Section I
Notices of Development of Proposed Rules and Negotiated Rulemaking

DEPARTMENT OF EDUCATION

State Board of Education

RULE TITLE: RULE NO.:
Educational Facilities 6-2.001

PURPOSE AND EFFECT: To review existing rules for public educational facilities to determine any amendments necessary to comply with class size reduction requirements pursuant to Section 1 of Article IX of the State Constitution as amended November 2002 limiting the maximum number of students assigned to a teacher in core-curricula classrooms to 18 in grades PK-3, 22 in grades 4-8, and 25 in grades 9-12.

SUBJECT AREA TO BE ADDRESSED: State educational facilities rule [State Requirements for Educational Facilities (SREF)] relating to class size reduction, including Section 6.1, Size of Space and Occupant Design Criteria Table.

SPECIFIC AUTHORITY: Section 1(a) Article IX, State Constitution, Sections 1001.02(1), 1001.42(9), 1013.02(2), 1013.37 FS.

LAW IMPLEMENTED: Section 1(a) Article IX, State Constitution, Sections 50.011, 50.021, 50.031, 50.041, 50.051, 50.061, 50.071, 1001.02, 1001.42(9), 1001.453, 1011.09, 1011.74, 1301.01, 1013.03, 1013.31, 1013.35, 1013.37, 1013.371, 1013.60, 1013.61, 1013.64, 1013.735, 1013.736, 1013.737 FS.

A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE TIME, DATE AND PLACE SHOWN BELOW:

TIME AND DATE: 1:30 p.m. – 4:30 p.m., March 31, 2004

PLACE: Department of Education, Turlington Building, 17th Floor, 325 West Gaines Street, Tallahassee, Florida 32399-0400

TIME AND DATE: 9:00 a.m. – 12:00 Noon, April 5, 2004

PLACE: Best Western Rolling Hills Resort, 3501 West Rolling Hills Circle, Fort Lauderdale, Florida 33328

TIME AND DATE: 12:00 Noon – 3:00 p.m., April 12, 2004

PLACE: Amerisuites, Orlando Airport/Northeast, 7500 Augusta National Drive, Orlando, Florida 32822

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Dr. Charles L. Wooten, Acting Director, Office of Educational Facilities, 325 West Gaines Street, Room 1054, Tallahassee, Florida 32399-0400

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS NOT AVAILABLE.

DEPARTMENT OF EDUCATION

Commission for Independent Education

RULE TITLE: RULE NO.:
Medical Clinical Clerkship Programs 6E-2.0042

PURPOSE AND EFFECT: The Commission proposes this rule amendment to clarify the criteria.

SUBJECT AREA TO BE ADDRESSED: Medical Clinical Clerkship Programs.

SPECIFIC AUTHORITY: 1005.22(1)(e)1., 1005.31(2),(3),(11) FS.

LAW IMPLEMENTED: 1005.31(11) F.S.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE LAW WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Samuel L. Ferguson, Executive Director, Commission for Independent Education, 2650 Apalachee Parkway, Suite A, Tallahassee, Florida 32301

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS NOT AVAILABLE.

BOARD OF TRUSTEES OF THE INTERNAL IMPROVEMENT TRUST FUND

Pursuant to Chapter 2003-145, Laws of Florida, all notices for the Board of Trustees of the Internal Improvement Trust Fund are published on the Internet at the Department of Environmental Protection's home page at http://www.dep.state.fl.us/ under the link or button titled "Official Notices."

DEPARTMENT OF CORRECTIONS

RULE TITLE: RULE NO.:
Routine Mail 33-210.101

PURPOSE AND EFFECT: The purpose and effect of the proposed rule is to allow wardens to restrict correspondence between inmates and sexually violent predators incarcerated at civil commitment centers when it is determined that the intended correspondence would present a substantial threat of interference with the security, order or rehabilitative objectives of the correctional institution.

SUBJECT AREA TO BE ADDRESSED: Routine Mail.

SPECIFIC AUTHORITY: 944.09 FS.

LAW IMPLEMENTED: 20.315, 944.09 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Perri King Dale, 2601 Blair Stone Road, Tallahassee, Florida 32399-2500

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

33-210.101 Routine Mail.

(1) through (7) No change.

(8) Correspondence with individuals under civil commitment as sexually violent predators shall be subject to the approval of the warden. The warden shall withhold approval if he finds that the intended correspondence would present a substantial threat of interference with the security, order or rehabilitative objectives of his institution.

(8) through (20) renumbered (9) through (21) No change.

Specific Authority 944.09 FS. Law Implemented 20.315, 944.09 FS. History–New 10-8-76, Amended 10-11-77, 4-19-79, 11-19-81, 3-12-84, 10-15-84, Formerly 33-3.04, Amended 7-8-86, 9-4-88, 3-9-89, 9-1-93, 9-30-96, 5-25-97, 6-1-97, 10-7-97, 5-10-98, Formerly 33-3.004, Amended 12-20-99, Formerly 33-602.401, Amended 12-4-02, 8-5-03, 10-27-03, _____.

DEPARTMENT OF CORRECTIONS

RULE TITLE: RULE NO.:

Temporary Release of Inmates for Specific Purposes 33-601.601

PURPOSE AND EFFECT: The purpose and effect of the proposed rule is to clarify requirements for an inmate to be temporarily released to the custody of another agency for funeral attendance or a deathbed visit, and to provide the circumstances under which an inmate will not be eligible for temporary release for this purpose.

SUBJECT AREA TO BE ADDRESSED: Temporary release for funeral attendance or deathbed visit.

SPECIFIC AUTHORITY: 20.315, 944.09 FS.

LAW IMPLEMENTED: 944.09 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Perri King Dale, 2601 Blair Stone Road, Tallahassee, Florida 32399-2500

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

33-601.601 Temporary Release of Inmates for Specific Purposes.

(1) Except as provided below, an ~~With the exception of an inmate in close management status or under sentence of death, any~~ inmate in the custody of the Department of Corrections who is not eligible for furlough may be released to attend a funeral of, or make a deathbed visit to a member of his immediate family ~~or to another relative or adopted relative who has been instrumental in the rearing of the inmate. Temporary releases for the above stated purposes may be~~ in this state or ~~to~~ any other state under the ~~following~~ conditions set forth in this rule.

(2) An inmate shall not be released to have both a deathbed visit and attend the funeral of the same immediate family member.

(3) An inmate will not be eligible to attend a funeral or deathbed visit if any of the following conditions exist:

(a) Inmate is under sentence of death.

(b) Inmate is close custody.

(c) Inmate has become a management problem and close management status is under consideration.

(d) Inmate has prior history of escape or attempted escape; conviction not required.

(e) In the last six months, the inmate has had one or more major disciplinary violations as defined in subsection 33-601.302(11), F.A.C.

(f) Family has requested a Sheriff or Chief of Tribal Police in a jurisdiction or county different from the location of the funeral or deathbed visit to take custody of the inmate.

(4)~~(1)~~ No change.

(5)~~(2)~~ The family of a non-furlough eligible ~~an~~ inmate wishing to have the ~~such~~ inmate attend a funeral or make a deathbed visit must contact the Sheriff or Chief of Tribal Police of the county or jurisdiction in which the ~~where such~~ funeral or deathbed visit is to occur ~~be made~~ and, at their expense, arrange with the Sheriff or Chief of Tribal Police to secure the custody and transportation of the inmate.

(6)~~(3)~~ No change.

(7)~~(4)~~ The Secretary or his designee shall have the discretion of determining whether the inmate may be safely released for such purposes after giving due regard to the custody requirements of the inmate. If the Secretary or his designee is satisfied that the inmate meets these requirements, he will authorize the Sheriff or Chief of Tribal Police to take custody and advise him of the location of the inmate. The Secretary or his designee shall establish the date the inmate is to be returned to the custody of the Department of Corrections and any conditions of the transfer of custody ~~when necessary to insure the efficient and orderly operation of the facility~~. If the inmate is to be transported out of state, the inmate must sign a waiver of extradition agreeing to the transfer to the other state for the purpose stated and his subsequent return to the Department of Corrections. The warden or Officer-in-Charge of the institution where such inmate is located shall obtain such waiver as a condition of the inmate's release to out-of-state authorities.

(8)~~(5)~~ No change.

(7)~~(6)~~ The warden or the Officer-in-Charge having custody of such inmate shall verify ~~satisfy himself as to~~ the identity and authority of the agent arriving ~~officer calling~~ at the institution to take custody and shall secure a receipt of the temporary transfer of custody ~~such inmate upon his release~~.

(9)~~(7)~~ It shall be the responsibility of the Sheriff or Chief of Tribal Police at all times to retain custody of the inmate and to return him to the institution from which custody was obtained at the time set by the Secretary. Upon the return of the inmate to the institution, institution staff shall provide a receipt to the agent returning the inmate, certifying the return of the ~~shall be given to the Sheriff or Chief of Tribal Police for such~~ inmate.

Specific Authority 20.315, 944.09 FS. Law Implemented 944.09 FS. History–New 10-8-76, Formerly 33-7.03, Amended 4-25-86, 2-12-97, 11-16-97, Formerly 33-7.003, Amended _____.

WATER MANAGEMENT DISTRICTS

South Florida Water Management District

RULE TITLE: RULE NO.:

Publications, Rules and Interagency Agreements Incorporated by Reference 40E-4.091

PURPOSE, EFFECT AND SUBJECT AREA TO BE ADDRESSED: To amend Section 4.2.8 of the "Basis of Review for Environmental Resource Permit Applications Within the South Florida Water Management District – September 2003" to revise the drainage basins in the environmental resource permitting rules to consider cumulative impacts on a scale of 38 more naturally derived watersheds, which are already adopted by rule in the Basis of Review for Environmental Resource Permits (Figure 4.4-1).

SPECIFIC AUTHORITY: 373.044, 373.113, 373.171, 373.413 FS.

LAW IMPLEMENTED: 373.413, 373.4135, 373.414, 373.4142, 373.416, 373.418, 373.421, 373.426 FS.

