

1 A bill to be entitled
2 An act relating to health care disaster preparedness
3 and response; amending s. 252.355, F.S.; amending s.
4 252.355, F.S.; directing the Department of Health, in
5 coordination with the Division of Emergency Management
6 and local emergency management agencies to maintain a
7 statewide registry of persons with special needs;
8 requiring the department to develop and maintain a
9 statewide special needs shelter registration program;
10 creating the Special Needs Shelter Registry Work
11 Group; providing for membership and meetings;
12 directing the work group to develop the uniform
13 special needs registration form by a certain date;
14 requiring local emergency management agencies to
15 exclusively use the statewide registry to register
16 persons for special needs shelters; requiring local
17 emergency management agencies to enter into agreements
18 with certain hospitals to shelter certain individuals;
19 requiring the Department of Health to assist local
20 emergency management agencies with developing
21 alternative sheltering options for persons deemed
22 ineligible for a special needs shelter; authorizing
23 local emergency management agencies to coordinate with
24 the Agency for Health Care Administration for
25 placement of certain persons deemed ineligible for a

26 | special needs shelter in certain circumstances;
 27 | creating s. 252.3591, F.S.; requiring local emergency
 28 | management agencies to establish a procedure for
 29 | authorizing employees of health care facilities to
 30 | enter and remain in curfew areas during a declared
 31 | emergency or disaster; authorizing a law enforcement
 32 | officer to specify a permissible route of ingress or
 33 | egress for an authorized person; amending s. 381.0303,
 34 | F.S.; directing the department to recruit faculty and
 35 | students from state university and college health care
 36 | programs to staff special needs shelters; authorizing
 37 | certain employees of state agencies, universities, and
 38 | colleges to staff local special needs shelters;
 39 | requiring the department reimburse a state agency,
 40 | university, or college employee who staffs a special
 41 | needs shelters at the request of the department;
 42 | amending s. 393.0651, F.S.; requiring the Agency for
 43 | Persons with Disabilities to develop a personal
 44 | disaster plan for each client receiving services under
 45 | the home and community-based services Medicaid waiver
 46 | program and update such plan annually; amending s.
 47 | 393.067, F.S.; requiring the agency to determine
 48 | compliance with specified requirements by entities
 49 | licensed by the agency; directing the agency to
 50 | require facilities licensed under ch. 393, F.S., to

51 include additional components in their comprehensive
 52 emergency management plans; requiring a facility to
 53 provide information regarding its plan and any changes
 54 thereto to designated individuals, the agency, and the
 55 local emergency management agency within a specified
 56 timeframe; requiring a facility to conduct specified
 57 staff training on the policies and procedures for
 58 implementing the plan; requiring the agency to
 59 communicate before the disaster impacts the area which
 60 service provision requirements may be waived during
 61 the emergency; amending s. 393.0673, F.S.; authorizing
 62 the agency to discipline or refuse to issue or renew a
 63 facility's license for failure to comply with the
 64 requirements of the comprehensive emergency management
 65 plan or to follow the policies or procedures in the
 66 plan during a disaster; amending s. 393.0675, F.S.;
 67 authorizing the agency to pursue injunctive
 68 proceedings against a facility for failure to comply
 69 with the requirements of the comprehensive emergency
 70 management plan or to follow the policies or
 71 procedures in the plan during a disaster; amending s.
 72 400.102, F.S.; providing additional grounds for action
 73 by the agency against a licensee; amending s. 400.19,
 74 F.S.; requiring the Agency for Health Care
 75 Administration to conduct certain unannounced

76 inspections of any facility licensed under part II of
 77 ch. 400, F.S., a district nursing home unit in a
 78 hospital, and certain freestanding facilities licensed
 79 under ch. 395, F.S., to determine compliance with
 80 comprehensive emergency management plan requirements;
 81 amending s. 400.23, F.S.; directing the agency to
 82 require facilities licensed under part II of ch. 400,
 83 F.S., to include additional components in their
 84 comprehensive emergency management plans; requiring a
 85 facility to provide information regarding its plan and
 86 any changes thereto to designated individuals, the
 87 agency, and the local emergency management agency
 88 within a specified timeframe; amending s. 400.492,
 89 F.S.; revising requirements with respect to the
 90 comprehensive emergency management plans of home
 91 health agencies to include the means by which
 92 continuing services will be provided to patients in
 93 private residences, assisted living facilities or
 94 adult family care homes and patients who evacuate to
 95 special needs shelters; providing requirements for
 96 notification of patients and designated interested
 97 parties; requiring the list of patients needing
 98 continued home health agency care to include certain
 99 patients; requiring home health agencies to
 100 demonstrate a good faith effort to attempt to provide

101 services by documenting staff attempts to follow
 102 procedures outlined in the comprehensive emergency
 103 management plan; amending s. 400.497, F.S.; providing
 104 deadlines for submission and approval of a home health
 105 agency's comprehensive emergency management plan;
 106 authorizing the Agency for Health Care Administration
 107 to impose a fine on a home health agency for failure
 108 to comply with plan requirements and submission
 109 deadlines; amending s. 400.506, F.S.; revising
 110 requirements with respect to the comprehensive
 111 emergency management plans of nurse registries to
 112 include the means by which continuing services will be
 113 provided to certain patients who remain at home or in
 114 an assisted living facility or adult family care home
 115 or who evacuate to a special needs shelter; requiring
 116 a nurse registry to document efforts to comply with
 117 plan requirements; providing requirements for
 118 notification of patients and designated interested
 119 parties; requiring the list of patients needing
 120 continued care to include certain patients; providing
 121 additional responsibilities of a nurse registry;
 122 providing deadlines for plan submission and approval;
 123 amending s. 408.813, F.S.; authorizing the agency to
 124 impose a fine on a health care provider regulated
 125 under part II of ch. 408, F.S., for failure to have an

126 approved comprehensive emergency management plan and
 127 for failure to have certain agreements after a certain
 128 date; amending s. 408.821, F.S.; requiring licensees
 129 required by authorizing statutes to have an emergency
 130 operations plan to conduct annual staff training on
 131 the policies and procedures for implementing the
 132 emergency operations plan within a specified
 133 timeframe; providing for agency action for failure to
 134 comply; amending s. 429.14, F.S.; authorizing the
 135 agency to deny or revoke the license of an assisted
 136 living facility for failure to comply with
 137 comprehensive emergency management plan requirements;
 138 amending s. 429.28, F.S.; revising the assisted living
 139 facility resident bill of rights to include a
 140 requirement that the agency determine compliance with
 141 the facility's comprehensive emergency management plan
 142 and conduct followup inspections to monitor compliance
 143 under certain circumstances; amending s. 429.41, F.S.;
 144 directing the agency to require facilities licensed
 145 under ch. 429, F.S., to include additional components
 146 in their comprehensive emergency management plans;
 147 requiring a facility to provide information regarding
 148 its plan and any changes thereto to designated
 149 individuals, the agency, and the local emergency
 150 management agency within a specified timeframe;

151 providing an effective date.

152

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

154

155 Section 1. Section 252.355, Florida Statutes, is amended to
156 read:

157 252.355 Registry of persons with special needs; notice;
158 registration program.—

159 (1) In order to meet the special needs of persons who
160 would need assistance during evacuations and sheltering because
161 of physical, mental, cognitive impairment, or sensory
162 disabilities, the Department of Health ~~division~~, in coordination
163 with the division and each local emergency management agency in
164 the state, shall maintain a statewide registry of persons with
165 special needs ~~located within the jurisdiction of the local~~
166 ~~agency. The registration shall identify those persons in need of~~
167 ~~assistance and plan for resource allocation to meet those~~
168 ~~identified needs.~~

169 (2) ~~In order to ensure that all persons with special needs~~
170 ~~may register,~~ The Department of Health ~~division~~ shall develop
171 and maintain a statewide special needs shelter registration
172 program. ~~The registration program must be developed by January~~
173 ~~1, 2015, and fully implemented by March 1, 2015.~~

174 (a) The statewide special needs shelter registration
175 program shall:

176 1. Identify those persons in need of assistance and plan
 177 for resource allocation to meet those identified needs.

178 2. Include, at a minimum, a uniform registration form and
 179 a database for uploading and storing submitted registration
 180 forms that may be accessed by the Department of Health, the
 181 division and local emergency management agencies.

182 (b) The registration program must be developed by January
 183 1, 2019, and fully implemented by March 1, 2019.

184 ~~(a) The registration program shall include, at a minimum,~~
 185 ~~a uniform electronic registration form and a database for~~
 186 ~~uploading and storing submitted registration forms that may be~~
 187 ~~accessed by the appropriate local emergency management agency.~~
 188 ~~The link to the registration form shall be easily accessible on~~
 189 ~~each local emergency management agency's website. Upon receipt~~
 190 ~~of a paper registration form, the local emergency management~~
 191 ~~agency shall enter the person's registration information into~~
 192 ~~the database.~~

193 (3) The Department of Health shall develop the uniform
 194 registration form based upon recommendations of the Special
 195 Needs Shelter Registry Work Group.

196 (a) The Special Needs Shelter Registry Work Group is
 197 created within the Department of Health for the purpose of
 198 making recommendations for the development of the uniform
 199 registration form. The Department of Health shall use existing
 200 and available resources to administer and support the activities

201 of the work group. Members of the work group shall serve without
 202 compensation and are not entitled to reimbursement for per diem
 203 or travel expenses. Meetings may be conducted in person, by
 204 teleconference, or by other electronic means.

