

Section I  
 Notice of Development of Proposed Rules  
 and Negotiated Rulemaking

NONE

Section II  
 Proposed Rules

**DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES**

**Division of Administration**

RULE NO.:           RULE TITLE:  
 5A-21.001        Reimbursement of Educational Expenses for  
                           Veterinary Pathologists

PURPOSE AND EFFECT: The adoption of this rule will satisfy the rulemaking requirement imposed by s. 570.07(44), Florida Statutes, which was enacted during the 2025 Legislative Session.

SUMMARY: The proposed rule establishes guidelines for the reimbursement of educational expenses of qualified veterinary pathologists.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:**

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The rule does not create or impose any costs, and the Department’s economic analysis of the adverse impact or potential regulatory costs of the proposed rule did not exceed any of the criteria established in Section 120.541(2)(a), Florida Statutes.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 570.07(23), (44) FS.

LAW IMPLEMENTED: 570.07(44) FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAR.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Dr. Michael Short, State Veterinarian/Division Director, (850)410-0900; Fax: (850)410-0929; AnimalIndustry@FDACS.gov.

THE FULL TEXT OF THE PROPOSED RULE IS:

**5A-21.001 Reimbursement of Educational Expenses for Veterinary Pathologists.**

(1) Eligibility for Reimbursement.

(a) Qualified veterinary pathologists may seek reimbursement for educational expenses pursuant to s. 570.07(44), F.S., and in accordance with this rule.

(b) Reimbursement is subject to the availability of funding and will be provided until all available funds are exhausted.

(c) For purposes of this rule, “qualified veterinary pathologist” means a veterinarian who:

1. Graduated from a College of Veterinary Medicine accredited by the American Veterinary Medical Association or equivalent with a degree in veterinary medicine, and

2. Is enrolled in a department veterinary pathology residency program seeking board certification, or

3. Is board-certified in clinical or anatomic pathology; and

4. Has been a full-time employee or a full-time contract employee with the department at the Bronson Animal Disease Diagnostic Laboratory for at least 365 consecutive calendar days, and

5. Received a satisfactory performance evaluation and was not disciplined during the immediately preceding evaluation period.

(d) An otherwise eligible qualified veterinary pathologist who has received or who is receiving financial assistance from the Veterinary Medicine Loan Repayment Program established in 7 U.S.C. 3151a shall be ineligible to receive reimbursement pursuant to s. 570.07(44), F.S., and this rule.

(2) Requests for Reimbursement.

(a) A qualified veterinary pathologist may seek reimbursement of educational expenses pursuant to s. 570.07(44), F.S., by submitting the following information for each reimbursement request to the Bureau of Personnel Management on or after the individual’s employment date anniversary:

1. The individual’s name and position number.

2. The amount of reimbursement being requested.

3. The amount of any reimbursement or veterinary medicine student loan repayment assistance awarded previously, as well as the sources of those funds, and

4. Documentation showing the current balance of the individual’s outstanding veterinary medicine student loan.

(b) A qualified veterinary pathologist may be awarded reimbursement of education expenses pursuant to s. 570.07(44),

F.S., a maximum of three times while employed with the department. Each request for reimbursement must be made in accordance with paragraph (2)(a), and a period of at least 365 calendar days must elapse between reimbursements.

(c) The maximum reimbursement of educational expenses being requested in any year may not exceed \$25,000 or the total outstanding balance of the qualified veterinary pathologist's outstanding student loan, whichever is less. No qualified veterinary pathologist shall be reimbursed more than \$75,000 in total.

Rulemaking Authority 570.07(23), (44) FS. Law Implemented 570.07(44) FS. History—New .

NAME OF PERSON ORIGINATING PROPOSED RULE: Dr. Michael Short, State Veterinarian/Division Director  
 NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Commissioner of Agriculture, Wilton Simpson  
 DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 15, 2025  
 DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: July 29, 2025

**DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES**

**Division of Animal Industry**

RULE NOS.:      RULE TITLES:  
 5C-13.0035      Definitions  
 5C-13.004       Schedule of Fees

PURPOSE AND EFFECT: The rules are being developed to update the Bronson Animal Disease Diagnostic Laboratory's list of available tests and associated fees. The changes include adding testing and corresponding charges for each test within the new Aquaculture Section of the laboratory.