A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE TIMES, DATES AND PLACES SHOWN BELOW:

TIME AND DATE: 10:00 a.m. – 12:00 Noon, March 30, 2004

PLACE: South Florida Water Management District, Lower West Coast Regional Service Center, 2301 McGregor Boulevard, Fort Myers, Florida

TIME AND DATE: 10:00 a.m. – 12:00 Noon, March 31, 2004

PLACE: South Florida Water Management District, Orlando Service Center, 1707 Orlando Central Parkway, Orlando, Florida

TIME AND DATE: 10:00 a.m. – 12:00 Noon, April 1, 2004

PLACE: West Lake Park/Anne Kolb Nature Center, 751 Sheridan Street, Hollywood, Florida

Although Governing Board meetings, hearings and workshops are normally recorded, affected persons are advised that it may be necessary for them to ensure that a verbatim record of the proceeding is made, including the testimony and evidence upon which any appeal is to be based.

Persons with disabilities or handicaps who need assistance may contact Garrett Wallace, District Clerk, (561)682-6371, at least two business days in advance to make appropriate arrangements.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: For technical issues: Robert Robbins, South Florida Water Management District, Post Office Box 24680, West Palm Beach, FL 33416-4680, 1(800)432-2045, Extension 6951, (561)682-6951, e-mail: rrobbins@sfwmd.gov; For procedural issues: Jan Sluth, Paralegal, Office of Counsel, South Florida Water Management District, Post Office Box 24680, West Palm Beach, FL 33416-4680, 1(800)432-2045, Extension 6299, (561)682-6299, email: jsluth@sfwmd.gov

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

40E-4.091 Publications, Rules and Interagency Agreements Incorporated by Reference.

(1) No change.

(a) "Basis of Review for Environmental Resource Permit Applications Within the South Florida Water Management District – _____ ~~September, 2003~~".

(b) through (k) No change.

(2) No change.

Specific Authority 373.044, 373.113, 373.171, 373.413 FS. Law Implemented 373.413, 373.4135, 373.414, 373.4142, 373.416, 373.418, 373.421, 373.426 FS. History–New 9-3-81, Amended 1-31-82, 12-1-82, Formerly 16K-4.035(1), Amended 5-1-86, 7-1-86, 3-24-87, 4-14-87, 4-21-88, 11-21-89, 11-15-92, 1-23-94, 4-20-94, 10-3-95, 1-7-97, 12-3-98, 5-28-00, 8-16-00, 1-17-01, 7-19-01, 6-26-02, 4-6-03, 4-14-03, 9-16-03, _____.

(The following represents proposed changes to section 4.2.8 of the document entitled "Basis of Review for Environmental Resource Permit Applications Within the South Florida Water Management District – September, 2003" incorporated by reference in Rule 40E-4.091, F.A.C.)

4.2.8 Cumulative Impacts

Pursuant to paragraph 4.1.1(g), an applicant must provide reasonable assurances that a regulated activity will not cause unacceptable cumulative impacts upon wetlands and other surface waters within the same drainage basin as the regulated activity for which a permit is sought. The impact on wetlands and other surface waters shall be reviewed by evaluating the impacts to water quality as set forth in subsection 4.1.1(c) and by evaluating the impacts to functions identified in subsection 4.2.2. If an applicant proposes to mitigate these adverse impacts within the same drainage basin as the impacts, and if

the mitigation fully offsets these impacts, the District will consider the regulated activity to have no unacceptable cumulative impacts upon wetlands and other surface water, and consequently the condition for issuance in section 4.1.1(g), will be satisfied. For purposes of performing a cumulative impact analysis, drainage basins shall be those depicted on Figure 4.4-1. ~~The drainage basins within the District are identified on Figure 4.2.8-1.~~

AGENCY FOR HEALTH CARE ADMINISTRATION

Medicaid

RULE TITLES:	RULE NOS.:
The Responsibilities of the Unlicensed Direct Service Developmentally Disabled (DD) Waiver Provider for the Administration of Medications to and for the Supervision of the Self-Administration of Medications by DD Waiver Recipients	59G-8.201
Definitions	59G-8.202
Orientation Requirements for Trainers and the Training and Validation Requirements for the Unlicensed Direct Service Providers	59G-8.203
Requirements for the Administration of Medications to DD Waiver Recipients by Validated Unlicensed Direct Service Providers	59G-8.204
Requirements for the Validated, Unlicensed Direct Service Provider's Supervision of the Self-Administration of Medications by DD Waiver Recipients	59G-8.205
Storage Requirements for Prescription Medications	59G-8.206
Additional Requirements	59G-8.207
Required Record Keeping for Direct Service Providers	59G-8.208
Special Requirements for Recipients who Require Medication While Traveling or Away for a Visit	59G-8.209
Informed Consent	59G-8.210
Recipient Request for Exemption from Rule Requirements	59G-8.211

PURPOSE AND EFFECT: The purpose of this rule is to provide DD waiver direct service providers, or direct service staff employed by a DD waiver provider, who do not currently hold a professional medical license and who provide direct services to DD waiver recipients while in their own or family homes, foster homes, group homes, independent living arrangements, supported living arrangements, and adult day training facilities, with guidelines regarding the following section titles: medication administration training and medication administration skills validation requirements for the unlicensed direct service provider; requirements for administration of medications; requirements for the supervision of the self-administration of medication; storage requirements for medication; required record keeping for the administration or supervision of self-administration of medication by a validated direct service provider; special requirements for recipients who require medication while traveling, or away for a visit; informed consent; request for exemption; and additional requirements.

The effect will be to establish in the Administrative Code, rules for the supervision of self-administration of medications by and the administration of medications to DD wavier recipients, by unlicensed direct service providers.

SUBJECT AREA TO BE ADDRESSED: The Supervision of the self-administration of medications by and the administration of medication to DD Waiver Recipients by unlicensed direct service providers.

SPECIFIC AUTHORITY: 409.919 FS.

LAW IMPLEMENTED: 409.906, 409.912 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE TIME, DATE AND PLACE SHOWN BELOW.

TIME AND DATE: 10:00 a.m. – 11:00 a.m., March 30, 2004

PLACE: 2727 Mahan Drive, Building 3, Conference Room "C", Tallahassee, FL

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT IS: Karen Henderson, Medicaid Services, 2727 Mahan Drive, Building 3, Mail Stop 20, Tallahassee, Florida 32308-5407, (850)414-9756

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

59G-8.201 The Responsibilities of the Unlicensed Direct Service Developmentally Disabled (DD) Waiver Provider for the Administration of Medications to and for the Supervision of the Self-Administration of Medications by DD Waiver Recipients.

(1) Notwithstanding the requirements of Chapter 464, F.S. (the Nurse Practice Act), the purpose of this rule is to provide unlicensed direct service DD waiver providers, or unlicensed direct service staff employed by a DD waiver provider who do not currently hold a professional medical license or nursing license, with guidelines regarding:

(a) Definitions for this rule;

(b) Orientation requirements for trainers and training and validation requirements for the unlicensed direct service provider;

(c) Requirements for the administration of medications to DD waiver recipients by validated unlicensed direct service providers;

(d) Requirements for the validated unlicensed direct service provider's supervision of the self-administration of medications by DD waiver recipients;

(e) Storage requirements for prescription medications;

(f) Additional requirements;

(g) Required record keeping for validated unlicensed direct service providers;

(h) Special requirements for recipients who require medications while traveling or away for a visit;

(i) Informed consent; and

(j) Recipient request for exemption from rule requirements.

(2) This rule *does not* apply to the following:

(a) Unlicensed family members who administer medications to or assist in self-administering medications by DD waiver recipients without compensation and who qualify as exempt from the nursing licensure requirements, in accordance with Chapter 464.002, F.S.;

(b) Unlicensed direct service providers working as employees of or under contract with licensed home health agencies, for the purpose of medication administration activities only;

(c) Unlicensed direct service providers working as employees of or under contract with licensed nurse registries;

(d) Unlicensed direct service providers working as employees of or under contract with licensed hospice agencies;

(e) Group home providers that do not meet the definition of a "group home facility", as defined in Chapter 393.063(23) and (24), F.S.; and

(f) Providers of waiver services not listed in paragraphs 59G-8.204(2)(a)-(i) and 59G-8.205(3)(a)-(i), F.A.C., of this rule.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.202 Definitions.

Definitions, as used in Rules 59G-8.201-.211, F.A.C.:

(1) "Adult Day Training (ADT)" means a DD waiver program that provides training services to enrolled DD waiver adults. The ADT program is intended to support the participation of recipients in daily, valued routines of the community, which may include work-like settings that assist the recipient to achieve his or her defined outcomes (goals).

(2) "A.R.N.P." is an advanced registered nurse practitioner, licensed by the Department of Health, practicing within the scope of his or her license, pursuant to Chapter 464, F.S.

(3) "Controlled medication," means a medication that is regulated by law, with regard to possession and use.

(4) "Department" refers to the Department of Children and Families, Developmental Disabilities Office.

(5) "District" means one of the District or Regional Developmental Disabilities offices serving a specified geographic area.

(6) "District Medical Case Manager" is an R.N. or A.R.N.P. employed by the Department and assigned to a specific District. This individual provides nursing oversight regarding the medical care and needs of the DD waiver recipients residing in that District.

(7) "Foster home" is a facility, defined in Chapter 393.063(23), F.S., that provides residential services to enrolled DD waiver recipients. This facility provides a family living environment, including supervision and care, necessary to meet the physical, emotional, and social needs of its residents.

(8) "Group home" is a licensed residential facility that provides a family living environment including supervision and care necessary to meet the physical, emotional, and social needs of its residents. The capacity of such a facility shall be between 3 and 15 residents and meet the definition of group home, as described in Sections 393.063(23) and (24), F.S.

(9) "Health care professional" is a pharmacist, licensed under Chapter 465, F.S., a physician or physician's assistant, licensed under Chapter 458 or 459 F.S., a dentist, licensed under Chapter 466, F.S., or a nurse, licensed under Chapter 464, F.S.

(10) "L.P.N." is a licensed practical nurse, licensed by the Florida Department of Health and practicing within the scope of his or her license, pursuant to Chapter 464, F.S.

(11) "Medication Administration Record (MAR)" is a document on which each instance of medication administration or the supervision of the self-administration of medication is recorded for a specific recipient.