205 (b) The work group shall consist of 11 members:

206 1. The State Surgeon General or designee, who shall serve
 207 as the chair of the work group.

208 2. The Director of the Division of Emergency Management or
 209 a designee.

210 3. The Secretary of the Agency for Health Care
 211 Administration or a designee.

212 4. The Secretary of the Department of Children and
 213 Families or a designee.

214 5. The Secretary of the Department of Elder Affairs or a
 215 designee.

216 6. The Director of the Agency for Persons with
 217 Disabilities or designee.

218 7. Five representatives of local emergency management
 219 agencies appointed by the Florida Association of Counties.

220 (c) The Special Needs Shelter Registry Work Group shall
 221 submit its recommendations to the Department of Health on or
 222 before October 31, 2018.

223 (d) This subsection expires January 1, 2019.

224 (4) Each local emergency management agency shall
 225 exclusively use the statewide special needs shelter registry to

226 register individuals for special needs shelters and may not use
227 local special needs registries. Each local emergency management
228 agency, in coordination with its local county health department,
229 shall establish eligibility requirements for sheltering in a
230 local special needs shelter and publish these requirements and a
231 link to the uniform registration form for the statewide special
232 needs shelter registry on its website. Each local emergency
233 management agency shall also make paper registration forms
234 available and establish procedures for submitting a paper
235 registration form and entering into the statewide special needs
236 shelter registry.

237 (a) A local emergency management agency shall notify a
238 registrant in writing within 10 days after submission of a
239 registration form whether he or she is eligible to shelter in a
240 local special needs shelter and designate his or her eligibility
241 status in the registry.

242 (b) The Department of Health shall assist local emergency
243 management agencies with developing alternative sheltering
244 options for any ineligible registrant. Each local emergency
245 management agency and each general hospital licensed under
246 chapter 395 located within the local emergency management
247 agency's jurisdiction shall enter into agreements to shelter
248 individuals during a declared emergency, whose medical
249 complexity or reliance on life support devices or other medical
250 equipment exceeds the capabilities of special needs shelters. A

251 local emergency management agency may coordinate with the Agency
 252 for Health Care Administration to facilitate placement in a
 253 health care facility for any individual who registers during a
 254 declared emergency or disaster and is deemed ineligible to
 255 shelter in a local special needs shelter.

256 (5) The Department of Health, in conjunction with the
 257 division, shall be the designated lead agency responsible for
 258 community education and outreach to the public, including
 259 special needs clients, regarding registration and special needs
 260 shelters and general information regarding shelter stays. The
 261 Department of Health shall develop a brochure that provides
 262 information regarding special needs shelter registration
 263 procedures. The Department of Health, the division, and each
 264 local management agency shall make the brochure easily
 265 accessible on their websites.

266 (6) ~~(b)~~ To assist in identifying persons with special
 267 needs, home health agencies, hospices, nurse registries, home
 268 medical equipment providers, the Department of Children and
 269 Families, the Department of Health, the Agency for Health Care
 270 Administration, the Department of Education, the Agency for
 271 Persons with Disabilities, the Department of Elderly Affairs,
 272 and memory disorder clinics shall, and any physician or
 273 physician assistant licensed under chapter 458 or chapter 459,
 274 any advanced registered nurse practitioner licensed under
 275 chapter 464, and any pharmacy licensed under chapter 465 may,

276 annually provide registration information to all of their
277 special needs clients or their caregivers. ~~The division shall~~
278 ~~develop a brochure that provides information regarding special~~
279 ~~needs shelter registration procedures. The brochure must be~~
280 ~~easily accessible on the division's website.~~ All appropriate
281 agencies and community-based service providers, including aging
282 and disability resource centers, memory disorder clinics, home
283 health care providers, hospices, nurse registries, and home
284 medical equipment providers, shall, and any physician or
285 physician assistant licensed under chapter 458 or chapter 459
286 and any advanced registered nurse practitioner licensed under
287 chapter 464 may, assist emergency management agencies by
288 annually registering persons with special needs for special
289 needs shelters, collecting registration information for persons
290 with special needs as part of the program intake process, and
291 establishing programs to educate clients about the registration
292 process and disaster preparedness safety procedures. A client of
293 a state-funded or federally funded service program who has a
294 physical, mental, or cognitive impairment or sensory disability
295 and who needs assistance in evacuating, or when in a shelter,
296 must register as a person with special needs. The registration
297 program shall give persons with special needs the option of
298 preauthorizing emergency response personnel to enter their homes
299 during search and rescue operations if necessary to ensure their
300 safety and welfare following disasters.

301 ~~(c) The division shall be the designated lead agency~~
 302 ~~responsible for community education and outreach to the public,~~
 303 ~~including special needs clients, regarding registration and~~
 304 ~~special needs shelters and general information regarding shelter~~
 305 ~~stays.~~

306 (7)~~(d)~~ On or before May 31 of each year, each electric
 307 utility in the state shall annually notify residential customers
 308 in its service area of the availability of the registration
 309 program available through their local emergency management
 310 agency by:

311 (a)~~1.~~ An initial notification upon the activation of new
 312 residential service with the electric utility, followed by one
 313 annual notification between January 1 and May 31; or

314 (b)~~2.~~ Two separate annual notifications between January 1
 315 and May 31.

316
 317 The notification may be made by any available means, including,
 318 but not limited to, written, electronic, or verbal notification,
 319 and may be made concurrently with any other notification to
 320 residential customers required by law or rule.

321 (8)~~(3)~~ A local emergency management agency shall allow a
 322 person with special needs ~~must be allowed~~ to bring his or her
 323 service animal into a special needs shelter in accordance with
 324 s. 413.08.

325 (9)~~(4)~~ All records, data, information, correspondence, and

326 | communications relating to the registration of persons with
 327 | special needs as provided in subsection (1) are confidential and
 328 | exempt from s. 119.07(1), except that such information shall be
 329 | available to other emergency response agencies, as determined by
 330 | the local emergency management director. Local law enforcement
 331 | agencies shall be given complete shelter roster information upon
 332 | request.

333 | Section 2. Section 252.3591, Florida Statutes, is created
 334 | to read:

335 | 252.3591 Ensuring access to care.-

336 | (1) Each local emergency management agency shall establish
 337 | a procedure for authorizing employees of a facility licensed
 338 | under chapter 393 or chapter 408 to enter and remain in a curfew
 339 | area during a declared emergency or disaster.

340 | (2) Notwithstanding any curfew, a person authorized under
 341 | subsection (1) may enter or remain in a curfew area for the
 342 | limited purpose of implementing a licensed facility's emergency
 343 | management plan and providing services authorized under chapter
 344 | 393 or chapter 408.

345 | (3) This section does not prohibit a law enforcement
 346 | officer from specifying the permissible route of ingress or
 347 | egress for a person authorized under this section.

348 | Section 3. Section 381.0303, Florida Statutes, is amended
 349 | to read:

350 | 381.0303 Special needs shelters.-

351 (1) PURPOSE.—The purpose of this section is to provide for
 352 the operation and closure of special needs shelters and to
 353 designate the Department of Health, through its county health
 354 departments, as the lead agency for coordination of the
 355 recruitment of health care practitioners, as defined in s.
 356 456.001(4), to staff special needs shelters in times of
 357 emergency or disaster and to provide resources to the department
 358 to carry out this responsibility. However, nothing in this
 359 section prohibits a county health department from entering into
 360 an agreement with a local emergency management agency to assume
 361 the lead responsibility for recruiting health care
 362 practitioners.

363 (2) SPECIAL NEEDS SHELTER PLAN; STAFFING; STATE AGENCY
 364 ASSISTANCE.—~~If funds have been appropriated to support disaster~~
 365 ~~coordinator positions in county health departments:~~

366 (a) The department shall assume lead responsibility for
 367 the coordination of local medical and health care providers, the
 368 American Red Cross, and other interested parties in developing a
 369 plan for the staffing and medical management of special needs
 370 shelters. The local Children's Medical Services offices shall
 371 assume lead responsibility for the coordination of local medical
 372 and health care providers, the American Red Cross, and other
 373 interested parties in developing a plan for the staffing and
 374 medical management of pediatric special needs shelters. Plans
 375 must conform to the local comprehensive emergency management

376 plan.

377 (b) County health departments shall, in conjunction with
378 the local emergency management agencies, have the lead
379 responsibility for coordination of the recruitment of health
380 care practitioners, including faculty and students from state
381 university and college health care programs, to staff local
382 special needs shelters. ~~County health departments shall assign~~
383 ~~their employees to work in special needs shelters when those~~
384 ~~employees are needed to protect the health and safety of persons~~
385 ~~with special needs. County governments shall assist the~~
386 ~~department with nonmedical staffing and the operation of special~~
387 ~~needs shelters. The local health department and emergency~~
388 ~~management agency shall coordinate these efforts to ensure~~
389 ~~appropriate staffing in special needs shelters, including a~~
390 ~~staff member who is familiar with the needs of persons with~~
391 ~~Alzheimer's disease.~~

392 (c) State agencies, universities and colleges shall
393 authorize employees that are health care practitioners as
394 defined in s. 456.001(4) to staff local special needs shelters,
395 unless such employees have a designated emergency duty for their
396 agency, university, or college. Each state agency, university,
397 and college shall submit a roster of such employees to the
398 department by January 31 of each year and submit an amended
399 roster, if necessary, by May 31 of each year ~~The appropriate~~
400 ~~county health department, Children's Medical Services office,~~

401 ~~and local emergency management agency shall jointly decide who~~
 402 ~~has responsibility for medical supervision in each special needs~~
 403 ~~shelter.~~

404 (d) County health departments shall assign their
 405 employees, and state employees pursuant to paragraph (c), to
 406 work in special needs shelters when such employees are needed to
 407 protect the health and safety of persons with special needs.
 408 County governments shall assist the department with nonmedical
 409 staffing and the operation of special needs shelters. The local
 410 health department and emergency management agency shall
 411 coordinate these efforts to ensure appropriate staffing in
 412 special needs shelters, including a staff member who is familiar
 413 with the needs of persons with Alzheimer's disease.