SUMMARY: The rulemaking updates tests offered by the Bronson Animal Disease Diagnostic Laboratory and associated fees to fall in line with national standards.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:**

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The Department's economic analysis of the adverse impact or potential regulatory costs of the proposed rule did not

exceed any of the criteria established in Section 120.541(2)(a), Florida Statutes. As part of this analysis, the Department relied on the fact that the testing offered at the Bronson Animal Disease Diagnostic Laboratory is an optional service provided, and there is no regulatory requirement that the laboratory must be used. Additionally, no interested party submitted additional information regarding the economic impact.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 570.07(23), 585.002(4), FS  
 LAW IMPLEMENTED: 585.61, FS

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAR.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Dr. Michael Short, State Veterinarian, (850)410-0900; Fax: 410-0929; Michael.Short@FDACS.gov; 407 South Calhoun Street M7, Tallahassee, Florida 32399-0800.

THE FULL TEXT OF THE PROPOSED RULE IS:

**5C-13.0035 Definitions.**

For the purpose of this rule chapter, the following definitions shall apply:

- (1) No change.
- (2) Food and Fiber animals – animal species commonly used as a food source or in food production. Species include cattle, swine, goats, sheep, poultry, captive cervids, alpacas, llamas, and rabbits. This definition does not include aquaculture species.
- (3) through (6) No change.

*Rulemaking Authority 570.07(23), 585.002(4) FS. Law Implemented 585.61 FS. History—New 1-16-18, \_\_\_\_\_.*

**5C-13.004 Schedule of Fees.**

(1) The schedule of fees for testing provided by the Division of Animal Industry are as provided in Table #1.

**Table #1**

<u>Aquaculture</u>		
<u>Test</u>	<u>Cost</u>	<u>Unit</u>
<u>Aquatic Acid Fast Stain</u>	<u>\$7.00</u>	<u>each specimen</u>
<u>Aquatic Aerobic Culture</u>	<u>\$26.00</u>	<u>each specimen</u>
<u>Aquatic Anaerobic Culture</u>	<u>\$25.00</u>	<u>each specimen</u>
<u>Aquatic MIC Susceptibility Panel -</u>	<u>\$28.00</u>	<u>each</u>

<u>Aerobic Bacteria only</u>		<u>specimen</u>
<u>Aquatic Bacterial ID by MALDI-TOF (per isolate)</u>	<u>\$17.00</u>	<u>each specimen</u>
<u>Aquatic Biopsy - first tissue specimen</u>	<u>\$50.00</u>	<u>each specimen</u>
<u>Aquatic Biopsy - each subsequent tissue specimen</u>	<u>\$15.00</u>	<u>each specimen</u>
<u>Aquatic Fungal and Oomycete (Water Mold) Culture</u>	<u>\$22.00</u>	<u>each specimen</u>
<u>Aquatic Fungal ID by MALDI-TOF (per isolate)</u>	<u>\$17.00</u>	<u>each specimen</u>
<u>Aquatic Gram Stain</u>	<u>\$5.00</u>	<u>each specimen</u>
<u>Aquatic Mycobacterium culture</u>	<u>\$25.00</u>	<u>each specimen</u>
<u>Aquatic Animal Necropsy (up to 5 animals/system; gross/histo plus culture and PCR - all testing in house)</u>	<u>\$100.00</u>	<u>each specimen</u>
<u>Large Aquatic Animal Necropsy Surcharge</u>	<u>Additional \$75</u>	<u>each specimen</u>
<u>Aquatic Necropsy in a Bottle (Microscopic examination, tissues submitted in fixative; up to 5 animals/system)</u>	<u>\$100.00</u>	<u>each specimen</u>
<u>Infectious Salmon Anemia Virus (ISAV) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Spring Viremia of Carp Virus (SVCV) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Koi Herpesvirus (KHV; CyHV-3) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Goldfish Hematopoietic Necrosis Virus (CyHV-2) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Viral Hemorrhagic Septicemia Virus (VHSV) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Megalocytivirus (MCV) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Tilapia Lake Virus (TiLV) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Betanodavirus / Viral Nervous Necrosis (VNN) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Perkinsus qPCR (Oyster Samples)</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Carp Edema Virus / Sleepy Koi Disease (CEV) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Shrimp qPCR Multiplex Panel - 10 pathogens</u>	<u>\$120.00</u>	<u>each specimen</u>
<u>Aquatic Bacterial ID by PCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Aquatic Fungal ID by PCR</u>	<u>\$35.00</u>	<u>each</u>