(12) "Narcotic medication" means a medication that is also a controlled medication regulated by law. Narcotic medications used in moderate doses may dull the senses, relieve pain and induce profound sleep, but when used in excessive doses causes stupor, coma or convulsions.

(13) "Nebulizer" means an atomizer equipped to produce an extremely fine spray for deep penetration of the lungs.

(14) "Non-prescription or over-the-counter (OTC) medication" is a medication that is authorized, pursuant to federal or state law, for general distribution and use without a prescription in the treatment of human diseases, ailments, or injuries.

(15) "Opthalmic medication" means any prescribed eye solution (eye drops) or ointment to be instilled into the eye or applied on or around the eyelid.

(16) "Oral medication" means any medication, tablet, capsule, or liquid introduced into the gastrointestinal tract via oral consumption (by mouth).

(17) "Otic medication" means prescribed solutions or ointments to be applied into the outer ear canal or around the outer ear.

(18) "Parenteral" meaning not in or through the digestive system. Parenteral nutrition is given through the veins of the circulatory system, rather than through the digestive system.

(19) "Physician" means a health care professional who holds an active license pursuant to Chapter 458, F.S., or an osteopathic physician who holds an active license pursuant to Chapter 459, F.S.

(20) "P.O. (*per os*)" means by way of the mouth.

(21) "Prescription medication" is a drug or medication obtained pursuant to a prescription, as defined in Section 465.003(14), F.S.

(22) "PRN" (*pro re nata)* meaning as the situation demands or as needed at a specific time.

(23) "Provider" means the organization or individual enrolled as a DD waiver provider which is responsible for delivering services to the DD waiver recipient.

(24) "Recipient" for the purpose of this rule, means a developmentally disabled individual who is currently enrolled in and is receiving home and community–based services through the DD waiver.

(25) "Rectal medication" means any prescribed medication, capsule or suppository to be administered via the rectum.

(26) "R.N." is a registered nurse, licensed by the Department of Health, practicing within the scope of his or her license, pursuant to Chapter 464, F.S.

(27) "Sample medication" means a prescription medication, dispensed by a licensed physician, dentist, podiatrist, physician's assistant, or A.R.N.P. without charge, which does not contain all of the following information in the label affixed to the medication: the name of the dispensing practitioner, the patient's name, the date the medication was dispensed, the name and strength of the drug, directions for use, and a clearly marked expiration date.

(28) "Special technique" means a medically related approach that is particularly adapted to the special disease or condition being treated.

(29) "Topical medication" means a local application of a prescribed salve, lotion, ointment, cream or solution to a bodily part.

(30) "Transdermal Patch" means an adhesive patch containing a pre-measured amount of topical medication that is absorbed into the body via the epidermis (outer layer of skin) at a fixed rate.

(31) "Unlicensed direct services provider" means an enrolled DD waiver provider, or a staff person of an enrolled DD waiver provider, who is not licensed or qualified to practice nursing or medicine, and renders services directly to DD waiver recipients.

(32) "Validated direct service provider" is an unlicensed direct services provider or an employed or contracted staff member of a provider who has completed the required medication administration training and has met validation requirements for the administration or the supervision of self-administration of medications to DD waiver recipients, unless otherwise excluded by this rule.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.203 Orientation Requirements for Trainers and the Training and Validation Requirements for the Unlicensed Direct Service Providers.

(1) Required medication administration training shall include the following topics:

(a) The safe handling of medications;

(b) The proper administration of allowed medications;

(c) The proper supervision involving the self-administration of medications by DD waiver recipients;

(d) Documentation requirements; and

(e) Other requirements of this rule.

(2) Training for unlicensed direct service providers shall provide Department approved instruction and training, including step-by-step procedures necessary for the safe administration of medications or for the supervision of the self-administration of medications:

(a) The validated direct service provider shall wash his or her hands prior to the administration of medications to, or the supervision of the self-administration of medications by each recipient;

(b) The validated direct service provider must conduct a double-check of the dosage and time of administration against the medication container label and the MAR before administering any medication or before supervising the self-administration of any medication;

(c) The validated direct service provider shall confirm that the recipient, to whom the medication is to be administered, is the same recipient for whom the medication has been prescribed;

(d) The validated direct service provider shall administer or supervise the self-administration of medications as prescribed and via the route instructed by the recipient's prescribing health care professional;

(e) The validated direct service provider shall ensure the oral medication administered or supervised during self-administration has been completely ingested before leaving the recipient and before recording or documenting the administration of the medication on the MAR;

(f) The validated direct service provider shall record or document the administration or self-administration of each medication in the MAR immediately after the administration or the supervision of self-administration; and

(g) The validated direct service provider shall directly observe the recipient for a period of twenty minutes following the administration or supervision of self-administration of new or PRN medications to immediately detect and react to possible side effects of the medication or to document the

effectiveness of the medication. The validated direct service provider shall review the MAR for special instructions regarding required observation.

(3) If the recipient requires specific positioning or the use of special techniques specific to that individual, all validated direct service providers responsible for administering medication or supervising the administration of medication for that individual shall be trained to use the correct positioning and use of any adaptive equipment required for the proper administration of medications or supervision of the self-administration of medications.

(4) It shall be the responsibility of the validated direct service provider who will be administering or supervising the administration of medication to recipients to obtain and successfully complete the training and receive the validation required by this rule.

(5) Training sessions and validation shall be conducted by a Florida licensed R.N. or A.R.N.P. Medication administration training for unlicensed direct service providers will be provided by or coordinated by the Department.

Registered nurses employed by group home providers, which meet the group home definition in Sections 393.063(23),(24), F.S., shall provide the required training and validation needed for unlicensed direct service employees requiring training and validation. The group home's nurse trainer is responsible for meeting the orientation requirements described in this rule. Registered nurses employed by adult day training facilities shall provide the required medication administration training and validation needed for the unlicensed direct service employees desiring training and validation. The ADT facility's nurse trainer is responsible for meeting the orientation requirements described in this rule.

The orientation of nurse trainers will include contacting the Department's District office and:

(a) Obtaining a current copy of Rules 59G-8.201-.211, F.A.C.;

(b) Receiving instructions for submitting a training curriculum for the Department's approval; and

(c) Signing a statement of receipt for the rule that includes the following information:

(i) Name of the trainer, as it appears on his or her Florida nursing license;

(ii) The trainer's Florida nursing license number and its expiration date;

(iii) Trainer's mailing address and contact number(s); and

(iv) An attached copy of the trainer's current Florida nursing license.

All training curricula, handouts, testing materials, and documents used to comply with the medication administration training and validation requirements of this rule will be pre-approved by the Department. Completing trainer orientation and obtaining the Department's approval for the training curriculum to be used are required prior to providing training or validation.

(6) To become validated, the unlicensed direct service provider must successfully complete the required training and be able to:

(a) Successfully demonstrate, in a practice setting, his or her ability to correctly administer or supervise the self-administration of medications to a recipient in a safe and sanitary manner;

(b) Correctly and accurately document actions related to the administration or the supervision of self-administration of medications, in accordance with the requirements of this rule;

(c) State the purpose, common side effects, and signs and symptoms of adverse reaction regarding a list of commonly used medications that were included in information provided at the approved medication administration training from memory; or

(d) Demonstrate how he or she obtains that information and maintains it for easy access and reference; and

(e) Demonstrate the proper storage of medications.

(7) Validation documentation will contain the following information:

(a) The name, address and DD waiver provider number of the direct service provider being validated. If the direct service provider is an employee of an agency, list the name of the employing agency and the agency's DD waiver provider number;

(b) Validation date, with an expiration date of 365 days from date of validation;

(c) Printed name and original signature of the validating nurse as it appears on his or her nursing license; and

(d) Validating nurse's Florida nursing license number with expiration date.

(8) The validated direct service provider will maintain his or her required validation documentation on file and make it readily available for review.

(a) Validated direct service providers who are employees of agencies will also provide a copy of validation to his or her employer for inclusion in his or her personnel file;

(b) The employee will provide a copy of his or her revalidation to his or her employer within five working days of the revalidation date; and

(c) The employer will maintain the validated direct service employee's validation and revalidation documentation on file and make it readily available for review.

(9) Any direct service provider who has not successfully renewed his or her validation prior to the expiration date will not be eligible to administer medications to or supervise the self-administration of medication by recipients of DD waiver services until such time that the required re-training and re-validation have been successfully completed.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.204 Requirements for the Administration of Medications to DD Waiver Recipients by Validated Unlicensed Direct Service Providers.

(1) Validated direct service providers shall be permitted to administer medications to DD waiver recipients, via the medication routes permitted by this rule, when all of the following requirements have been met:

(a) Has successfully completed the required medication administration training, which was based on a training curriculum approved by the Department and meets the requirements of this rule;

(b) Has his or her medication administration abilities successfully validated by a Florida licensed R.N. or A.R.N.P. and is re-validated at least annually thereafter;

(c) Is able to demonstrate, to the complete satisfaction of the validating nurse, his or her ability to read and follow medication instructions on a prescription label, physician's order or MAR;

(d) Is able to demonstrate, to the complete satisfaction of the validating nurse, his or her ability to write legibly, complete required documentation, and convey accurate and discernable information;

(e) Has a current informed consent, signed by the DD waiver recipient or his or her legal guardian or advocate.

(i) The consent form acknowledges and permits a validated direct service provider to administer medications, currently prescribed for the recipient by a licensed physician, physician's assistant, or A.R.N.P., for an individual DD recipient.

(ii) The informed consent form must be updated at least annually or more often if a recipient's medical or legal circumstances change;

(f) Has received and understands the needed medical history or updated information for each recipient. Recipient history and information can be provided by another direct service provider, the recipient's waiver support coordinator or a family member who is familiar with the recipient's usual behavior and his or her past reactions to medications; and

(g) The recipient has not been determined to be capable of the safe handling and the self-administration of his or her own medications by his prescribing physician.