414 (e) The appropriate county health department and local
 415 emergency management agency shall jointly decide who has
 416 responsibility for medical supervision in each special needs
 417 shelter.

418 (f) ~~(d)~~ Local emergency management agencies shall be
 419 responsible for the designation and operation of special needs
 420 shelters during times of emergency or disaster and the closure
 421 of the facilities following an emergency or disaster. The local
 422 health department and emergency management agency shall
 423 coordinate these efforts to ensure the appropriate designation
 424 and operation of special needs shelters. County health
 425 departments shall assist the local emergency management agency

426 with regard to the management of medical services in special
427 needs shelters.

428 (g)~~(e)~~ The Secretary of Elderly Affairs, or his or her
429 designee, shall convene, at any time that he or she deems
430 appropriate and necessary, a multiagency special needs shelter
431 discharge planning team to assist local areas that are severely
432 impacted by a natural or manmade disaster that requires the use
433 of special needs shelters. Multiagency special needs shelter
434 discharge planning teams shall provide assistance to local
435 emergency management agencies with the continued operation or
436 closure of the shelters, as well as with the discharge of
437 special needs clients to alternate facilities if necessary.
438 Local emergency management agencies may request the assistance
439 of a multiagency special needs shelter discharge planning team
440 by alerting statewide emergency management officials of the
441 necessity for additional assistance in their area. The Secretary
442 of Elderly Affairs shall ~~is encouraged to proactively~~ work with
443 other state agencies prior to any natural disasters for which
444 warnings are provided to ensure that multiagency special needs
445 shelter discharge planning teams are ready to assemble and
446 deploy rapidly upon a determination by state emergency
447 management officials that a disaster area requires additional
448 assistance. The Secretary of Elderly Affairs may call upon any
449 state agency or office to provide staff to assist a multiagency
450 special needs shelter discharge planning team. Unless the

451 secretary determines that the nature or circumstances
 452 surrounding the disaster do not warrant participation from a
 453 particular agency's staff, each multiagency special needs
 454 shelter discharge planning team shall include at least one
 455 representative from each of the following state agencies:

- 456 1. Department of Elderly Affairs.
- 457 2. Department of Health.
- 458 3. Department of Children and Families.
- 459 4. Department of Veterans' Affairs.
- 460 5. Division of Emergency Management.
- 461 6. Agency for Health Care Administration.
- 462 7. Agency for Persons with Disabilities.

463 (h) Each local emergency management agency shall collect
 464 intake and discharge information from each person who shelters
 465 in a special needs shelter during an emergency or disaster,
 466 including information regarding whether a person is a patient or
 467 resident of a facility licensed under chapter 393, chapter 400,
 468 or chapter 429. Each local emergency management agency shall use
 469 a form developed by the Department of Health to collect this
 470 information.

471 (3) SPECIAL CARE FOR PERSONS WITH ALZHEIMER'S DISEASE OR
 472 RELATED FORMS OF DEMENTIA.—All special needs shelters must
 473 establish designated shelter areas for persons with Alzheimer's
 474 disease or related forms of dementia to enable those persons to
 475 maintain their normal habits and routines to the greatest extent

476 possible.

477 (4) REIMBURSEMENT TO HEALTH CARE PRACTITIONERS AND
 478 FACILITIES.—

479 (a) The department shall, upon request, reimburse in
 480 accordance with paragraph (1)(d) ~~(b)~~:

481 1. Health care practitioners, as defined in s. 456.001,
 482 provided the practitioner is not providing care to a patient
 483 under an existing contract, and emergency medical technicians
 484 and paramedics licensed under chapter 401 for medical care
 485 provided at the request of the department in special needs
 486 shelters or at other locations during times of emergency or a
 487 declared disaster. Reimbursement for health care practitioners,
 488 except for physicians licensed under chapter 458 or chapter 459,
 489 shall be based on the average hourly rate that such
 490 practitioners were paid according to the most recent survey of
 491 Florida hospitals conducted by the Florida Hospital Association
 492 or other nationally recognized or state-recognized data source.

493 2. Health care facilities, such as hospitals, nursing
 494 homes, assisted living facilities, and community residential
 495 homes, if, upon closure of a special needs shelter, a
 496 multiagency special needs shelter discharge planning team
 497 determines that it is necessary to discharge persons with
 498 special needs to other health care facilities. The receiving
 499 facilities are eligible for reimbursement for services provided
 500 to the individuals for up to 90 days. A facility must show proof

501 of a written request from a representative of an agency serving
502 on the multiagency special needs shelter discharge planning team
503 that the individual for whom the facility is seeking
504 reimbursement for services rendered was referred to that
505 facility from a special needs shelter. The department shall
506 specify by rule which expenses are reimbursable and the rate of
507 reimbursement for each service.

508 (b) Reimbursement is subject to the availability of
509 federal funds and shall be requested on forms prepared by the
510 department. If a Presidential Disaster Declaration has been
511 issued, the department shall request federal reimbursement of
512 eligible expenditures. The department may not provide
513 reimbursement to facilities under this subsection for services
514 provided to a person with special needs if, during the period of
515 time in which the services were provided, the individual was
516 enrolled in another state-funded program, such as Medicaid or
517 another similar program, was covered under a policy of health
518 insurance as defined in s. 624.603, or was a member of a health
519 maintenance organization or prepaid health clinic as defined in
520 chapter 641, which would otherwise pay for the same services.
521 Travel expense and per diem costs shall be reimbursed pursuant
522 to s. 112.061.

523 (5) HEALTH CARE PRACTITIONER REGISTRY.—The department may
524 use the registries established in ss. 401.273 and 456.38 when
525 health care practitioners are needed to staff special needs

526 shelters or to assist with other disaster-related activities.

527 (6) SPECIAL NEEDS SHELTER INTERAGENCY COMMITTEE.—The State
 528 Surgeon General may establish a special needs shelter
 529 interagency committee and serve as, or appoint a designee to
 530 serve as, the committee's chair. The department shall provide
 531 any necessary staff and resources to support the committee in
 532 the performance of its duties. The committee shall address and
 533 resolve problems related to special needs shelters not addressed
 534 in the state comprehensive emergency medical plan and shall
 535 consult on the planning and operation of special needs shelters.

536 (a) The committee shall develop, negotiate, and regularly
 537 review any necessary interagency agreements, and undertake other
 538 such activities as the department deems necessary to facilitate
 539 the implementation of this section.

540 (b) The special needs shelter interagency committee shall
 541 be composed of representatives of emergency management, health,
 542 medical, and social services organizations. Membership shall
 543 include, but shall not be limited to, representatives of the
 544 Departments of Health, Children and Families, Elderly Affairs,
 545 and Education; the Agency for Health Care Administration; the
 546 Division of Emergency Management; the Florida Medical
 547 Association; the Florida Osteopathic Medical Association;
 548 Associated Home Health Industries of Florida, Inc.; the Florida
 549 Nurses Association; the Florida Health Care Association; the
 550 Florida Assisted Living Affiliation; the Florida Hospital

551 Association; the Florida Statutory Teaching Hospital Council;
 552 the Florida Association of Homes for the Aging; the Florida
 553 Emergency Preparedness Association; the American Red Cross;
 554 Florida Hospices and Palliative Care, Inc.; the Association of
 555 Community Hospitals and Health Systems; the Florida Association
 556 of Health Maintenance Organizations; the Florida League of
 557 Health Systems; the Private Care Association; the Salvation
 558 Army; the Florida Association of Aging Services Providers; the
 559 AARP; and the Florida Renal Coalition.

560 (c) Meetings of the committee shall be held in
 561 Tallahassee, and members of the committee shall serve at the
 562 expense of the agencies or organizations they represent. The
 563 committee shall make every effort to use teleconference or
 564 videoconference capabilities in order to ensure statewide input
 565 and participation.

566 (7) RULES.—The department, in coordination with the
 567 Division of Emergency Management, has the authority to adopt
 568 rules necessary to implement this section. Rules shall include:

569 (a) The definition of a "person with special needs,"
 570 including eligibility criteria for individuals with physical,
 571 mental, cognitive impairment, or sensory disabilities and the
 572 services a person with special needs can expect to receive in a
 573 special needs shelter.

574 (b) The process for special needs shelter health care
 575 practitioners and facility reimbursement for services provided

576 in a disaster.

577 (c) Guidelines for special needs shelter staffing levels
578 to provide services.

579 (d) The definition of and standards for special needs
580 shelter supplies and equipment, including durable medical
581 equipment.

582 (e) Standards for the special needs shelter registration
583 program, including all necessary forms and guidelines for
584 addressing the needs of unregistered persons in need of a
585 special needs shelter.

586 (f) Standards for addressing the needs of families where
587 only one dependent is eligible for admission to a special needs
588 shelter and the needs of adults with special needs who are
589 caregivers for individuals without special needs.

