosis and procedure,
104 any secondary diagnoses, readmission rates for inpatients,
105 admission rates for blood clots and pulmonary embolisms for
106 which the patient had an ambulatory surgery procedure, and
107 emergency department visits for blood clots linked to any
108 previous admission.

109 (b) Whether the blood clot or pulmonary embolism was
110 present upon admission.

111 (c) The incidence of blood clots for procedures reported
112 on the agency's Florida Health Finder website.

113 (d) The principal payor, the sex of the patient, and the
114 patient's discharge status.

115 (6)+(4) A liability of any kind or character for damages or
116 other relief may ~~shall~~ not arise or be enforced against any
117 acute stroke ready center, primary stroke center, thrombectomy-
118 capable stroke center, or comprehensive stroke center by reason
119 of having provided such information to the statewide stroke
120 registry.

121 (7) The contractor operating the registry may use or
122 publish information from the registry only for the purpose of
123 advancing medical research or medical education in the interest
124 of reducing morbidity or mortality.

125 **Section 4. Subsection (5) is added to section 395.1012,**

126 **Florida Statutes, to read:**

127 395.1012 Patient safety.—

128 (5) Each hospital with an emergency department and each
 129 ambulatory surgical center must:

130 (a) Develop and implement policies and procedures for the
 131 rendering of appropriate medical attention for persons at risk
 132 of forming blood clots, pulmonary embolisms, or deep vein
 133 thromboses which reflect evidence-based best practices relating
 134 to, at a minimum:

135 1. Assessing patients for risk of blood clots, pulmonary
 136 embolisms, and deep vein thromboses using a nationally
 137 recognized risk assessment tool.

138 2. Treatment options for a patient diagnosed with a blood
 139 clot, pulmonary embolism, or deep vein thrombosis.

140 (b) Train all nonphysician personnel at least annually on
 141 the policies and procedures developed under this subsection. For
 142 purposes of this subsection, "nonphysician personnel" means all
 143 personnel of the licensed facility working in clinical areas and
 144 providing patient care, except those persons licensed as health
 145 care practitioners.

146 **Section 5. Subsection (4) and paragraph (a) of subsection**
 147 **(5) of section 400.211, Florida Statutes, are amended to read:**

148 400.211 Persons employed as nursing assistants;
 149 certification requirement; qualified medication aide designation
 150 and requirements.—

151 (4) When employed by a nursing home facility for a 12-
152 month period or longer, a nursing assistant, to maintain
153 certification, shall submit to a performance review every 12
154 months and must receive regular inservice education based on the
155 outcome of such reviews. The inservice training must:

156 (a) Be sufficient to ensure the continuing competence of
157 nursing assistants and must meet the standard specified in s.
158 464.203(7);

159 (b) Include, at a minimum:

160 1. Techniques for assisting with eating and proper
161 feeding;

162 2. Principles of adequate nutrition and hydration;

163 3. Techniques for assisting and responding to the
164 cognitively impaired resident or the resident with difficult
165 behaviors;

166 4. Techniques for caring for the resident at the end-of-
167 life; ~~and~~

168 5. Recognizing changes that place a resident at risk for
169 pressure ulcers and falls; and

170 6. Recognizing signs and symptoms of a blood clot,
171 pulmonary embolism, or deep vein thrombosis and techniques for
172 providing an emergency response; and

173 (c) Address areas of weakness as determined in nursing
174 assistant performance reviews and may address the special needs
175 of residents as determined by the nursing home facility staff.

176
177 Costs associated with this training may not be reimbursed from
178 additional Medicaid funding through interim rate adjustments.

179 (5) A nursing home, in accordance with chapter 464 and
180 rules adopted pursuant to this section, may authorize a
181 registered nurse to delegate tasks, including medication
182 administration, to a certified nursing assistant who meets the
183 requirements of this subsection.

184 (a) In addition to the initial 6-hour training course and
185 determination of competency required under s. 464.2035, to be
186 eligible to administer medication to a resident of a nursing
187 home facility, a certified nursing assistant must:

188 1. Hold a clear and active certification from the
189 Department of Health for a minimum of 1 year immediately
190 preceding the delegation;

191 2. Complete an additional 34-hour training course approved
192 by the Board of Nursing in medication administration and
193 associated tasks, including, but not limited to, blood glucose
194 level checks, dialing oxygen flow meters to prescribed settings,
195 ~~and~~ and assisting with continuous positive airway pressure devices,
196 and identification of signs and symptoms of a blood clot and how
197 to assist with a response protocol; and

198 3. Demonstrate clinical competency by successfully
199 completing a supervised clinical practice in medication
200 administration and associated tasks conducted in the facility.

Section 6. Paragraph (g) of subsection (1) of section 429.41, Florida Statutes, is amended to read:

429.41 Rules establishing standards.—

(1) It is the intent of the Legislature that rules published and enforced pursuant to this section shall include criteria by which a reasonable and consistent quality of resident care and quality of life may be ensured and the results of such resident care may be demonstrated. Such rules shall also promote a safe and sanitary environment that is residential and noninstitutional in design or nature and may allow for technological advances in the provision of care, safety, and security, including the use of devices, equipment, and other security measures related to wander management, emergency response, staff risk management, and the general safety and security of residents, staff, and the facility. It is further intended that reasonable efforts be made to accommodate the needs and preferences of residents to enhance the quality of life in a facility. The agency, in consultation with the Department of Children and Families and the Department of Health, shall adopt rules to administer this part, which must include reasonable and fair minimum standards in relation to:

(g) The care of residents provided by the facility, which must include:

1. The supervision of residents;
2. The provision of personal services;

- 226 3. The provision of, or arrangement for, social and
 227 leisure activities;
- 228 4. The assistance in making arrangements for appointments
 229 and transportation to appropriate medical, dental, nursing, or
 230 mental health services, as needed by residents;
- 231 5. The management of medication stored within the facility
 232 and as needed by residents;
- 233 6. The dietary needs of residents;
- 234 7. Resident records; ~~and~~
- 235 8. Internal risk management and quality assurance; and
- 236 9. Identification of residents who are at risk for
 237 developing blood clots, and the treating facility's response
 238 protocols to help ensure access to timely treatment.

239 **Section 7. Paragraph (h) is added to subsection (3) of**
 240 **section 429.52, Florida Statutes, to read:**

241 429.52 Staff training and educational requirements.—

242 (3) The agency, in conjunction with providers, shall
 243 develop core training requirements for administrators consisting
 244 of core training learning objectives, a competency test, and a
 245 minimum required score to indicate successful passage of the
 246 core competency test. The required core competency test must
 247 cover at least the following topics:

248 (h) Identification of and responding to residents at high
 249 risk of developing blood clots and pulmonary embolisms.

250 **Section 8.** This act shall take effect July 1, 2025.