(2) When all of the above-described prerequisites for administration of medication by validated direct service providers are met, the administration of medications may only occur during the provision of the following DD waiver services:

(a) Adult Day Training Program, at the ADT facility;

(b) Behavior Assistant Services;

(c) Companion Services;

(d) In-Home Support Services;

(e) Residential Habilitation Services;

(f) Personal Care Assistance;

(g) Respite Care;

(h) Special Medical Home Care; and

(i) Supported Living Coaching.

(3) Validated direct service providers cannot administer medications to DD waiver recipients who are not receiving the services described in paragraphs 59G-8.204(2)(a)-(i), F.A.C., above.

(4) In the following circumstances, the validated unlicensed direct service provider cannot administer medications:

(a) When prescription medications are to be administered by sub-cutaneous, intra-muscular or intravenous injection;

(b) In the absence of a signed informed consent form that would permit the validated direct service provider or the direct service employees or contract staff of a provider agency to administer prescribed medications;

(c) When the validated direct service provider does not meet all requirements listed in paragraphs 59G-8.204(1)(a)-(g), F.A.C., above; or

(d) When the validated direct service provider is not providing a DD waiver service listed in paragraphs 59G-8.204(2)(a)-(i), F.A.C., above.

(5) General considerations governing the administration of medication or the supervision of the self-administration of medications:

(a) Excluding providers of ADT services, all validated direct service DD waiver providers of DD waiver services, listed under subsection 59G-8.204(2), F.A.C., are authorized to administer or supervise the self-administration of prescribed medications via the following medication routes;

(i) Oral (p. o.)

(ii) Topical

(iii) Transdermal

(iv) Inhaled

(v) Rectal

(vi) Vaginal

(vii) Urethral

(viii) Opthalmic

(ix) Otic

(b) In accordance with Section 393.506, F.S., validated unlicensed direct service providers of ADT services are authorized to administer or supervise prescribed medications via the following medication routes;

(i) Oral (p. o.)

(ii) Topical

(iii) Trans-dermal

(iv) Inhaled

(c) The correct medications shall be administered to or self-administered by the person for whom the medication is prescribed, at the correct time, with the correct dosage, and by the correct route as prescribed by the individual's health care professional;

(d) Medications may not be crushed, diluted or mixed without written directions or instructions from the individual's prescribing health care professional;

(e) The expiration date must be checked before administering each prescription medication;

(f) Prescription medications, with an expiration date preceding the current date, will not be administered;

(g) Outdated prescription medication must be properly destroyed by the individual responsible for medication administration or the supervision of self-administration of medications. The disposal of medication will be witnessed and a record of the medication disposal will be documented on a medication destruction form and will be signed by the validated direct service provider and a witness;

(h) Torn, damaged, illegible or mislabeled prescription labels should be reported immediately to the dispensing pharmacy or pharmacist and, if a recipient is residing in a residential facility, the facility supervisor must also be notified;

(i) The documentation of each medication administered or supervised as self-administered by the recipient shall be recorded immediately in the MAR, by the responsible validated direct service provider;

1. The responsible validated direct service provider will make a documented record of any medication dosages refused by the individual or missed dosages on the MAR. This documentation will be completed by drawing a circle around the appropriate space on the MAR that contains the initials of the validated direct service provider responsible for administering or supervising the self-administration of the scheduled dosage; and

2. The responsible validated direct service provider will document a reason for each medication that was not administered to or self-administered by the individual, as prescribed, under the comments section of the MAR and affix his or her signature after the entry.

(j) Recipients shall not miss medications due to delays in refilling a prescription;

(k) Validated direct service providers shall wash their hands with soap and water prior to administering medications to each recipient and will rewash hands as needed during a medication administration or self-administration procedure;

(l) Medications shall be prepared for administration in a quiet location that is free from distraction and for one recipient at a time;

(m) To complete an individual's medication process, the medication of one individual recipient must be returned to its portable or permanent medication storage unit before administering medications to, or supervising the self-administration of medication for, another DD Waiver recipient;

(n) Validated direct service providers may only administer prescriptions or OTC medications to DD waiver recipients that have been prescribed, with a written order, by the recipient's health care professional; and

(o) Validated direct service providers may only administer prescriptions or OTC medications to or supervise the self-administration of medications by DD waiver recipients on a PRN basis, when a written prescription from the individual's health care professional includes instructions regarding criteria for its use that describes:

1. The circumstances under which the medication may be administered or self-administered;

2. The time limit for the use of the medication;

3. The desired result of the treatment; and

4. The circumstances and time at which an assessment by a licensed health care professional is required.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.205 Requirements for the Validated, Unlicensed Direct Service Provider's Supervision of the Self-Administration of Medications by DD Waiver Recipients.

(1) A recipient, who has been determined by his or her prescribing health care professional as capable of safely handling his or her own medications, should be encouraged to do so.

(2) Only validated direct service providers shall be permitted to supervise a recipient's self-administration of medication, via the medication routes permitted by this rule, when all of the following requirements are met:

(a) Has successfully completed the required training, which was based on a training curriculum approved by the Department and meets the requirements of this rule;

(b) Has his or her abilities successfully validated by a Florida licensed R.N. or A.R.N.P. and is re-validated at least annually thereafter;

(c) Is able to demonstrate, to the complete satisfaction of the validation nurse, his or her ability to read and follow medication instructions on a prescription label, physician's order and MAR;

(d) Is able to demonstrate, to the complete satisfaction of the validation nurse, his or her ability to write legibly, complete required documentation, and convey accurate information;

(e) Has a current informed consent signed by the DD waiver recipient or his or her legal guardian or advocate.

1. The signed consent form acknowledges and permits the validated direct service provider or a provider's validated direct service staff to supervise the recipient's

self-administration of medications currently prescribed for the recipient by a licensed physician, physician's assistant or A.R.N.P.;

2. The informed consent form must be updated at least annually or more often if a recipient's medical or legal circumstances change.

(f) Has received and understands the needed medical history or updated information for each recipient who will be supervised while self-administering his or her medications. This history and information can be provided by another direct service provider, the recipient's waiver support coordinator or a family member who is familiar with the recipient and his or her usual behavior and past reactions to medications.

(g) Must comply with the requirements of paragraph 65B-6.009(15)(d), F.A.C., before the supervision of self-administration may be provided to recipients residing in a foster home licensed by the Department;

(h) Must comply with the requirements of paragraph 65B-6.010(14)(c), F.A.C., before the supervision of self-administration by recipients residing in a licensed group home facility; and

(i) The prescription or OTC medication being self-administered is currently prescribed for the individual and is being self-administered as prescribed by the individual's physician, physician's assistant or A.R.N.P.

(3) A recipient's self-administration of medication may be supervised by a validated direct service provider when all of the above-described prerequisites are met and may only occur during the provision of the following DD waiver services:

(a) Adult Day Training Program, at the ADT facility;

(b) Behavior Assistance Services;

(c) Companion Services;

(d) In-Home Support Services;

(e) Residential Habilitation Services;

(f) Personal Care Assistance;

(g) Respite Care;

(h) Special Medical Home Care; and

(i) Supported Living Coaching.

(4) The validated direct service provider is strictly limited to the following activities, when supervising the self-administration of medications by DD waiver recipients:

(a) Removing the medication, in its properly dispensed and properly labeled container, from its portable or permanent storage unit and handing the *unopened* container to the recipient for whom the medication is currently prescribed;

(b) Checking the expiration date on each prescription label or medication container label prior to proceeding to c-g of this section. Should the expiration label be illegible, the validated unlicensed direct service provider shall immediately notify the dispensing pharmacist or pharmacy and the facility supervisor;

(c) Asking the recipient his or her name, reading once silently and then reading aloud from the prescription label, verifying the name for whom the medication has been dispensed, verifying the name of the medication, checking the dosage prescribed, and inspecting administration instructions listed on the prescription label to the recipient and check that information against the MAR before opening the container;

(d) Prompting the recipient regarding the correct amount of medication that he or she should remove from the container (or in the case of inhaled medications, the number of pre-measured doses to be taken and by what route of administration), giving the container to the recipient, observing the recipient as he or she removes the medication from the container to ensure that he or she removes only the quantity of medication prescribed, observing the recipient as he or she takes the medication, checking to make sure that the recipient has actually ingested the medication, and has securely closed the container;

(e) Assisting the recipient with the application of topical medications;

(f) Assisting the recipient with the placement of a trans-dermal medication patch;

(g) Coaching the recipient through the proper techniques to be used for the self-administration of oral or nasal inhaler medications;

(h) Returning the resealed medication container to its proper portable or permanent storage unit;

(i) Documenting the supervision of self-administration of medication in the MAR. The MAR documentation shall include the recipient's name, known allergies, current date, the time of self-administration, the dosage that was self-administered, the name of the medication self-administered, the name of the prescribing health care professional, and the initials and signature of the validated direct service provider supervising the self-administration;

(j) Supervising the self-administration of medication for one recipient at a time and completing the supervision process by returning the medication(s) supervised to its portable or permanent storage before providing supervision of the self-administration of medication to or administering medication to another DD waiver recipient; and

(k) Reminding the recipient to refill his or her prescriptions in a timely manner to avoid missing doses.

(5) The validated direct service provider *shall not* perform any of the following activities while supervising the self-administration of medications by the DD waiver recipient:

(a) Remove medication from its original container;

(b) Prepare syringes for a recipient's use during his or her self-administration of medication via a subcutaneous, intra-dermal, intra-muscular or intravenous route;

(c) Mix or pour medications used through intermittent positive pressure breathing machines or a nebulizer;

(d) Administer medication through a nasal or oral inhaler;

(e) Administer parenteral preparations;

(f) Perform the irrigation of affected tissue or apply agents used in the debridement of skin;

(g) Apply prescribed topical creams or lotions;

(h) Administer rectal, urethral, vaginal, otic or opthalmic medications;

(i) Assist the recipient in any way with medications for which the time of administration, the amount, the dosage, the method of administration, or the reason for administration is not specified in the health care professional's prescription and would require professional medical judgment on the part of the validated direct service provider.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.206 Storage Requirements for Prescription Medications.