590 (g) The requirement of the county health departments to
591 seek the participation of hospitals, nursing homes, assisted
592 living facilities, home health agencies, hospice providers,
593 nurse registries, home medical equipment providers, dialysis
594 centers, and other health and medical emergency preparedness
595 stakeholders in pre-event planning activities.

596 ~~(8) EMERGENCY MANAGEMENT PLANS. The submission of~~
597 ~~emergency management plans to county health departments by home~~
598 ~~health agencies, nurse registries, hospice programs, and home~~
599 ~~medical equipment providers is conditional upon receipt of an~~
600 ~~appropriation by the department to establish disaster~~

601 ~~coordinator positions in county health departments unless the~~
 602 ~~State Surgeon General and a local county commission jointly~~
 603 ~~determine to require that such plans be submitted based on a~~
 604 ~~determination that there is a special need to protect public~~
 605 ~~health in the local area during an emergency.~~

606 Section 4. Subsection (9) is added to section 393.0651,
 607 Florida Statutes, to read:

608 393.0651 Family or individual support plan.—The agency
 609 shall provide directly or contract for the development of a
 610 family support plan for children ages 3 to 18 years of age and
 611 an individual support plan for each client. The client, if
 612 competent, the client's parent or guardian, or, when
 613 appropriate, the client advocate, shall be consulted in the
 614 development of the plan and shall receive a copy of the plan.
 615 Each plan must include the most appropriate, least restrictive,
 616 and most cost-beneficial environment for accomplishment of the
 617 objectives for client progress and a specification of all
 618 services authorized. The plan must include provisions for the
 619 most appropriate level of care for the client. Within the
 620 specification of needs and services for each client, when
 621 residential care is necessary, the agency shall move toward
 622 placement of clients in residential facilities based within the
 623 client's community. The ultimate goal of each plan, whenever
 624 possible, shall be to enable the client to live a dignified life
 625 in the least restrictive setting, be that in the home or in the

626 community. For children under 6 years of age, the family support
 627 plan shall be developed within the 45-day application period as
 628 specified in s. 393.065(1); for all applicants 6 years of age or
 629 older, the family or individual support plan shall be developed
 630 within the 60-day period as specified in that subsection.

631 (9) A personal disaster plan should be completed for each
 632 client enrolled in any home and community-based services
 633 Medicaid waiver program administered by the agency and updated
 634 annually, to include, at a minimum:

635 (a) Evacuation shelter selection as appropriate.

636 (b) Documented special needs shelter registration as
 637 appropriate.

638 (c) A staffing plan for the client in the shelter, if
 639 necessary.

640 Section 5. Subsections (2), (8) and (9) of section 393.067,
 641 Florida Statutes, are amended to read:

642 393.067 Facility licensure.—

643 (2) The agency shall conduct annual inspections and
 644 reviews of facilities and programs licensed under this section.
 645 The agency shall determine compliance by foster care facilities,
 646 group home facilities, residential habilitation centers, and
 647 comprehensive transitional education programs with the
 648 applicable provisions of this chapter and rules adopted pursuant
 649 hereto, including the requirements for the comprehensive
 650 emergency management plan.

651 (8) (a) The agency, after consultation with the Division of
 652 Emergency Management, shall adopt rules for foster care
 653 facilities, group home facilities, and residential habilitation
 654 centers which establish minimum standards for the preparation
 655 and annual update of a comprehensive emergency management plan.

656 1. At a minimum, the rules must provide for plan
 657 components that address:

658 a. Emergency evacuation transportation;

659 b. Adequate sheltering arrangements;

660 c. Postdisaster activities, including emergency power,
 661 food, and water;

662 d. Postdisaster transportation;

663 e. Supplies;

664 f. Hardening;

665 g. Staffing, including which staff are responsible for
 666 implementing each element of the plan, how the facility will
 667 maintain staffing during emergencies, and whether and how the
 668 facility will accommodate family members of staff;

669 h. Emergency equipment;

670 i. Individual identification of residents and transfer of
 671 records; and

672 j. Responding to family inquiries.

673 2. Facilities must include information in their plans
 674 about:

675 a. Whether the facility is located in an evacuation zone;

676 b. Whether the facility intends to shelter in place or
 677 relocate to another facility;

678 c. Whether the facility has an emergency power source;

679 d. How the facility will inform residents and the
 680 resident's designated family member, legal representative, or
 681 guardian when the emergency management plan has been activated;
 682 and

683 e. A working phone number for the facility for use by the
 684 resident's designated family member, legal representative, or
 685 guardian to make contact postdisaster.

686 3. A facility must provide to the agency, its residents,
 687 and the resident's designated family member, legal
 688 representative, or guardian the information specified in
 689 subparagraph 2., an overview of the facility's comprehensive
 690 emergency management plan, and a description of the evacuation
 691 plan, if appropriate. Any changes to this information must be
 692 provided to the agency, the facility's residents, and the
 693 resident's designated family member, legal representative, or
 694 guardian within 30 days after the change takes effect.

695 (b) The comprehensive emergency management plan for all
 696 comprehensive transitional education programs and for homes
 697 serving individuals who have complex medical conditions is
 698 subject to review and approval by the local emergency management
 699 agency.

700 1. A facility must submit its plan to the local emergency

701 management agency within 90 days after licensure or change of
 702 ownership and must notify the agency within 30 days after
 703 submission of the plan.

704 2. Such plan must be submitted annually and within 30 days
 705 after any modification to a previously approved plan.

706 3. During its review, the local emergency management
 707 agency shall ensure that the agency and the Division of
 708 Emergency Management, at a minimum, are given the opportunity to
 709 review the plan. Also, appropriate volunteer organizations must
 710 be given the opportunity to review the plan.

711 4. The local emergency management agency shall complete
 712 its review within 60 days and either approve the plan or advise
 713 the facility of necessary revisions. A facility must submit the
 714 requested revisions to the local emergency management agency
 715 within 30 days after receiving written notification from the
 716 local emergency management agency.

717 5. A facility must notify the agency within 30 days after
 718 approval of its plan by the local emergency management agency.

719 (c) A facility must conduct annual staff training on the
 720 policies and procedures for implementing the emergency
 721 operations plan within 2 months before the start of the
 722 hurricane season, including testing of the implementation of the
 723 plan, either in a planned drill or in response to a disaster or
 724 an emergency. New staff must receive such training within 30
 725 days after commencement of employment. Documentation of the

726 training and testing, including evaluation of the outcome of the
 727 training and testing and modifications to the plan to address
 728 deficiencies must be provided to the agency within 30 days after
 729 the training and testing is finished. The evaluation must
 730 include a survey of staff to determine their familiarity with
 731 the plan.

732 (d) In the event of a declared emergency, the agency shall
 733 communicate before the disaster impacts the area which
 734 requirements for providing services to clients in shelters and
 735 other facilities may be waived during the emergency. The agency
 736 may waive additional requirements following the initial impact
 737 of the disaster, if appropriate.

738 (9) The agency may conduct unannounced inspections to
 739 determine compliance by foster care facilities, group home
 740 facilities, residential habilitation centers, and comprehensive
 741 transitional education programs with the applicable provisions
 742 of this chapter and the rules adopted pursuant hereto, including
 743 the requirements for the comprehensive emergency management plan
 744 and the rules adopted for training staff of a facility or a
 745 program to detect, report, and prevent sexual abuse, abuse,
 746 neglect, exploitation, and abandonment, as defined in ss. 39.01
 747 and 415.102, of residents and clients. The agency shall conduct
 748 periodic followup inspections as necessary to monitor facility
 749 compliance with the requirements for the comprehensive emergency
 750 management plan. The facility or program shall make copies of

751 inspection reports available to the public upon request.

752 Section 6. Paragraph (a) of subsection (1) and paragraph
 753 (a) of subsection (2) of section 393.0673, Florida Statutes, are
 754 amended to read:

755 393.0673 Denial, suspension, or revocation of license;
 756 moratorium on admissions; administrative fines; procedures.—

757 (1) The agency may revoke or suspend a license or impose
 758 an administrative fine, not to exceed \$1,000 per violation per
 759 day, if:

760 (a) The licensee has:

761 1. Falsely represented or omitted a material fact in its
 762 license application submitted under s. 393.067;

763 2. Had prior action taken against it under the Medicaid or
 764 Medicare program; ~~or~~

765 3. Failed to comply with the applicable requirements of
 766 this chapter or rules applicable to the licensee; ~~or~~

767 4. Failed to comply with the requirements for the
 768 comprehensive emergency management plan under this part; or

769 5. Failed to follow the policies and procedures in the
 770 comprehensive emergency management plan. However, the agency
 771 shall consider the facility's efforts to follow the plan and
 772 circumstances beyond the facility's control that caused the
 773 failure. In determining the penalty, the agency shall evaluate
 774 the potential or actual harm to the client's health, safety, and
 775 security caused by the failure.

