

Key Changes to Chapter 65G-2, F.A.C.

*General changes: Violations are identified as Class I, II, or III throughout the chapter

65G-2.001 Definitions

Review definitions #5 and #7 to ensure understanding of Change of Ownership conditions and who is considered the Controlling Entity. Also #26 describes who is considered to be a sexually aggressive resident.

65G-2.002 License Application and Renewal Procedures

****Not promulgated effective 7/1/14 – this section will be promulgated in near future****

65G-2.003 Length of Licenses

Classification of licenses as standard, standard with waiver, conditional or temporary licenses eliminated. Licenses are issued for 1 year, 1 month, or 3 months and conditions for each time frame are explained.

65G-2.0032 Agency Monitoring and Oversight

Each licensed facility shall be monitored at least monthly (can be more often), unless vacant (can do quarterly) or temporarily suspended due to disaster/emergency.

65G-2.004 License Violations

(1) Notice of Non Compliance (NNC) is intended to address Class II or III violations, not Class I violations.

(2) Corrective action plans for all NNC's are required within 15 days upon receipt of the NNC, and the required elements are described. APD can reject corrective action plans that fail to address all required elements and violations. If rejected, APD will give licensee written notification of the reason for rejection and allow 10 days to submit an amended corrective action plan.

65G-2.0041 License Violations Disciplinary Actions

(1) & (2) Describes the considerations and factors that will be considered in determining whether to pursue disciplinary action, and what factors will be considered when determining sanctions for violations.

(3) & (4) Describes classes of violations, sanctions, repeat/uncorrected violations, and additional considerations.

65G-2.006 Licensed Capacity

Discusses the criteria for determining capacity, also APD will reassess maximum capacity annually at licensing. Request by licensee to change capacity (increase or decrease) requires 30 day written notification. Increases require new fire inspection, survey of facility, and issuance of an amended license. Change to type of residents served also requires 30 day written notification, possible survey, and amended license issued.

65G-2.007 General Facility Standards

These standards apply to all facility types – foster homes, group homes, residential habilitation centers, and Comprehensive Transitional Education Programs

(2)(g) Describes requirements for exterior door locks if a delayed egress system is utilized.

(3)(d) Cannot charge fee for cable/internet services provided in common areas.

(5)(b) Initial licenses granted after this revision can have maximum of 2 residents per bedroom (prior rule was 4 residents). **Existing licensed facilities are not required to change as long as they remain continuously licensed.**

(6)(a) Change in bathroom requirements – initial licenses now require one toilet/sink/shower or tub for every 3 residents. (The prior rule requirement was one toilet/sink for 6 residents, 1 shower/tub for 8.) **Existing licensed facilities are not required to change as long as they remain continuously licensed.**

(8) Indoor temperature range of 68-80 degrees specified. Situations described in section (d) are not violations but may require provider to implement their emergency management plan until resolved.

(10)(e) Clearly identifies who is responsible for cost of repairs/replacement from client damage.

(11)(g) Five days of drinking water supplies present in the facility at all times. Previous rule addressed fresh food and staple food supplies required but did not specify amount of water required.

(12)(a) Water temperature at the outlet cannot exceed 120 degrees.

(12)(b) & (c) Firearms, ammunition, weapons are never allowed UNLESS the facility is the primary residence of the licensee. Specific storage requirements are described if it is the primary residence of licensee.

(12)(e) Fencing for hazardous areas must be at least 4 feet high.

(13) Details supervision requirements around bodies of water/water hazards. Gives some requirements for pool/spa safety measures. **Refer to F.S. Chapter 515 for additional residential swimming pool safety requirements.*

(14) Describes smoking rules in licensed facilities.

(16) New requirement for carbon monoxide detector. No specifics on how many, what type, just need to have at least one. Inexpensive (can be under \$20) and available at Lowe's, Home Depot, etc.

(17) School enrollment requirements in residential facilities.

- (18) New reporting requirement of foreclosures (once known) and evictions for providers.
- (19) Licensee may not charge family, guardians or guardian advocates of residents for any optional in-service trainings they choose to offer.
- (20) Willful or intentional misstatements are prohibited and the classes of violations for these are described.

65G-2.008 Staffing Requirements

(1)(b) At least 1 staff person must be present when clients are in facility unless granted prior approval by APD. This is discussed in more detail in 2.009(6)(b).

(1)(c) Direct care staff must not be under influence of drugs/alcohol to extent that their normal faculties are impaired.