(1) Each prescription medication shall be kept in its original container (whether dispensed by the pharmacy or another health care professional authorized to dispense medications), bearing the original dated prescription label containing legible information, stating the name of the individual for whom the prescription was dispensed, the name of the prescribing physician or health care professional, name of the medication, the dosage, the name, address and telephone number of the pharmacy (if dispensed by a pharmacy), the assigned prescription number, directions for use, the date the medication was dispensed, the quantity dispensed, and the expiration date of the medication.

(2) All prescription medications shall be stored in a locked enclosure.

(3) The key(s) to the locked containers and storage units containing prescriptions and over-the-counter medications shall be maintained at all times by either licensed professional health care personnel or validated direct service providers.

(4) Each recipient's medications shall be kept in its original container, separate from and not co-mingled with the medications of other individuals.

(5) Each medication shall be stored at the proper temperature for that specific medication. Medications requiring refrigeration should be stored in their original containers within a locked storage container that is clearly labeled as containing medications.

(6) Each medication shall immediately be returned to its portable or permanent storage unit immediately following its administration or self-administration.

(7) Any prescription medication that has reached its expiration date must be destroyed in the manner described in paragraph 59G-8.204(5)(g), F.A.C.

(8) The storage of controlled drugs and narcotics require additional safeguards that include:

(a) All controlled drugs and narcotics will be stored separately from other prescription and prescribed over-the-counter medications, in a separate, locked container and within a locked enclosure;

(b) The key(s) to the locked containers and storage units containing controlled or narcotic medications shall be maintained at all times by either licensed professional health care personnel or validated direct service providers;

(c) In facilities that operate in shifts, incoming and outgoing personnel will count controlled and narcotic medications. The count must be performed by the validated direct service provider responsible for medication administration during that day or shift and a witness, who is not a recipient of services. Both persons performing the medication count will carefully verify the accuracy of the count by documenting the number or amount of medication present and compare that number to the previous count and the number of doses administered (per the MAR) since the previous count, for each controlled and narcotic medication. The two persons verifying the count will then sign and date the form used to document the medication count. Any discrepancies in the count of controlled or narcotic medications will be immediately reported to the facility supervisor. In the case of an individual home with only one direct service provider, a daily medication count will be conducted and results documented by that provider;

(d) In facilities where there are no shifts, all controlled drugs and narcotics shall be counted at least once per day, using the same counting and documentation technique described in (c) above; and

(e) In addition to reporting all discrepancies in the medication counts of controlled or narcotic medications to a facility supervisor, all discrepancies noted in the medication count must be promptly reported to the Program Administrator for the District Developmental Disabilities Program or his or her designee.

(9) Recipients who self-administer their own OTC medications on a PRN basis, without supervision, will store those OTC medications in a locked container that cannot be accessed by other recipients.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.207 Additional Requirements.

(1) Validated direct service providers and other direct service providers, including the recipient's support coordinator, shall communicate with the District Medical Case Manager to assure the appropriate oversight and review of the recipient's medication regimen. For recipients who reside in supported living arrangements or licensed residential facilities and who are taking any psychiatric or anti-epileptic medications, an annual medication review should be completed by a licensed consultant pharmacist. The validated direct service provider

will communicate with the recipient's waiver support coordinator to ensure that the required annual medication review has been conducted.

(2) Each facility shall have a designated health care professional who is available for consultation regarding the recipient's medications. The telephone number and name of this health care professional shall be readily available to the responsible direct service provider.

(3) Missed doses of medication and errors in medication administration require the following actions:

(a) Any missed doses, including doses missed due to the recipient's refusal of the medication or errors in medication administration, including those that may be determined as minor errors, shall be immediately documented and reported to the prescribing health care professional for further instruction. Medication administration and the supervision of self-medication errors include the following:

1. The administration of medication or the self-administration of the wrong medication;

2. The administration of medication or the self-administration of the wrong dose;

3. The administration of medication or the self-administration of medication via the wrong route;

4. The administration of the medication or the self-administration of medication at the wrong time or day; or

5. The administration of a medication or the self-administration of a medication to the wrong recipient.

(b) Extra, "catch-up" or additional doses of medication shall not be administered or changes made to the prescribed time of administration without the immediate, prior approval of the prescribing health care professional, which will be followed by a written order for this action from the prescribing health care professional. The validated direct service provider shall promptly record the prescribing health care professional's verbal instructions in the recipient's record and is responsible for any follow-up activities necessary to obtain the written order from the prescribing health care professional, which memorializes the instructions received. Once received, this written approval or instruction will be maintained in the recipient's record and available for review.

(c) In the event of a medication error, the validated direct service provider will notify the District and supervisory individuals, described in subparagraph 59G-8.207(3)(c)1.-5., F.A.C., below, and complete a detailed incident report.

(i) If the medication error took place in a facility, the incident report will be submitted to the facility supervisor and a copy of the report will be submitted to the District office within 24 hours of the incident.

(ii) If the medication error took place in a resident's home or family home, the original incident report will be submitted to the District Office within 24 hours of the incident. A copy of the report will be maintained in the direct service provider's records and easily accessible for review.

(d) Any recipient receiving the incorrect medication or dosage shall be closely observed, by the validated direct service provider, for a minimal period of 30 minutes after the medication was administered or self-administered. Any changes observed in his or her condition should be immediately reported to the prescribing health care professional. In cases of respiratory difficulties or other life threatening emergencies resulting from a medication error, the validated direct service provider will immediately place a 911 call to request emergency medical services. All observations and contacts made regarding any medication error shall be documented in the recipient's record.

(e) Validated direct service providers, determined as needing technical assistance, additional training or corrective action, will be notified in writing by the District Medical Case Manager and notified of required actions and provided with a specific timeframe for the completion of the required actions.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.208 Required Record Keeping for Direct Service Providers.

(1) The responsible validated direct service provider shall record all medication administered to and the supervision of all medications self-administered by a DD waiver recipient. Documentation shall be made on the MAR. Each MAR page will include the following information:

(a) Individual recipient's name;

(b) Any food or medication allergies specific to the individual recipient;

(c) Dates medications were administered or supervised;

(d) Name of each medication prescribed for the individual recipient;

(e) Dosage prescribed for each individual medication listed;

(f) Scheduled time for administration of each medication listed;

(g) Prescribed route of administration (oral, topical, trans-dermal, rectal, etc.) for each medication listed;

(h) Specific instructions for prescribed crushing, mixing or diluting of specific medications;

(i) The initials and signature of the responsible validated direct service provider who administered or supervised the self-administration of medications;

(j) Each medication listed will indicate the name of the prescribing health care professional; and

(k) Completed MAR pages will be maintained in the individual recipient's record and made available for review.

(2) A list of possible side effects, adverse reactions and possible drug interactions for each recipient's medication administered shall be maintained and readily available to any

licensed health care professional or validated direct service provider responsible for the administration or supervision of self-administration of medication.

(3) A record of drug counts, as required by this rule, shall be maintained and made readily available for review.

(4) An original informed consent form shall be maintained, by the validated direct service provider, for each recipient for whom the provider administers medication or for whom the provider supervises the self-administration of his or her medication.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.209 Special Requirements for Recipients who Require Medication While Traveling or Away for a Visit.

The following guidelines are used when a recipient is preparing for a trip or visit:

(1) The validated direct service provider shall ensure that the recipient is furnished with an adequate amount of medication to meet all dosages required while away from his or her place of residence;

(2) Medication shall not be removed from its original container and repackaged;

(3) Medications shall not be co-mingled in a container unless permitted by the provisions of subsection 64B16-28.108(2), F.A.C., or a recipient is determined able to self-administer, or his or her family member places medication in a weekly pill container;

(4) If a weekly pill container is used and the recipient has been determined by his or her physician as able to self-administer medications, the validated direct service provider shall document the name and number of medications to be taken on the visit or trip by the recipient. A MAR containing a list of the recipient's medications will be provided to the recipient, along with the weekly pill minder containing the needed medications. Upon the recipient's return, a pill count will be conducted by the validated direct service provider and results of that count will be documented in the recipient's record.

(5) For recipients who require special techniques or positioning, the validated direct service provider shall ensure that the person responsible for administering the medication while the recipient is away from his or her place of residence receives information regarding the special technique needed or how to properly position the recipient;

(6) The validated direct service provider shall provide to the person responsible for administering or supervising the self-administration of the medication while the recipient is away from his or her place of residence with the name of a contact person and a telephone or beeper number. The name and telephone number of the recipient's primary care physician shall also be provided to the responsible person or family member.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.210 Informed Consent.

(1) An informed consent, using a Department approved form, CF-DD 2063, shall be obtained from the DD waiver recipient, or his or her legal guardian, before a validated direct service provider is permitted to administer medications to or provide supervision for the self-administration of medications by the recipient.

In accordance with Section 765.401, F.S., if the adult recipient is unable or his or her legal guardian is unable or unavailable to provide informed consent, this decision can be made for the recipient by any of the following individuals, in the following order of priority, if no individual in a prior class is available, willing or competent to act:

(a) The recipient's spouse;

(b) An adult child of the recipient, or if the recipient has more than one adult child, a majority of the adult children who are reasonably available for consultation;

(c) A parent of the recipient;

(d) The adult sibling of the recipient or, if the recipient has more than one sibling, a majority of the adult siblings who are reasonably available for consultation;

(e) An adult relative of the recipient who has exhibited special care and concern for the recipient and who has maintained regular contact with the recipient and who is familiar with the recipient's activities, health and religious or moral beliefs; and

(f) A close friend of the recipient.

In those cases where the person with a developmental disability has no person among the various parties listed in paragraphs 59G-8.201(1)(a)-(f), F.A.C., a clinical social worker can be appointed as a health care proxy. This appointment must be made through the facility's bioethics committee, or in the absence of such a committee at the facility, by the bioethics committee of another facility. The validated direct service provider responsible for the administration of medication or the supervision of the self-administration to the recipient cannot sign the informed consent as the recipient's proxy.

(2) The consent form acknowledges and permits the validated direct service provider or a provider's validated direct service staff to administer medications currently prescribed for the recipient by a licensed physician, physician's assistant or A.R.N.P.;

(3) The consent shall be renewed at least annually; and

(4) An original copy of the consent form shall be maintained in the validated direct service provider's records and a copy shall be maintained in the recipient's file.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

59G-8.211 Recipient Request for Exemption from Rule Requirements.