776 (2) The agency may deny an application for licensure
 777 submitted under s. 393.067 if:
 778 (a) The applicant has:
 779 1. Falsely represented or omitted a material fact in its
 780 license application submitted under s. 393.067;
 781 2. Had prior action taken against it under the Medicaid or
 782 Medicare program;
 783 3. Failed to comply with the applicable requirements of
 784 this chapter or rules applicable to the applicant; ~~or~~
 785 4. Failed to comply with the requirements for the
 786 comprehensive emergency management plan under this chapter; or
 787 5. Failed to follow the policies and procedures in the
 788 comprehensive emergency management plan. However, the agency
 789 shall consider the facility's efforts to follow the plan and
 790 circumstances beyond the facility's control that caused the
 791 failure. In determining the penalty, the agency shall evaluate
 792 the potential or actual harm to the client's health, safety, and
 793 security caused by the failure.
 794 ~~6.4.~~ Previously had a license to operate a residential
 795 facility revoked by the agency, the Department of Children and
 796 Families, or the Agency for Health Care Administration; or
 797 Section 7. Subsection (1) of section 393.0675, Florida
 798 Statutes, is amended to read:
 799 393.0675 Injunctive proceedings authorized.—
 800 (1) The agency may institute injunctive proceedings in a

801 court of competent jurisdiction to:

802 (a) Enforce the provisions of this chapter or any minimum
 803 standard, rule, regulation, or order issued or entered pursuant
 804 thereto; or

805 (b) Terminate the operation of facilities licensed
 806 pursuant to this chapter when any of the following conditions
 807 exist:

808 1. Failure by the facility to take preventive or
 809 corrective measures in accordance with any order of the agency.

810 2. Failure by the facility to abide by any final order of
 811 the agency once it has become effective and binding.

812 3. Any violation by the facility constituting an emergency
 813 requiring immediate action as provided in s. 393.0673.

814 4. Failed to comply with the requirements for the
 815 comprehensive emergency management plan under this chapter.

816 5. Failed to follow the policies and procedures in the
 817 comprehensive emergency management plan. However, the agency
 818 shall consider the facility's efforts to follow the plan and
 819 circumstances beyond the facility's control that caused the
 820 failure. In determining the penalty, the agency shall evaluate
 821 the potential or actual harm to the client's health, safety, and
 822 security caused by the failure.

823 Section 8. Section 400.102, Florida Statutes, is amended
 824 to read:

825 400.102 Action by agency against licensee; grounds.—In

826 addition to the grounds listed in part II of chapter 408, any of
 827 the following conditions shall be grounds for action by the
 828 agency against a licensee:

829 (1) An intentional or negligent act materially affecting
 830 the health or safety of residents of the facility;

831 (2) Misappropriation or conversion of the property of a
 832 resident of the facility;

833 (3) Failure to follow the criteria and procedures provided
 834 under part I of chapter 394 relating to the transportation,
 835 voluntary admission, and involuntary examination of a nursing
 836 home resident; ~~or~~

837 (4) Fraudulent altering, defacing, or falsifying any
 838 medical or nursing home records, or causing or procuring any of
 839 these offenses to be committed; or

840 (5) Failure to comply with the requirements for the
 841 comprehensive emergency management plan under this part or s.
 842 408.821.

843 Section 9. Subsection (3) of section 400.19, Florida
 844 Statutes, is amended to read:

845 400.19 Right of entry and inspection.—

846 (3) The agency shall every 15 months conduct at least one
 847 unannounced inspection to determine compliance by the licensee
 848 with statutes, and with rules promulgated under the provisions
 849 of those statutes, governing minimum standards of construction,
 850 requirements for the comprehensive emergency management plan,

851 quality and adequacy of care, and rights of residents. The
852 survey shall be conducted every 6 months for the next 2-year
853 period if the facility has been cited for a class I deficiency,
854 has been cited for two or more class II deficiencies arising
855 from separate surveys or investigations within a 60-day period,
856 or has had three or more substantiated complaints within a 6-
857 month period, each resulting in at least one class I or class II
858 deficiency. In addition to any other fees or fines in this part,
859 the agency shall assess a fine for each facility that is subject
860 to the 6-month survey cycle. The fine for the 2-year period
861 shall be \$6,000, one-half to be paid at the completion of each
862 survey. The agency may adjust this fine by the change in the
863 Consumer Price Index, based on the 12 months immediately
864 preceding the increase, to cover the cost of the additional
865 surveys. The agency shall verify through subsequent inspection
866 that any deficiency identified during inspection is corrected.
867 However, the agency may verify the correction of a class III or
868 class IV deficiency unrelated to resident rights or resident
869 care without reinspecting the facility if adequate written
870 documentation has been received from the facility, which
871 provides assurance that the deficiency has been corrected. The
872 giving or causing to be given of advance notice of such
873 unannounced inspections by an employee of the agency to any
874 unauthorized person shall constitute cause for suspension of not
875 fewer than 5 working days according to the provisions of chapter

876 110.

877 Section 10. Paragraph (g) of subsection (2) of section
878 400.23, Florida Statutes, is amended to read:

879 400.23 Rules; evaluation and deficiencies; licensure
880 status.—

881 (2) Pursuant to the intention of the Legislature, the
882 agency, in consultation with the Department of Health and the
883 Department of Elderly Affairs, shall adopt and enforce rules to
884 implement this part and part II of chapter 408, which shall
885 include reasonable and fair criteria in relation to:

886 (g) The preparation and annual update of a comprehensive
887 emergency management plan. The agency shall adopt rules
888 establishing minimum criteria for the plan after consultation
889 with the Division of Emergency Management.

890 1. At a minimum, the rules must provide for plan
891 components that address:

892 a. Emergency evacuation transportation;

893 b. Adequate sheltering arrangements;

894 c. Postdisaster activities, including emergency power,
895 food, and water;

896 d. Postdisaster transportation;

897 e. Supplies;

898 f. Hardening;

899 g. Staffing, including which staff are responsible for
900 implementing each element of the plan, how the facility will

901 maintain staffing during emergencies, and whether and how the
 902 facility will accommodate family members of staff;
 903 h. Emergency equipment;
 904 i. Individual identification of residents and transfer of
 905 records; and
 906 j. Responding to family inquiries.
 907 2. Facilities must include information in their plans
 908 about:
 909 a. Whether the facility is located in an evacuation zone;
 910 b. Whether the facility intends to shelter in place or
 911 relocate to another facility;
 912 c. Whether the facility has an emergency power source;
 913 d. How the facility will inform residents and the
 914 resident's designated family member, legal representative, or
 915 guardian when the emergency management plan has been activated;
 916 and
 917 e. A working phone number for the facility for use by the
 918 resident's designated family member, legal representative, or
 919 guardian to make contact postdisaster.
 920 3. A facility must provide to the agency, its residents,
 921 and the resident's designated family member, legal
 922 representative, or guardian the information in subparagraph 2.
 923 and an overview of the facility's comprehensive emergency
 924 management plan and, if appropriate, a description of the
 925 evacuation plan. The agency must post this information on its

926 consumer information website. Any changes to this information
 927 must be provided to the agency, the facility's residents, and
 928 the resident's designated family member, legal representative,
 929 or guardian within 30 days after the change takes effect.

930 4. The comprehensive emergency management plan is subject
 931 to review and approval by the local emergency management agency.

932 a. A facility must submit its plan to the local emergency
 933 management agency within 90 days after licensure or change of
 934 ownership and must notify the agency within 30 days after
 935 submission of the plan.

936 b. Such plan must be submitted annually or within 30 days
 937 after any modification to a previously approved plan.

938 c. During its review, the local emergency management
 939 agency shall ensure that the following agencies, at a minimum,
 940 are given the opportunity to review the plan: the Department of
 941 Elderly Affairs, the Department of Health, the Agency for Health
 942 Care Administration, and the Division of Emergency Management.
 943 Also, appropriate volunteer organizations must be given the
 944 opportunity to review the plan.

945 d. The local emergency management agency shall complete
 946 its review within 60 days and either approve the plan or advise
 947 the facility of necessary revisions. A facility must submit the
 948 requested revisions to the local emergency management agency
 949 within 30 days after receiving written notification from the
 950 local emergency management agency.

951 e. A facility must notify the agency within 30 days after
 952 approval of its plan by the local emergency management agency.

953 Section 11. Section 400.492, Florida Statutes, is amended
 954 to read:

955 400.492 Provision of services during an emergency.—Each
 956 home health agency shall prepare and maintain a comprehensive
 957 emergency management plan that is consistent with the standards
 958 adopted by national or state accreditation organizations,
 959 requirements set forth in this section and consistent with the
 960 local special needs plan. The home health agency plan shall ~~be~~
 961 submit the plan to the county health department for review and
 962 approval within 90 days after the home health agency is licensed
 963 or there is a change of ownership. The plan must be submitted
 964 ~~updated~~ annually or within 30 days after modification to a
 965 previously approved plan. The plan and shall document how the
 966 agency will continue to provide ~~for continuing~~ home health
 967 services during an emergency that interrupts patient care or
 968 services in the patient's private residence, assisted living
 969 facility, or adult family care home. The plan shall include
 970 identification of the staff ~~the means by which~~ the home health
 971 agency will ~~continue to provide~~ in the special needs shelter
 972 ~~staff~~ to perform the same type and quantity of services for ~~to~~
 973 their patients who evacuate to special needs shelters as ~~that~~
 974 were being provided to those patients before ~~prior to~~
 975 evacuation. The plan shall describe how the home health agency

976 establishes and maintains an effective response to emergencies
 977 and disasters, including, but not limited to, notifying staff
 978 when emergency response measures are initiated; providing for
 979 communication between staff members, county health departments,
 980 and local emergency management agencies, including a backup
 981 system; identifying resources necessary to continue essential
 982 care or services or referrals to other organizations, subject to
 983 written agreement; and prioritizing and contacting patients who
 984 need continued care or services that are provided by agency
 985 staff or by designated family members or other nonhome health
 986 agency caregivers; and how services will be provided to patients
 987 in the event the home health agency cannot continue to provide
 988 services or ceases operation due to the emergency.