		<u>specimen</u>
<u>Aquatic Myxozoan Parasite ID by PCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Aquatic Microsporidian Parasite ID by PCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Epizootic Ulcerative Syndrome (Aphanomyces invadens) qPCR</u>	<u>\$35.00</u>	<u>each specimen</u>
<u>Water Quality Freshwater Panel - Ammonia, Nitrite, Nitrate, pH, Total Alkalinity, Total Hardness, Dissolved Oxygen, Chloride</u>	<u>\$41.00</u>	<u>each specimen</u>
<u>Water Quality Saltwater Panel - Ammonia, Nitrite, Nitrate, pH, Dissolved Oxygen, Salinity</u>	<u>\$31.00</u>	<u>each specimen</u>
<u>Water Quality - Chlorine, Free and Total</u>	<u>\$5.00</u>	<u>each specimen</u>
<u>Water Quality - Copper</u>	<u>\$7.00</u>	<u>each specimen</u>
<u>Water Quality- Sulfide</u>	<u>\$7.00</u>	<u>each specimen</u>
<u>Water Quality- Iron, Total and Ferrous</u>	<u>\$5.00</u>	<u>each specimen</u>
<u>Single Target PCR Test Not Otherwise Listed in Table #1</u>	<u>\$35.00</u>	<u>each specimen</u>

<b>Bacteriology</b>		
Test	Cost	Unit
Acid Fast Stain	\$7.00	each
Aerobic culture	\$10.00	per specimen
Anaerobic culture	\$12.00	per specimen
Antimicrobial susceptibility	\$10.00	per isolate
Campylobacter culture	\$12.00	per specimen
Contagious Equine Metritis culture	\$20.00	per swab
Clostridium FA	\$15.00	per specimen
Fungal culture	\$15.00	each specimen
Fungal Lactophenol Blue Stain identification	\$5.00	each specimen
Gram Stain	\$5.00	each specimen
Mycoplasma culture (Food and Fiber animal)	\$10.00	each specimen
Mycoplasma culture (Other animal)	\$15.00	each specimen

Mycobacterium culture	\$20.00	each specimen
Salmonella culture	\$15.00	each specimen

<b>Virology</b>		
Test	Cost	Unit
Bovine Viral <del>Diarrhea</del> <del>Diarrhea</del> cELISA (Antigen capture)	\$4.50	per specimen (1-5 specimens)
	\$3.50	per specimen (6-15 specimens)
	\$3.00	per specimen (>15 specimens)
BVD VN	\$10.00	per specimen
Canine Coronavirus IFA	\$20.00	per specimen
Canine Distemper IFA	\$20.00	per specimen
Canine Herpes IFA	\$20.00	per specimen
Canine Parvovirus IFA	\$20.00	per specimen
Ehrlichia-canis IFA	\$20.00	per specimen
Equine Rhinopneumonitis IFA	\$15.00	per specimen
Equine Rhinopneumonitis VN	\$12.00	per specimen
Equine Viral- Arteritis VN	\$12.00	per specimen
Feline Coronavirus (FIP) IFA	\$20.00	per specimen
Feline Leukemia virus IFA	\$20.00	per specimen
Fluorescent Antibody Test	\$15.00	per specimen
Infectious <del>Bovine</del> Rhinotracheitis VN	\$10.00	per specimen
Influenza A IFA	\$20.00	per specimen
Lyme Disease IFA	\$20.00	per specimen
Parainfluenza-3 (PI3) VN	\$10.00	per

		specimen
Potomac Horse Fever IFA	\$15.00	per specimen
Rabies ( <del>Other animal</del> )	\$40.00	per specimen
<del>Rocky Mountain Spotted Fever IFA</del>	<del>\$15.00</del>	<del>per specimen</del>
Respiratory <del>Syncytial</del> <del>Syneitial</del> Virus VN	\$10.00	per specimen
Vesicular Stomatitis VN (Indiana & New Jersey strains)	\$12.00	per strain
Virus Isolation	\$30.00	per specimen
<u>Single Target IFA Test Not Otherwise Listed in Table #1</u>	<u>\$20.00</u>	<u>Per specimen</u>
<u>Single Target FA Test Not Otherwise Listed in Table #1</u>	<u>\$15.00</u>	<u>Per specimen</u>

<b>Serology (Antibody Detection)</b>		
Test	Cost	Unit
Anaplasma cELISA	\$7.00	per specimen
Avian Influenza AGID	\$5.00	per specimen
Avian Influenza AGID – Surveillance*	\$0.00*	per specimen
Avian Influenza ELISA	\$2.00	per specimen
Avian Influenza ELISA – Surveillance*	\$0.00*	per specimen
Bluetongue AGID	\$7.00	per specimen
Bluetongue cELISA	\$7.00	per specimen
Bovine Leukosis Virus <u>ELISA</u> <del>AGID</del>	\$7.00	per specimen
Brucella abortus/suis – BAPA – Export	\$5.00	per specimen
Brucella abortus/suis – BAPA – Surveillance*	\$0.00*	per specimen
Brucella abortus/suis/ <u>melitensis</u> – Card – Export	\$5.00	per specimen
Brucella abortus/suis/ <u>melitensis</u> – Card – Surveillance*	\$0.00*	per specimen
Brucella abortus/suis – Rivonal – Export	\$5.00	per specimen
Brucella abortus/suis – Rivonal – Surveillance*	\$0.00*	per specimen
Brucella abortus/suis – RAP – Export	\$5.00	per specimen