(1)(e) & (f) High school education required for new staff after rule revision. 8th grade still allowed for existing employees. One year related work experience required for new staff after rule revision, appropriate life experience still allowed for existing employees. Brings education and work history requirements in line with handbook.

(3) New driving record requirement – any staff who transport residents cannot have DUI violations, license suspensions, or revocations within last 3 years.

(4) New requirement for annual check for sex offenders/predators within 1 mile radius of facility.
<http://offender.fdle.state.fl.us/offender/searchNeighborhood.do?actionPerformed=neighborhoodSearchMain>

(5) New restrictions on ability to perform work and the required supervision, if someone working in the facility has been identified as an alleged perpetrator in an active DCF investigation AND the investigator states there is a reasonable suspicion that abuse, neglect, or exploitation has occurred.

(6)(d) Must have a weekly written schedule for staff coverage at least 1 week in advance and maintain actual work schedules for 6 months.

(7) Training on Core Competency, HIV/AIDS, 1st Aid & CPR required within 90 days of hire. Zero tolerance still required prior to providing service. **Staff have 90 days to obtain CPR training but the facility must ensure that at least one direct care staff with current CPR is on-site when residents are present. New staff without CPR training cannot work solo.**

65G-2.009 Resident Care and Supervision Standards

(1) This section describes the provision of necessary support, supervision, medical care, and medical follow up as needed by each individual.

(3) Written criteria and procedures for admissions and terminations required. Describes process for transfers, placements. New requirement for itemized property inventory list upon placement and

updated within 30 days to reflect new/discarded items. If facility staff are taking clients out of Florida overnight, have to provide prior notification to Agency.

(4) Details accounting procedures for resident funds, APD approved-form and/or required information if you use your own format, receipts required for \$25 and over, reconciliation requirements for client funds and ledger balances.

Client accounting records may be kept on premise or electronically and in a central location. Must have at least the account balance and a supply of funds present in the facility to allow for resident spending needs. **All client financial records shall be made available upon request by APD staff for inspection and monitoring purposes.**

Licensee and their staff may not use client funds for their personal benefit. **Sections 2.011, 2.012, 2.013, & 2.014** provide more detail – the licensee, staff, or any of their family members may not borrow or use client funds for anything other than the client; they may not be the life insurance beneficiary or receive any indirect life insurance benefits unless related to client by blood or marriage.

(5) Contains more specific requirements for client records, including a new requirement for color photo of client taken within last 5 years. Update records within 30 days of new information and document efforts to obtain any missing information.

(7) New rules and requirements for video monitoring. Must have written criteria and protocols for use, as well as written consent. Remote interactive video monitoring cannot be used in bathrooms or bedrooms.

(8) Written policies and procedures and staff training are required for behavioral interventions. Describes prohibited procedures.

(9) Written policy on sexual activity required and licensee also must train staff on the policy. There are several required elements for the policy. Specific requirements for supervision and placement of any sexually aggressive residents are described.

(11) First aid kits have to be American Red Cross approved, specific contents are not stated in the rule.

(13) Staff must be trained on any specialized equipment and are competent in utilizing such equipment for the residents.

(14) New requirement that vehicles used by the facility to transport residents must have a working/tagged fire extinguisher in them. Cannot leave residents unattended in vehicle.

(15) New requirement for facility to have a system in place to communicate recent incidents and client information to staff on next shift. Must include a procedure or mechanism to assure that information is reviewed across all shifts. Can be electronic and documentation must be maintained one year from each entry.

65G-2.010 Fire & Emergency Procedures.

Monthly drills still required but shall not be conducted between midnight and 5 am. Section also discusses evacuation and emergency shelter procedures. Missing resident and incident reporting procedures are the same as APD incident reporting operating procedures.

65G-2.011 Foster Care Facility Standards.

Required to have at least 1 back-up direct care staff if the foster care facility utilizes live-in caregiver(s).

65G-2.014 Comprehensive Transitional Education Program Standards.

(1) Adds several required elements to policy and procedures manual, including video monitoring criteria and protocols and a description of all reactive and restrictive procedures that may be utilized.

(5) More specific and detailed staff training requirements are described.

(6)(b) Requires a committee approved by APD Senior Behavior Analyst to meet regularly and review all behavioral intervention plans and report to the LRC.

(7)(c) At time of admission, requires development and update of monthly transition plans that include prioritizing the behaviors requiring admission, targeted discharge placements, and plans for fading behavior supports to meet structure of discharge placement.

65G-2.015 Siting

No change to current rule other than the addition of (8), which discusses community residential homes located within planned residential communities and the documents required for these facilities.