989 (1) The home health agency shall inform each patient and
 990 the patient's legal representative, designated family member, or
 991 guardian, of the special needs registry established pursuant to
 992 s. 252.355 and how to register the patient. The home health
 993 agency shall collect and submit to the local emergency
 994 management office a list of registered patients who will need
 995 continuing care or services during an emergency. Each ~~patient~~
 996 record for a patient who is registered under ~~patients who are~~
 997 ~~listed in the registry established pursuant to s. 252.355~~ shall
 998 include a description of how care or services will be continued
 999 in the event of an emergency or disaster and identify designated
 1000 staff who will provide such services. The home health agency

1001 shall discuss with the patient and the patient's legal
1002 representative, designated family member, guardian, or nonhome
1003 health agency caregiver, and document in his or her record how
1004 the home health agency will continue to provide the same type
1005 and quantity of services, including staffing, to the patient in
1006 his or her private residence, assisted living facility, or adult
1007 family care home, or in the special needs shelter if the patient
1008 evacuates to the special needs shelter, which were being
1009 provided before the emergency or evacuation. The patient's
1010 record shall contain ~~the emergency provisions with the patient~~
1011 ~~and the patient's caregivers, including where and how the~~
1012 ~~patient is to evacuate,~~ procedures for notifying the home health
1013 agency in the event that the patient evacuates to a location
1014 other than the shelter identified in the patient record, and a
1015 list of medications and equipment which must either accompany
1016 the patient or will be needed by the patient in the event of an
1017 evacuation.

1018 (2) If the home health agency's patient is a resident of
1019 an assisted living facility or an adult family care home, the
1020 home health agency must contact the assisted living facility or
1021 adult family care home administrator to determine the plans for
1022 evacuation and document the resident's plans in his or her
1023 record.

1024 (3)-(2) Each home health agency shall create and maintain a
1025 current ~~prioritized~~ list of patients who need continued agency

1026 | services during an emergency. The list shall include patients to
 1027 | be evacuated to a shelter, in private residences, assisted
 1028 | living facilities, and adult family care homes who require
 1029 | continued home health agency services. The list shall indicate
 1030 | how services will ~~shall~~ be continued in the event of an
 1031 | emergency or disaster for each patient, ~~and~~ if the patient is
 1032 | remaining in the home or is to be transported to a special needs
 1033 | shelter, if the patient is listed in the registry established
 1034 | pursuant to s. 252.355, and shall indicate if the patient is
 1035 | receiving skilled nursing services, and the patient's medication
 1036 | and equipment needs. The list shall be furnished to county
 1037 | health departments and to local emergency management agencies as
 1038 | part of the home health agency's comprehensive emergency
 1039 | management plan, upon request. The list shall be updated
 1040 | annually or each time a patient is identified as needing
 1041 | services.

1042 | (4)(3) A home health agency is agencies shall not be
 1043 | required to continue to provide care to patients in emergency
 1044 | situations that are beyond its their control and that make it
 1045 | impossible to provide services, such as when roads are
 1046 | impassable or when the patient does patients do not go to the
 1047 | location specified in the patient's record their patient
 1048 | records. If a home health agency is unable to continue to
 1049 | provide services or ceases operation due to situations beyond
 1050 | its control, the home health agency must notify the patient

1051 whose services will be discontinued during the emergency and the
 1052 local emergency operation center as soon as possible. If the
 1053 home health agency is providing services to residents of
 1054 assisted living facilities and adult family care homes, the home
 1055 health agency must make arrangements for continuation of
 1056 services and notify the local emergency operation center of such
 1057 arrangements. Home health agencies shall ~~may~~ establish links to
 1058 local emergency operations centers to determine a mechanism by
 1059 which to approach specific areas within a disaster area in order
 1060 for the agency to reach its clients. When a home health agency
 1061 is unable to continue providing services during an emergency,
 1062 the home health agency ~~agencies~~ shall document its efforts
 1063 ~~demonstrate a good faith effort~~ to comply with the requirements
 1064 of its comprehensive emergency management plan and this
 1065 subsection, including ~~by documenting~~ attempts by ~~of~~ staff to
 1066 contact the patient and the patient's designated family member,
 1067 legal representative, guardian, or nonhome health agency
 1068 caregiver, if applicable; contact the resident's assisted living
 1069 facility or adult family care home, if applicable; contact the
 1070 local emergency operation centers to obtain assistance in
 1071 contacting patients; and contact other agencies that may be able
 1072 to provide temporary services. The home health agency must also
 1073 document attempts by staff to follow procedures outlined in the
 1074 home health agency's comprehensive emergency management plan,
 1075 and in ~~by~~ the patient's record~~,~~ which support a finding that the

1076 provision of continuing care has been attempted for those
 1077 patients who have been identified as needing care by the home
 1078 health agency in his or her private residence, assisted living
 1079 facility, or adult family care home and the patients who are
 1080 registered under s. 252.355, in the event of an emergency or
 1081 disaster under subsection (1). The agency shall review the
 1082 documentation required by this section during any inspection
 1083 conducted under part II of this chapter to determine the home
 1084 health agency's compliance with its emergency plan.

1085 (4) Notwithstanding the provisions of s. 400.464(2) or any
 1086 other provision of law to the contrary, a home health agency may
 1087 provide services in a special needs shelter located in any
 1088 county.

1089 Section 12. Subsection (10) of section 400.497, Florida
 1090 Statutes, is amended to read:

1091 400.497 Rules establishing minimum standards.—The agency
 1092 shall adopt, publish, and enforce rules to implement part II of
 1093 chapter 408 and this part, including, as applicable, ss. 400.506
 1094 and 400.509, which must provide reasonable and fair minimum
 1095 standards relating to:

1096 (10) Preparation of and compliance with a comprehensive
 1097 emergency management plan pursuant to s. 400.492.

1098 (a) The Agency for Health Care Administration shall adopt
 1099 rules establishing minimum criteria for the plan and plan
 1100 updates, with the concurrence of the Department of Health and in

1101 consultation with the Division of Emergency Management.

1102 (b) The rules must address the requirements in s. 400.492.

1103 In addition, the rules shall provide for the maintenance of

1104 patient-specific medication lists that can accompany patients

1105 who are transported from their private residence, assisted

1106 living facility, or adult family care home ~~homes~~.

1107 (c) The plan is subject to review and approval by the

1108 county health department. During its review, the county health

1109 department shall contact state and local health and medical

1110 stakeholders when necessary. The county health department shall

1111 complete its review to ensure that the plan is in accordance

1112 with the criteria in the Agency for Health Care Administration

1113 rules within 90 days after the home health agency is licensed or

1114 within 90 days after receipt of the annual plan and shall

1115 approve the plan or advise the home health agency of necessary

1116 revisions. If the home health agency fails to submit a plan or

1117 fails to submit the requested information or revisions to the

1118 county health department within 30 days after written

1119 notification from the county health department, the county

1120 health department shall, within 10 days after the home health

1121 agency's failure to comply, notify the Agency for Health Care

1122 Administration. The agency shall notify the home health agency

1123 that its failure constitutes a deficiency, subject to a fine of

1124 \$5,000 per occurrence. If either the initial or annual ~~the~~ plan

1125 is not submitted, information is not provided, or revisions are

1126 | not made as requested, the agency may impose the fine. If the
1127 | fine is not imposed against the home health agency, the agency
1128 | must document in the home health agency's file the reason the
1129 | fine was not imposed.

1130 | (d) For any home health agency that operates in more than
1131 | one county, the home health agency must submit its plan to the
1132 | Department of Health. The department shall review the plan,
1133 | after consulting with state and local health and medical
1134 | stakeholders when necessary. The department shall complete its
1135 | review within 90 days after the home health agency is licensed
1136 | in the county or within 90 days after receipt of the annual plan
1137 | and shall approve the plan or advise the home health agency of
1138 | necessary revisions. The department shall make every effort to
1139 | avoid imposing differing requirements on a home health agency
1140 | that operates in more than one county as a result of differing
1141 | or conflicting comprehensive plan requirements of the counties
1142 | in which the home health agency operates. If the home health
1143 | agency fails to submit a plan or fails to submit requested
1144 | information or revisions to the Department of Health within 30
1145 | days after written notification from the department, the
1146 | department must notify the Agency for Health Care Administration
1147 | within 10 days after the home health agency's failure to comply.
1148 | The agency shall notify the home health agency that its failure
1149 | constitutes a deficiency, subject to a fine of \$5,000 per
1150 | occurrence. If the plan is not submitted, information is not

1151 provided, or revisions are not made as requested, the agency may
 1152 impose the fine. If the fine is not imposed against the home
 1153 health agency, the agency must document in the home health
 1154 agency's file the reason the fine was not imposed.

1155 (e) The requirements in this subsection do not apply to:

1156 1. A facility that is certified under chapter 651 and has
 1157 a licensed home health agency used exclusively by residents of
 1158 the facility; or

1159 2. A retirement community that consists of residential
 1160 units for independent living and either a licensed nursing home
 1161 or an assisted living facility, and has a licensed home health
 1162 agency used exclusively by the residents of the retirement
 1163 community, provided the comprehensive emergency management plan
 1164 for the facility or retirement community provides for continuous
 1165 care of all residents with special needs during an emergency.