(1) To obtain an exemption from individual requirements of this rule, the recipient or his or her legal guardian shall make a formal request in writing to the District Program Administrator for Developmental Disabilities. The following requirements apply:

(a) This request shall include the specific reason(s) the recipient finds the safeguards provided in the rule are unnecessary to assure his or her safety; and

(b) Each request for exemption must be dated and signed by the recipient or his or her legal guardian.

(2) The following procedure will be followed when a letter requesting an exemption is received:

(a) The District Medical Case Manager shall review each request and forward a copy of the letter with a written recommendation to the District Program Administrator within 10 working days of its receipt;

(b) The District Program Administrator will review the information and in turn submit a copy of the request letter with the District's recommendation to the Developmental Disabilities Central Program Office within 10 working days of its receipt;

(c) The requesting party shall receive the Department's written response, indicating its approval or denial of his or her request, within 10 working days of its receipt by the Department's Central Office; and

(d) A copy of the Department's approval or denial of exemption shall be forwarded to the recipient's waiver support coordinator and recipient's district of residence.

(3) Such letters, requesting exemptions from this rule, shall be maintained by the support coordinator in the recipient's central record and a copy shall also be maintained in the recipient's facility record and readily available for review.

(4) The recipient's waiver support coordinator will make a copy of this letter available to all independent validated direct service providers responsible for furnishing the exempted requirement of this rule to the exempted recipient.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.912 FS. History–New _____.

DEPARTMENT OF MANAGEMENT SERVICES

Commission on Human Relations

RULE TITLE: RULE NO.:
Petition for Relief from a Discriminatory Housing Practice 60Y-8.001

PURPOSE AND EFFECT: The rule provides for Petitions for Relief under the Fair Housing Act.

SUBJECT AREA TO BE ADDRESSED: Filing fee to file a Petition for Relief.

SPECIFIC AUTHORITY: 760.06(12) FS.

LAW IMPLEMENTED: 760.34, 760.35 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE TIME, DATE AND PLACE SHOWN BELOW:

TIME AND DATE: 9:00 a.m. (EDT) – completion of comments by interested parties, Monday, December 29, 2003

PLACE: The Commission's Main Conference Room, 2009 Apalachee Parkway, Suite 100, Tallahassee, FL 32301

CONTACT: Florida Commission on Human Relations, Attn: Jim Tait, Staff Attorney, 2009 Apalachee Parkway, Suite 100, Tallahassee, FL 32301, (850)488-7082, Ext. 1071

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Denise Crawford, Commission's Clerk, 2009 Apalachee Parkway, Suite 100, Tallahassee, FL 32301, (850)488-7082, Commission's website: http://fchr.state.fl.us, click on the publications icon

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

60Y-8.001 Petition for Relief from a Discriminatory Housing Practice.

(1) No change.

(2) A fee of $62.50 is required to be submitted to the Clerk of the Commission upon filing any Petition pursuant to this Section.

Specific Authority 120.53, 760.31(5) FS. Law Implemented 120.53, 760.34, 760.35 FS. History–New 1-25-90, Formerly 22T-22.001, Amended 11-18-92, _____.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Accountancy

RULE TITLE: RULE NO.:
Exemption from Renewal Requirements for Spouses of Members of the Armed Forces of the United States 61G7-33.0065

PURPOSE AND EFFECT: This rule is created pursuant to statute to set out exemption and renewal criteria for spouses of members of the armed forces who are required to be away on military duty.

SUBJECT AREA TO BE ADDRESSED: Exemption from Renewal Requirements for Spouses of Members of the Armed Forces of the United States.

SPECIFIC AUTHORITY: 455.02(2) FS.

LAW IMPLEMENTED: 455.02(2) FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: John W. Johnson, Executive Director, Board of Accountancy, 240 N. W. 76th Drive, Suite A, Gainesville, Florida 32607

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

61G7-33.0065 Exemption from Renewal Requirements for Spouses of Members of the Armed Forces of the United States.

Spouses of members of the Armed Forces of the United States are exempt from licensure renewal provisions, but only in cases of absence from the state because of their spouse's duties with the Armed Forces. Copies of the military orders requiring the change in duty station must be sent to the Board office in order to qualify for the exemption. Upon receipt of the military orders by the Board office confirming exemption eligibility, the spouse's license will be placed on inactive status with no fee required.

Specific Authority 455.02(2) FS. Law Implemented 455.02(2) FS. History–New _____.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Professional Engineers

RULE TITLE:	RULE NO.:
Foreign Degrees	61G15-20.007

PURPOSE AND EFFECT: This rule is being amended to add Foreign Credentials Service of America as an approved transcript evaluation service for reviewing foreign credentials.

SUBJECT AREA TO BE ADDRESSED: Foreign Degrees.

SPECIFIC AUTHORITY: 471.008 FS.

LAW IMPLEMENTED: 471.013, 471.015 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Natalie Lowe, Executive Director, Florida Board of Professional Engineers, 2507 Callaway Road, Suite 200, Tallahassee, Florida 32303

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

61G15-20.007 Foreign Degrees.

(1) through (3) No change.

(4) The applicant must request an evaluation of substantial equivalency of his or her credentials to ABET standards through either Engineering Credentials Evaluation International, 111 Market Place, #171, Baltimore, Maryland 21202; Foreign Credentials Service of America, 1910 Justin Lane, Austin, Texas 78757-2411; or ~~P. O. Box 13084, Baltimore, MD 21203-3084,~~ Joseph Silny & Associates, Inc., P.O. Box 248233, Coral Gables, Florida 33124.

(5) through (6) No change.

Specific Authority 471.008 FS. Law Implemented 471.013, 471.015 FS. History–New 7-20-95, Amended 6-5-96, 4-16-98, 1-17-99, 7-28-99, 1-6-02, 6-13-02, 6-30-02, 10-2-03, _____.

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Pursuant to Chapter 2003-145, Laws of Florida, all notices for the Department of Environmental Protection are published on the Internet at the Department of Environmental Protection's home page at http://www.dep.state.fl.us/ under the link or button titled "Official Notices."

DEPARTMENT OF HEALTH

Board of Acupuncture

RULE TITLES:	RULE NOS.:
Acupuncture Examination	64B1-3.004
Licensure by Endorsement Through National Certification Action Taken	64B1-3.009

PURPOSE AND EFFECT: The Board proposes to review and discuss the existing language in these rules to determine if amendments are necessary.

SUBJECT AREA TO BE ADDRESSED: Acupuncture examination; Licensure by endorsement through national certification action taken.

SPECIFIC AUTHORITY: 456.017(1)(c), 457.104 FS.

LAW IMPLEMENTED: 456.017(1)(c), 457.104, 457.105 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Pamela King, Executive Director, Board of Acupuncture, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS NOT AVAILABLE.

DEPARTMENT OF HEALTH

Board of Pharmacy

RULE TITLES:	RULE NOS.:
Requirements for Automated Pharmacy Systems and Robotic Pharmacy Systems for Community Permittees	64B16-28.141
Class II Institutional Pharmacies – Automated Distribution and Packaging	64B16-28.605
Remote Medication Order Processing for Class II Institutional Pharmacies	64B16-28.606

PURPOSE AND EFFECT: The Board proposes to determine whether new rules are necessary to address advances in pharmacy practice.

SUBJECT AREA TO BE ADDRESSED: The proposed new rules define and set forth the requirements for automated and robotic pharmacy systems, and also address remote medication order processing for Class II institutional pharmacies.

SPECIFIC AUTHORITY: 465.005, 465.0155, 465.022 FS.

LAW IMPLEMENTED: 465.018, 465.019, 465.022, 465.026 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Danna Droz, Executive Director, Board of Pharmacy/MQA, 4052 Bald Cypress Way, Bin #C04, Tallahassee, Florida 32399-3254

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

64B16-28.141 Requirements for Automated Pharmacy Systems and Robotic Pharmacy Systems for Community Permittees.

(1) Definitions.

(a) "Automated pharmacy systems" mean mechanical systems that perform operations or activities, other than compounding or administration, relative to storage, packaging, dispensing, or distribution of medications, and which collects, controls, and maintains all transaction information.

(b) "Robotic pharmacy system" means a mechanical system controlled by a computer that performs operations or activities relative to the storage, labeling, and dispensing, and collects, controls, and maintains all transaction information.

(2) General Requirements – Duties and Responsibilities of Permit Holder.

(a) Documentation, as to the type of equipment, serial numbers, content, policies and procedures, and location, shall be maintained on site in the pharmacy for review by the agent of the Board upon request.

(b) The system shall be used only in settings where there is an established program of pharmaceutical care that ensures medication prescriptions are reviewed by a pharmacist in accordance with the established policies and procedures and good pharmacy practice.

(c) The system shall have adequate security systems and procedures, evidenced by written policies and procedures to:

1. Prevent unauthorized access.

2. Comply with federal and state regulations.

3. Maintain patient confidentiality.

(d) The filling/stocking of all medications in the system, shall be accomplished by qualified personnel under the supervision of a pharmacist. An electronic or hard copy record of medications filled into the system shall be maintained and include identification of the person filling the device. In addition, the product identification, lot number and expiration date must be available.

(e) Access to and limits on access to the automated system must be defined by policy and procedures and must comply with federal and state regulations. Proper identification and access control, including electronic password, biometric identification, or other coded identification, must be limited and authorized by the pharmacy manager.

(f) The pharmacy manager must:

1. Be able to stop or change access at any time.

2. Maintain a current and retrievable list of all persons who have access and the limits of that access.

3. Ensure that the access and the medications comply with federal and state regulations.

4. Ensure that the system is filled/stocked accurately and in accordance with established, and written policies and procedures.

Specific Authority 465.005, 465.0155, 465.022 FS. Law Implemented 465.018, 465.022, 465.026 FS. History–New _____.

64B16-28.605 Class II Institutional Pharmacies – Automated Distribution and Packaging.

(1) Definitions. As used herein, the following terms have the meanings indicated.

(a) "Automated medication system" means a robotic, mechanical or computerized device, not used for medication compounding, designed to:

1. Distribute medications in a licensed health care facility.

2. Package medications for final distribution by a pharmacist.

(b) "Centralized automated medication system" means an automated medication system located in a pharmacy from which medication is distributed or packaged for final distribution by a pharmacist.

(c) "Decentralized automated medication system" means an automated medication system that is located outside of a pharmacy in which medication is stored.

(d) "Distribution" means the process resulting in the ultimate provision of a drug to an individual authorized to administer medications and licensed as a health care provider in the state of Florida pursuant to an order issued by an authorized prescriber.

(e) "Override dose" means a dose of medication removed from a decentralized automated medication system prior to pharmacist review when the clinical status of the patient would be significantly compromised by the delay that would result

from such review so long as the medication has been designated as such by a medical staff committee discussed in (3) herein.

(f) "Low risk override doses" are medications determined to have a non-existent or low likelihood of drug allergy, drug interaction, dosing error, or adverse patient outcome, are designated low risk by a medical staff committee having oversight of the institution's medication use process, and may be removed from a decentralized automated medication system independent of pharmacist review of the medication order or clinical status of the patient.

(g) "Physician controlled doses" are medications distributed in an environment in which a physician controls the ordering, preparation, and administration of the medication.

(2) General Requirements for the Use of Automated Medication Systems.

(a) Records concerning transactions or operations must be maintained as provided in (8) herein.

(b) Pharmacy personnel designated by the consultant pharmacist of record control access to the system and the consultant has defined a method for delegating access to the system.

(c) A pharmacist must perform prospective drug use review and approve each medication order prior to administration of the medication. The following are exceptions to this requirement: the medication order meets the criteria for a dose (retrospective drug use review is required), low risk override doses, or physician controlled doses.

(d) The consultant pharmacist of record is responsible for providing that:

1. Patients have prompt access to all pharmacy services necessary for the provision of good pharmaceutical care as set forth in Chapter 465 and the rules promulgated thereto.

2. The system maintains the integrity of the information in the system and protects patient confidentiality.

3. A comprehensive program of Quality Assurance (QA) for the system is in place as established in (7) herein.

4. Policies and procedures are maintained relating to:

a. The operation of the system.

b. The training of personnel using the system.

c. Operations during system downtime.

d. Delegation of access to and removal of access from the system.

5. A process is established to ensure the security of the system.

(3) Medical Staff Committee for Decentralized Automated Medication Systems. The consultant pharmacist of record shall convene or identify a multidisciplinary committee, that includes a pharmacist, which is charged with oversight of the decentralized automated medication system, and which shall:

(a) Establish criteria and a process for determining which drugs may be utilized as starter doses in a decentralized automated medication system.

(b) Develop policies and procedures regarding the decentralized automated medication system.

(c) Assure that the system complies with this chapter.

(4) Filling of Automated Medication System.

(a) Medications in Automated Medication Systems shall be filled by a pharmacist or by a pharmacy technician supervised by the consultant pharmacist of record.

(b) When pharmacy technicians or pharmacists supervised by the consultant pharmacist of record fill an automated medication system, one of the following procedures must be followed:

1. A daily QA process (as described in (7) herein) shall be conducted by a pharmacist for medications placed or to be placed into an automated medication system.

2. A bar code verification, electronic verification, or similar process must be followed so as to assure appropriate product selection of medications placed or to be placed into an automated medication system. The utilization of a bar code or electronic verification system shall require an initial QA validation, followed by a monthly QA review by a pharmacist. In all circumstances, the pharmacist performing the QA review must maintain records (as provided in (8) herein) documenting that the QA process occurred and resulted in pharmacist approval of the medication filling or verification process.

(5) Return of medication to active stock is not permitted in an Automated Medication System; however, medication may be returned to a secure bin, a segregated and secure area of the pharmacy.

(6) Final Check of Medication for Centralized Automated Medication Systems. A pharmacist utilizing a centralized automated medication system may distribute patient specific medications within the licensed health care facility without checking each individual medication selected or packaged by the system, so long as:

(a) The initial medication order has been reviewed and approved by a pharmacist.

(b) The medication is distributed for subsequent administration by a health care professional permitted by Florida law to administer medication.

(c) A pharmacist either:

1. Performs a daily QA check (as described in (7) herein) of the integrity of the system that includes random sampling of the output and documents same.

2. A bar code or electronic verification (or similar) process exists for medications distributed using the centralized automated medication system. Bar code or electronic verification systems require an initial QA validation, followed by a monthly QA process by a pharmacist.

(d) The pharmacist performing the QA review maintains readily retrievable records (as provided in (8) herein) that the QA process occurred and resulted in pharmacist approval of the medication filling or verification process.

(7) Quality Assurance Program. The consultant pharmacist of record shall be responsible for providing that a QA program for the automated medication system is established which program shall provide for:

(a) Review of starter dose utilization.

(b) Investigation of medication errors related to the automated medication system.

(c) Review of discrepancies and transaction reports to identify patterns of inappropriate use and access.

(d) Review of the functioning of the system.

(e) Integration of the automated medication system quality assurance program with the overall continuous quality improvement program of the pharmacy as defined in Rule 64B16-27.300, F.A.C.

(f) Assurance that individuals working with the automated medication system receive appropriate training on operation of the system and procedures for system downtime.

(8) Record Keeping. The consultant pharmacist of record shall maintain records for the system in a readily retrievable manner for at least 2 years which shall at a minimum include:

(a) QA audits and system performance audits.

(b) Copies of reports and analyses generated as part of the QA program.

(c) Reports or databases related to level of access and changes in the level of access to the system.

(d) Transaction records for all controlled drugs dispensed or distributed for the preceding 2 years, and all other drugs or devices for the preceding 60 days.

(9) The consultant pharmacist of record shall assure compliance with the provisions of Chapter 465 and the rules promulgated thereto setting standards for packaging and labeling.

Specific Authority 465.005, 465.0155, 465.022 FS. Law Implemented 465.019, 465.022, 465.026 FS. History–New _____.

64B16-28.606 Remote Medication Order Processing for Class II Institutional Pharmacies.

(1) All pharmacists participating in remote medication order processing as provided in this rule shall be Florida licensed pharmacists.

(2) Definitions. The following words and terms, when used in this rule, shall have the following meanings, unless the context clearly indicates otherwise.

(a) "Remote Medication Order processing" includes any of the following:

1. Receiving, interpreting, or clarifying medication orders.

2. Data entering and transferring of medication order information.

3. Performing prospective drug use review.

4. Obtaining substitution authorizations.

5. Interpreting and acting on clinical data.

6. Performing therapeutic interventions.

7. Providing drug information.

8. Authorizing the release of a prescription drug for administration in a Class II Institutional Pharmacy.

(b) Prospective drug use review – An evaluation of medication orders and patient medication records for:

1. Over-utilization or under-utilization.

2. Therapeutic duplication.

3. Drug-disease contraindications.

4. Drug-drug interactions.

5. Incorrect drug dosage or duration of drug treatment.

6. Drug-allergy interactions.

7. Clinical abuse/misuse.

(3) Operational Standards.

(a) General requirements:

1. A Class II institutional pharmacy may outsource medication order processing to pharmacists at another location provided the pharmacist providing the remote medication order processing has access to sufficient patient information necessary for prospective drug use review and approval of medication orders.

2. If the pharmacist providing remote order processing is not an employee of the Class II institutional pharmacy, the Class II institutional pharmacy must have a written agreement or contract with the pharmacist or entity employing the pharmacist which outlines the services to be provided and delineates the responsibilities of each party including the manner by which compliance with federal and state laws and regulations governing the practice of pharmacy as well as state and federal medical privacy requirements will take place.The written contract or agreement must also outline the services to be provided and must require that the parties adopt policies and procedure which comply with section (b) below and the contract or agreement must provide that the parties share a common electronic file or have appropriate technology to allow access to sufficient patient information necessary for prospective drug use review and approval of medication orders.

(b) Policy and Procedures. A policy and procedures manual shall:

1. Be maintained at all sites involved in remote off site medication order processing be available for inspection.

2. Outline the responsibilities of each of the parties involved in remote medication order processing and shall include a list of the name, address, telephone numbers, and all license numbers of the pharmacists involved in remote medication order processing.

3. Include policies and procedures for:

a. Protecting the confidentiality and integrity of patient information.

b. Ensuring that pharmacists performing drug use reviews have access to appropriate drug information resources.

c. Ensuring that medical and nursing staff understand how to contact pharmacists responsible for drug use review and drug information related questions.

d. Maintaining appropriate records to identify the name(s), initials, or identification code(s) and specific activities of each person who performed any medication order processing.

e. Complying with federal and state laws and regulations.

f. Operating or participating in a continuous quality improvement program for pharmacy services designed to objectively and systematically monitor and evaluate the quality and appropriateness of patient care, pursue opportunities to improve patient care, and resolve identified problems.

g. Reviewing the written policies and procedures and documenting such review every year.

h. Assure that a pharmacist will perform the final check before a prescription drug is authorized to be released from the pharmacy.

(c) Records. All Class II Institutional Pharmacies involved in remote medication order processing shall maintain appropriate records which identify, by medication order, the name(s), initials, or identification code(s) of each person who performs a processing function for a medication order. Such records may be maintained in a common electronic file as long as the records are maintained in such a manner that the data processing system can produce a printout which lists the functions performed by each person for no less than the last two (2) years.

Specific Authority 465.005, 465.0155, 465.022 FS. Law Implemented 465.019, 465.022, 465.026 FS. History–New _____.

DEPARTMENT OF HEALTH

Board of Speech-Language Pathology and Audiology

RULE TITLE: RULE NO.:
Examination 64B20-2.005

PURPOSE AND EFFECT: The Board proposes to review the existing text in this rule to determine if amendments are necessary.

SUBJECT AREA TO BE ADDRESSED: Examination.

SPECIFIC AUTHORITY: 468.1135(4) FS.

LAW IMPLEMENTED: 456.017(1)(c), 468.1175 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Pamela E. King, Executive Director, Board of Speech-Language Pathology and Audiology, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS NOT AVAILABLE.