1166 Section 13. Subsection (12) of section 400.506, Florida
 1167 Statutes, is amended to read:

1168 400.506 Licensure of nurse registries; requirements;
 1169 penalties.—

1170 (12) Each nurse registry shall prepare and maintain a
 1171 comprehensive emergency management plan that is consistent with
 1172 the criteria in this subsection and with the local special needs
 1173 plan. The plan shall be updated annually or within 30 days after
 1174 modification to a previously approved plan. The plan shall
 1175 document how ~~include the means by which~~ the nurse registry will

1176 | continue to provide the same type and quantity of services to
 1177 | each patient who remains in his or her private residence,
 1178 | assisted living facility, or adult family care home or who
 1179 | evacuates its patients who evacuate to special needs shelters
 1180 | which were being provided to ~~those patients~~ before the emergency
 1181 | ~~prior to evacuation~~. The plan shall specify how the nurse
 1182 | registry shall provide staff and continuous services to each
 1183 | such patient facilitate the provision of continuous care by
 1184 | ~~persons referred for contract to persons who are registered~~
 1185 | ~~pursuant to s. 252.355 during an emergency that interrupts the~~
 1186 | ~~provision of care or services in private residences.~~ Nurse
 1187 | registries shall ~~may~~ establish links to local emergency
 1188 | operations centers to determine a mechanism by which to approach
 1189 | specific areas within a disaster area in order for a provider to
 1190 | reach its clients. A nurse registry shall document its efforts
 1191 | ~~registries shall demonstrate a good faith effort~~ to comply with
 1192 | the requirements of its comprehensive emergency management plan
 1193 | and this subsection in the patient's records, including by
 1194 | ~~documenting~~ attempts by ~~of~~ staff to contact the patient and the
 1195 | patient's a designated family member, legal representative,
 1196 | guardian, or other person who provides care; contact the
 1197 | resident's assisted living facility or adult family care home,
 1198 | if applicable; contact the local emergency operations centers to
 1199 | obtain assistance in contacting patients; and contact other
 1200 | agencies that may be able to provide temporary services. The

1201 nurse registry must also document attempts by staff to follow
1202 procedures outlined in the nurse registry's comprehensive
1203 emergency management plan which support a finding that the
1204 provision of continuing care has been attempted for patients
1205 identified as needing care by the nurse registry either in home
1206 or in a special needs shelter and ~~registered under s. 252.355~~ in
1207 the event of an emergency under this subsection.

1208 (a) All persons referred for contract who care for
1209 patients ~~persons~~ registered pursuant to s. 252.355 must include
1210 in the patient record a description of how the nurse registry
1211 will continue to provide the same type and quantity of services
1212 to the patient, including identification of staff to provide
1213 such services, ~~care will be continued~~ during a disaster or
1214 emergency that interrupts the provision of care ~~in the patient's~~
1215 home. It shall be the responsibility of the person referred for
1216 contract to ensure that continuous care is provided.

1217 (b) A ~~Each~~ nurse registry shall create and maintain a
1218 current ~~prioritized~~ list of patients in private residences,
1219 assisted living facilities, or adult family care homes who are
1220 registered pursuant to s. 252.355 and are under the care of
1221 persons referred for contract and who need continued services
1222 during an emergency. This list shall indicate, for each patient,
1223 if the client is to be transported to a special needs shelter
1224 and if the patient is receiving skilled nursing services. Nurse
1225 registries shall make this list available to county health

1226 departments and to local emergency management agencies as part
 1227 of its comprehensive emergency management plan ~~upon request~~. The
 1228 list shall be updated annually or each time a patient is
 1229 identified as needing services.

1230 (c) A ~~Each~~ person referred for contract who is caring for
 1231 a patient who is registered pursuant to s. 252.355 shall provide
 1232 a list of the patient's medication and equipment needs to the
 1233 nurse registry. Each person referred for contract shall make
 1234 this information available to county health departments and to
 1235 local emergency management agencies ~~upon request~~.

1236 (d) A ~~Each~~ person referred for contract is ~~shall not be~~
 1237 required to continue to provide care to patients in emergency
 1238 situations that are beyond the person's control and that make it
 1239 impossible to provide services, such as when roads are
 1240 impassable or when patients do not go to the location specified
 1241 in their patient records. It is the responsibility of the nurse
 1242 registry to contact another person available for referral to
 1243 provide care for the patient. If the nurse registry is unable to
 1244 continue to provide services or ceases operation due to
 1245 situations beyond its control, the nurse registry must notify
 1246 the patient whose services will be discontinued during the
 1247 emergency and the local emergency management operation center as
 1248 soon as possible. If the nurse registry is providing services to
 1249 residents of assisted living facilities or adult family care
 1250 homes, it must make arrangements for continuation of services

1251 and notify the local emergency operation center of such
 1252 arrangement. When a nurse registry is unable to continue to
 1253 provide services during the emergency, the nurse registry shall
 1254 document its efforts to comply with the requirements of its
 1255 comprehensive emergency management plan and this subsection by
 1256 documenting attempts of the registry or its staff to contact the
 1257 patient and the patient's designated family member, legal
 1258 representative, guardian, or other caregiver, if applicable;
 1259 contact the resident's assisted living facility or adult family
 1260 care home, if applicable; contact the local emergency operation
 1261 centers to obtain assistance in contacting patients and contact
 1262 other agencies that may be able to provide temporary services.
 1263 The agency shall review the documentation required by this
 1264 section during any inspection conducted pursuant to part II of
 1265 this chapter to determine the nurse registry's compliance with
 1266 its emergency plan.

1267 (e) The comprehensive emergency management plan required
 1268 by this subsection is subject to review and approval by the
 1269 county health department. During its review, the county health
 1270 department shall contact state and local health and medical
 1271 stakeholders when necessary. The county health department shall
 1272 complete its review to ensure that the plan complies with the
 1273 criteria in this section and the Agency for Health Care
 1274 Administration rules within 90 days after the nurse registry is
 1275 licensed or within 90 days after receipt of the annual plan and

1276 shall either approve the plan or advise the nurse registry of
 1277 necessary revisions. If a nurse registry fails to submit a plan
 1278 or fails to submit requested information or revisions to the
 1279 county health department within 30 days after written
 1280 notification from the county health department, the county
 1281 health department shall, within 10 days after the nurse
 1282 registry's failure to comply, notify the Agency for Health Care
 1283 Administration. The agency shall notify the nurse registry that
 1284 its failure constitutes a deficiency, subject to a fine of
 1285 \$5,000 per occurrence. If either the initial or annual plan is
 1286 not submitted, information is not provided, or revisions are not
 1287 made as requested, the agency may impose the fine. If the fine
 1288 is not imposed against the nurse registry, the agency must
 1289 document the nurse registry's file the reason the fine was not
 1290 imposed.

1291 (f) The Agency for Health Care Administration shall adopt
 1292 rules establishing minimum criteria for the comprehensive
 1293 emergency management plan and plan updates required by this
 1294 subsection, with the concurrence of the Department of Health and
 1295 in consultation with the Division of Emergency Management.
 1296 Section 14. Subsection (3) of section 408.813, Florida Statutes,
 1297 is amended to read:

1298 408.813 Administrative fines; violations.—As a penalty for
 1299 any violation of this part, authorizing statutes, or applicable
 1300 rules, the agency may impose an administrative fine.

1301 (3) The agency may impose an administrative fine for a
 1302 violation that is not designated as a class I, class II, class
 1303 III, or class IV violation. Unless otherwise specified by law,
 1304 the amount of the fine may not exceed \$500 for each violation.

1305 Unclassified violations include:

- 1306 (a) Violating any term or condition of a license.
- 1307 (b) Violating any provision of this part, authorizing
- 1308 statutes, or applicable rules.
- 1309 (c) Exceeding licensed capacity.
- 1310 (d) Providing services beyond the scope of the license.
- 1311 (e) Violating a moratorium imposed pursuant to s. 408.814.
- 1312 (f) Failure to have an approved comprehensive emergency
- 1313 management plan as required by authorizing statutes.
- 1314 (g) Failure to enter into and maintain agreements required
- 1315 by s. 252.355(4) (b) by July 1, 2019.

1316 Section 15. Section 408.821, Florida Statutes, is amended
 1317 to read:

1318 408.821 Emergency management planning; emergency
 1319 operations; inactive license.—

1320 (1) A licensee required by authorizing statutes to have an
 1321 emergency operations plan must designate a safety liaison to
 1322 serve as the primary contact for emergency operations.

1323 (2) A licensee required by authorizing statutes to have an
 1324 emergency operations plan must conduct annual staff training on
 1325 the policies and procedures for implementing the emergency

1326 operations plan within 2 months before the start of hurricane
 1327 season, including testing of the implementation of the plan,
 1328 either in a planned drill or in response to a disaster or an
 1329 emergency. New staff must receive such training within 30 days
 1330 after commencement of employment. Documentation of the training
 1331 and testing, including evaluation of the outcome of the training
 1332 and testing and modifications to the plan to address
 1333 deficiencies must be provided to the agency and the local
 1334 emergency management agency within 30 days after the training
 1335 and testing is finished. The evaluation must include a survey of
 1336 staff to determine their familiarity with the plan.

1337 (3) Failure to follow the policies and procedures in the
 1338 licensee's emergency operations plan is grounds for action by
 1339 the agency against a licensee. The agency shall consider the
 1340 licensee's efforts to follow the plan and circumstances beyond
 1341 the licensee's control that caused the failure. In determining
 1342 the penalty, the agency shall evaluate the potential or actual
 1343 harm to the client's health, safety, and security caused by the
 1344 failure.