DEPARTMENT OF HEALTH

Board of Speech-Language Pathology and Audiology

RULE CHAPTER TITLE: RULE CHAPTER NO.:
Discipline 64B20-7

PURPOSE AND EFFECT: The Board proposes to review the existing language in the entirety of this chapter to determine if amendments and/or new rules are necessary.

SUBJECT AREA TO BE ADDRESSED: Discipline.

SPECIFIC AUTHORITY: 456.072(2)(f), 456.073(3),(4), 456.077, 456.078, 456.079(1), 468.1135(4), 456.013(7) FS.

LAW IMPLEMENTED: 456.013(7), 456.063, 456.072, 456.073, 456.076, 456.077, 456.078, 468.1145(2), 468.1135, 468.1295, 468.1296 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Pamela E. King, Executive Director, Board of Speech-Language Pathology and Audiology, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS NOT AVAILABLE.

DEPARTMENT OF FINANCIAL SERVICES

Division of State Fire Marshal

RULE CHAPTER TITLE: RULE CHAPTER NO.:
Explosives 69A-2
RULE TITLE: RULE NO.:
Construction Materials Mining Activities 69A-2.024

PURPOSE AND EFFECT: The purpose of the rule development proceedings is to provide forms and procedures under Sections 552.32-552.44, Florida Statutes, for Bonds and Letters of Credit.

The effect of this rule development will be to assist mining companies subject to Chapter 552, Florida Statutes, in complying with the Florida Construction Materials Mining Activities Administrative Recovery Act, Sections 552.32-552.44, Florida Statutes.

SUBJECT AREA TO BE ADDRESSED: Construction Materials Mining Activities, Administrative Recovery Act, Bonds and Letters of Credit, Sections 552.32-552.44, Florida Statutes.

SPECIFIC AUTHORITY: 552.38 FS.

LAW IMPLEMENTED: 552.38 FS.

IF REQUESTED AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE TIME, DATE AND PLACE SHOWN BELOW (IF NOT REQUESTED, A WORKSHOP WILL NOT BE HELD):

TIME AND DATE: 9:00 a.m., March 31, 2004

PLACE: 400 North Congress Avenue, Second Floor Conference Room, West Palm Beach, Florida

TIME AND DATE: 9:00 a.m., April 1, 2004

PLACE: Cape Coral Library, 921 S. W. 39th Terrace, Cape Coral, Florida 33914

Pursuant to the provisions of the Americans with Disabilities Act and Section 286.26, Florida Statutes, any person requiring special accommodations to participate in this program, please advise the Department at least 5 calendar days before the program by contacting: Millicent King, (850)413-3619, Fax (850)922-2553

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT IS: Terry Hawkins, Safety Program Manager, Bureau of Fire Prevention, Division of State Fire Marshal, 200 East Gaines Street, Tallahassee, FL 32399-0342, (850)413-3171, Fax (850)922-2553

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

69A-2.024 Construction Materials Mining Activities.

(1) through (13) No change.

(14) FLORIDA CONSTRUCTION MATERIALS MINING ACTIVITIES ADMINISTRATIVE RECOVERY ACT, SECTIONS 552.32-552.44, FLORIDA STATUTES; BONDS, LETTERS OF CREDIT.

(a) Any person seeking to obtain a new User of Explosives License or to renew an existing User of Explosives License pursuant to the provisions of Section 552.091(5)(a), Florida Statutes, and who is engaged in or intends to engage in the use of explosives in connection with construction materials mining activities, or any person seeking to obtain a new Construction Materials Mining Permit or to renew an existing Construction Materials Mining Permit issued pursuant to the provisions of Section 552.30, Florida Statutes, must post and maintain a bond as security on Form DFS-K3-#xxx which is hereby adopted and incorporated herein by reference, except as set forth in paragraph (d).

(b) Form DFS–K3-#xxx may be obtained from the Department of Financial Services, Division of State Fire Marshal, Bureau of Fire Prevention, 200 East Gaines Street, Tallahassee, Florida 32399-0342.

(c) Any bond which is on a form other than Form DFS-K3-#xxx is not acceptable and is void and of no effect.

(d) In lieu of the bond required in paragraph (a), a person referred to in paragraph (a) is permitted to obtain and maintain a letter of credit, which for purposes of this subsection shall be referred to as "Letter." If a Letter is obtained and maintained in place of a bond, the following provisions apply.

1. Except as provided in this subsection, the provisions of Chapter 675, Florida Statutes, including, but not limited to, the definitions contained in Section 675.103, Florida Statutes, are applicable to each Letter, each party to a Letter, and to this subsection.

2. The issuer of the Letter must be a financial institution chartered under the laws of the United States of America or of the State of Florida.

3. The beneficiary of each Letter shall be the Department of Financial Services on behalf of a prevailing party in an action for damages sustained under the Florida Construction Materials Mining Activities Administrative Recovery Act, Sections 552.32-552.44, Florida Statutes, if any person referred to in paragraph (a) fails to pay damages awarded within 30 days after a final order awarding damages is issued by an administrative law judge of the Division of Administrative Hearings, or within 30 days after the entry of an appellate mandate affirming a final order awarding damages.

4. The applicant for the Letter must be a person referred to in paragraph (a).

5.a. Each Letter must contain a condition of the undertaking.

b. The condition of the undertaking of each Letter is that the Letter shall specifically authorize recovery by the department on behalf of a prevailing party in an action for damages sustained under the Florida Construction Materials Mining Activities Administrative Recovery Act, Sections 552.32-552.44, Florida Statutes, in the event that the applicant for the Letter fails to pay damages awarded within 30 days after a final order awarding damages is issued by an administrative law judge of the Division of Administrative Hearings, or within 30 days after entry of an appellate mandate affirming a final order awarding damages.

6. Each Letter must be authenticated by a signature which is on file with the department or in accordance with the standard practices referred to in Section 675.108(5), Florida Statutes.

7. The original of each Letter, once issued, must be maintained in the custody of the department.

8.a. No Letter is permitted to contain a statement that it is revocable.

b. If a Letter contains a statement that it is revocable, such Letter is void and of no effect for purposes of complying with the Florida Construction Materials Mining Activities Administrative Recovery Act, Sections 552.32-552.44, Florida Statutes, or these rules.

9.a. Each Letter shall state that it is perpetual.

b. Each Letter shall be perpetual within the meaning of Section 675.106, Florida Statutes.

10.a. Each Letter must be replaced not later than 4 years and 6 months after the stated date of issuance or, if none is stated, after the actual date of issuance.

b. Failure to replace the Letter within the 4 years and 6 months period without providing a bond as permitted by paragraph (a) constitutes an immediate, serious danger to the public health, safety, and welfare, and shall result in an immediate final order of revocation of the licensee's or permittee's license or permit, and also constitutes grounds for the imposition of any other applicable penalty provided for in Chapter 552, Florida Statutes.

11.a. Each Letter shall be payable on or before the seventh day after presentation of a document evidencing satisfaction of the condition of the undertaking.

b. Presentation of a certified copy of a judgment awarding damages from an administrative law judge of the Division of Administrative Hearings under the Florida Construction Materials Mining Activities Administrative Recovery Act, Sections 552.32-552.44, Florida Statutes, or a certified copy of an appellate court mandate affirming such a judgment, together with an affidavit from an authorized department representative that such judgment has not been paid, constitutes sufficient evidence to satisfy the condition of the undertaking for payment under the Letter.

c. Authorized representatives of the department are the Chief Financial Officer acting as the State Fire Marshal, the department's Chief of Staff, any Deputy Chief Financial Officer acting on behalf of the Chief Financial Officer acting as the State Fire Marshal, the director of the Division of State Fire Marshal, the Chief of the Bureau of Fire Prevention, the Safety Program Manager of the Bureau of Fire Prevention, and any attorney employed by the department.

d. Payment under the Letter shall be made to the "Department of Financial Services."

e. After receipt of payment of the Letter, the department shall deposit the check and, upon clearance of such check, the department shall issue a check for the exact same amount as the payment under the Letter to the owner or holder of the judgment referenced in this subsection.

12.a. Each Letter shall state that it is transferable and assignable from the department to the department's transferee or assignee.

b. The department's transferee or assignee shall be the owner and holder of a judgment from an administrative law judge of the Division of Administrative Hearings providing for damages under the Florida Construction Materials Mining Activities Administrative Recovery Act, Sections 552.32-552.44, Florida Statutes, or a mandate affirming such a judgment, which the licensee or permittee has failed to pay within the time allotted in such Act.

13. Each Letter shall be governed by, and shall state that it is governed by, the laws of the State of Florida, regardless of the country, state, territory, or other location at which the Letter was applied for, requested, or issued.

14. Each Letter shall state that venue for any cause of action brought under the Letter in state court shall lie in the circuit court of the Second Judicial Circuit of Florida, in and for Leon County, and, if an action is brought under the laws of the United States of America, venue shall lie in the United States District Court for the Northern District of Florida, Tallahassee Division.

15. Each Letter is subject to approval by the department; however, the department shall not unreasonably withhold approval of any Letter which complies with these rules.

16. Once approved by the department, no Letter may be altered or amended in any manner except with written approval of the department.

(e)1. Each bond or letter of credit shall provide security for payment of any award against the user or permit holder in the initial amount of not less than $100,000.00, which amount shall be maintained at all times the user or permit holder engages in construction materials mining activities. If the user or permit holder wishes, such bond or letter of credit may be maintained in an amount that exceeds $100,000.00.

2. If an award is made pursuant to Section 552.40(7), Florida Statutes, and the respondent which is a user or permit holder fails to pay the damages within 30 days after the final order is issued or within 30 days after the entry of an appellate mandate affirming a final order awarding damages, and the award is paid from the bond or letter of credit provided for in Section 552.38, Florida Statutes, and this rule, the respondent shall immediately secure a replacement bond or letter of credit in the full sum of not less than $100,000.00.

3. The respondent against whom the award was made and the award paid from the bond or letter of credit shall not engage in construction materials mining activities without having secured an effective replacement bond or letter of credit.

(15)~~(14)~~ No change.

Specific Authority 552.38 FS. Law Implemented 552.38 FS. History–New 11-25-01, Amended 6-24-02, Formerly 4A-2.024, Amended _____.