1345 (4)~~(2)~~ An entity subject to this part may temporarily
 1346 exceed its licensed capacity to act as a receiving provider in
 1347 accordance with an approved emergency operations plan for up to
 1348 15 days. While in an overcapacity status, each provider must
 1349 furnish or arrange for appropriate care and services to all
 1350 clients. In addition, the agency may approve requests for

1351 overcapacity in excess of 15 days, which approvals may be based
 1352 upon satisfactory justification and need as provided by the
 1353 receiving and sending providers.

1354 (5)~~(3)~~(a) An inactive license may be issued to a licensee
 1355 subject to this section when the provider is located in a
 1356 geographic area in which a state of emergency was declared by
 1357 the Governor if the provider:

1358 1. Suffered damage to its operation during the state of
 1359 emergency.

1360 2. Is currently licensed.

1361 3. Does not have a provisional license.

1362 4. Will be temporarily unable to provide services but is
 1363 reasonably expected to resume services within 12 months.

1364 (b) An inactive license may be issued for a period not to
 1365 exceed 12 months but may be renewed by the agency for up to 12
 1366 additional months upon demonstration to the agency of progress
 1367 toward reopening. A request by a licensee for an inactive
 1368 license or to extend the previously approved inactive period
 1369 must be submitted in writing to the agency, accompanied by
 1370 written justification for the inactive license, which states the
 1371 beginning and ending dates of inactivity and includes a plan for
 1372 the transfer of any clients to other providers and appropriate
 1373 licensure fees. Upon agency approval, the licensee shall notify
 1374 clients of any necessary discharge or transfer as required by
 1375 authorizing statutes or applicable rules. The beginning of the

1376 inactive licensure period shall be the date the provider ceases
 1377 operations. The end of the inactive period shall become the
 1378 license expiration date, and all licensure fees must be current,
 1379 must be paid in full, and may be prorated. Reactivation of an
 1380 inactive license requires the prior approval by the agency of a
 1381 renewal application, including payment of licensure fees and
 1382 agency inspections indicating compliance with all requirements
 1383 of this part and applicable rules and statutes.

1384 (6)~~(4)~~ The agency may adopt rules relating to emergency
 1385 management planning, communications, and operations. Licensees
 1386 providing residential or inpatient services must utilize an
 1387 online database established and maintained ~~approved~~ by the
 1388 agency to report information to the agency regarding the
 1389 provider's emergency status, planning, or operations. The agency
 1390 may adopt rules requiring other providers to use the online
 1391 database for reporting the provider's emergency status,
 1392 planning, or operations.

1393 Section 16. Paragraph (1) is added to subsection (1) of
 1394 section 429.14, Florida Statutes, to read:

1395 429.14 Administrative penalties.—

1396 (1) In addition to the requirements of part II of chapter
 1397 408, the agency may deny, revoke, and suspend any license issued
 1398 under this part and impose an administrative fine in the manner
 1399 provided in chapter 120 against a licensee for a violation of
 1400 any provision of this part, part II of chapter 408, or

1401 applicable rules, or for any of the following actions by a
 1402 licensee, any person subject to level 2 background screening
 1403 under s. 408.809, or any facility staff:

1404 (1) Failure to comply with the requirements for the
 1405 comprehensive emergency management plan under this part or s.
 1406 408.821.

1407 Section 17. Subsection (3) of section 429.28, Florida
 1408 Statutes, is amended to read:

1409 429.28 Resident bill of rights.—

1410 (3)(a) The agency shall conduct a survey to determine
 1411 general compliance with facility standards, requirements for the
 1412 comprehensive emergency management plan, and ~~compliance with~~
 1413 residents' rights as a prerequisite to initial licensure or
 1414 licensure renewal. The agency shall adopt rules for uniform
 1415 standards and criteria that will be used to determine compliance
 1416 with facility standards, requirements for the comprehensive
 1417 emergency management plan, and ~~compliance with~~ residents'
 1418 rights.

1419 (b) In order to determine whether the facility is
 1420 adequately protecting residents' rights, the biennial survey
 1421 shall include private informal conversations with a sample of
 1422 residents and consultation with the ombudsman council in the
 1423 district in which the facility is located to discuss residents'
 1424 experiences within the facility.

1425 (c) During any calendar year in which no survey is

1426 conducted, the agency shall conduct at least one monitoring
 1427 visit of each facility cited in the previous year for a class I
 1428 or class II violation, or more than three uncorrected class III
 1429 violations.

1430 (d) The agency may conduct periodic followup inspections
 1431 as necessary to monitor the compliance of facilities with a
 1432 history of any class I, class II, or class III violations that
 1433 threaten the health, safety, or security of residents.

1434 (e) The agency may conduct complaint investigations as
 1435 warranted to investigate any allegations of noncompliance with
 1436 requirements required under this part or rules adopted under
 1437 this part.

1438 (f) The agency shall conduct periodic followup inspections
 1439 as necessary to monitor the compliance of facilities with a
 1440 history of any violations related to the requirements for the
 1441 comprehensive emergency management plan.

1442 Section 18. Section 429.41, Florida Statutes, is amended to
 1443 read:

1444 429.41 Rules establishing standards.—

1445 (1) It is the intent of the Legislature that rules
 1446 published and enforced pursuant to this section shall include
 1447 criteria by which a reasonable and consistent quality of
 1448 resident care and quality of life may be ensured and the results
 1449 of such resident care may be demonstrated. Such rules shall also
 1450 ensure a safe and sanitary environment that is residential and

1451 noninstitutional in design or nature. It is further intended
 1452 that reasonable efforts be made to accommodate the needs and
 1453 preferences of residents to enhance the quality of life in a
 1454 facility. Uniform firesafety standards for assisted living
 1455 facilities shall be established by the State Fire Marshal
 1456 pursuant to s. 633.206. The agency, in consultation with the
 1457 department, may adopt rules to administer the requirements of
 1458 part II of chapter 408. In order to provide safe and sanitary
 1459 facilities and the highest quality of resident care
 1460 accommodating the needs and preferences of residents, the
 1461 department, in consultation with the agency, the Department of
 1462 Children and Families, and the Department of Health, shall adopt
 1463 rules, policies, and procedures to administer this part, which
 1464 must include reasonable and fair minimum standards in relation
 1465 to:

1466 (b) The preparation and annual update of a comprehensive
 1467 emergency management plan. Such standards must be included in
 1468 the rules adopted by the department after consultation with the
 1469 Division of Emergency Management.

1470 1. At a minimum, the rules must provide for plan
 1471 components that address:

1472 a. Emergency evacuation transportation;

1473 b. Adequate sheltering arrangements;

1474 c. Postdisaster activities, including provision of
 1475 emergency power, food, and water;

- 1476 d. Postdisaster transportation;
- 1477 e. Supplies;
- 1478 f. Hardening;
- 1479 g. Staffing, including which staff are responsible for
- 1480 implementing each element of the plan, how the facility will
- 1481 maintain staffing during emergencies, whether and how the
- 1482 facility will accommodate family members of staff;
- 1483 h. Emergency equipment;
- 1484 i. Individual identification of residents and transfer of
- 1485 records;
- 1486 j. Communication with families; and
- 1487 k. Responses to family inquiries.
- 1488 2. Facilities must include information in their plans
- 1489 about:
- 1490 a. Whether the facility is located in an evacuation zone;
- 1491 b. Whether the facility intends to shelter in place or
- 1492 relocate to another facility;
- 1493 c. Whether the facility has an emergency power source;
- 1494 d. How the facility will inform residents and the
- 1495 resident's designated family member, legal representative, or
- 1496 guardian when the emergency management plan has been activated;
- 1497 and
- 1498 e. A working phone number for the facility for use by the
- 1499 resident's designated family member, legal representative, or
- 1500 guardian to make contact postdisaster.

1501 3. A facility must provide to the agency, its residents,
 1502 and the resident's designated family member, legal
 1503 representative, or guardian the information in subparagraph 2.
 1504 and an overview of the facility's comprehensive emergency
 1505 management plan and, if appropriate, a description of the
 1506 evacuation plan. The agency must post this information on its
 1507 consumer information website. Any changes to this information
 1508 must be provided to the agency, the facility's residents, and
 1509 the resident's designated family member, legal representative,
 1510 or guardian within 30 days after the change takes effect.

1511 4. The comprehensive emergency management plan is subject
 1512 to review and approval by the local emergency management agency.

1513 a. A facility must submit its plan to the local emergency
 1514 management agency within 90 days after licensure and change of
 1515 ownership and must notify the department within 30 days after
 1516 submission of the plan.

1517 b. Such plan must be submitted annually or within 30 days
 1518 after any modification to a previously approved plan.

1519 c. During its review, the local emergency management
 1520 agency shall ensure that the following agencies, at a minimum,
 1521 are given the opportunity to review the plan: the Department of
 1522 Elderly Affairs, the Department of Health, the Agency for Health
 1523 Care Administration, and the Division of Emergency Management.
 1524 Also, appropriate volunteer organizations must be given the
 1525 opportunity to review the plan.

1526 d. The local emergency management agency shall complete
1527 its review within 60 days and either approve the plan or advise
1528 the facility of necessary revisions. A facility must submit the
1529 requested revisions to the local emergency management agency
1530 within 30 days after receiving written notification from the
1531 local emergency management agency.

1532 e. A facility must notify the department within 30 days
1533 after approval of its plan by the local emergency management
1534 agency.

1535 Section 19. This act shall take effect July 1, 2018.