Brucella abortus/suis – RAP – Surveillance**	\$0.00*	per specimen
Brucella abortus/suis – BRT	\$0.00*	per specimen
Brucella abortus/suis – HIRT	\$0.00*	per specimen
Brucella canis agglutination test	\$15.00	per specimen
Caprine Arthritis- Encephalitis (CAE)/AGID	\$7.00	per specimen
Equine Infectious Anemia AGID	\$7.00	per specimen
<u>Equine Infectious Anemia ELISA</u>	<u>\$7.00</u>	<u>per specimen</u>
Equine Infectious Anemia ELISA- STAT	\$15.00	per specimen
Equine Piroplasmosis – Babesia caballi cELISA	\$17.00	per specimen
Equine Piroplasmosis – Theileria equi (formerly Babesia equi) cELISA	\$17.00	per specimen
Johne’s ELISA	\$6.00	per specimen
Leptospirosis Micro – agglutination Test 5	\$15.00	per specimen
Mycoplasma gallisepticum SPA	\$3.00	per specimen
Mycoplasma synoviae SPA	\$3.00	per specimen
Neospora caninum cELISA	\$8.00	per specimen
Ovine Progressive Pneumonia (OPP)/AGID	\$7.00	per specimen
Pseudorabies Autolex*	\$0.00*	per specimen
Pseudorabies gB ELISA*	\$0.00*	per specimen
Pullorum disease (PD)/Fowl typhoid SPA	\$3.00	per specimen
<del>Synergistic Hemolysis Inhibition (SHI) test (Corynebacterium pseudotuberculosis antibody test)</del> Caseous Lymphadenitis and Pigeon Fever	\$12.00	per specimen
West Nile Virus (WNV) IgM cELISA	\$8.00	per specimen
*Avian Influenza Brucella and Pseudorabies testing provided at no charge for surveillance		

**Molecular Diagnostics (Antigen Detection)**

Test	Cost	Unit
Anaplasma maginale qPCR	\$25.00	per specimen
Avian Influenza qPCR (matrix)	\$30.00	per specimen poultry may be pooled up to 11 swabs
Avian Influenza qPCR (poultry H5 subtyping)**	\$0.00**	
Avian Influenza qPCR (poultry H7 subtyping)**	\$0.00**	pooled mosquitoes (up to 50)
<del>Arboviral Panel qPCR (Zika, Dengue, Chikungunya)</del>	<del>\$45.00</del>	
Bluetongue Virus qPCR	\$25.00	per specimen
Bluetongue/Epizootic Hemorrhagic Disease qPCR	\$30.00	per specimen
Border Disease virus qPCR	\$25.00	per specimen
Bovine Viral Diarrhea qPCR	\$25.00	per specimen
	\$30.00	pooled specimens (up to 25 ear notches and 50 serum)
Classical Swine Fever qPCR	\$45.00	per specimen
Epizootic Hemorrhagic Disease Virus qPCR	\$25.00	per specimen
Equine Herpes Virus-1 qPCR	\$30.00	per specimen
Equine Herpes Virus-1 qPCR (neurological pathotyping)	\$30.00	per specimen
Equine Herpes Virus-4 qPCR	\$30.00	per specimen
Equine Respiratory Panel	\$90.00	per specimen
Equine Rhinitis Virus A qPCR	\$30.00	per specimen
Equine Rhinitis Virus B qPCR	\$30.00	per specimen
Influenza A virus qPCR (mammalian)	\$30.00	per specimen
Influenza A virus qPCR (H5 subtyping)	\$30.00	per specimen
Influenza A virus qPCR (H7)	\$30.00	per

subtyping)		specimen
Infectious Salmon Anemia Virus qPCR	\$30.00	per specimen
Johne's qPCR	\$20.00	per specimen
	\$30.00	pooled specimens (up to 5)
Koi Herpes Virus Sph PCR	\$30.00	per specimen
Koi Herpes Virus TK PCR	\$30.00	per specimen
Newcastle Disease Virus qPCR (matrix)	\$30.00	per specimen
Newcastle Disease Virus qPCR (velogenic)**	\$0.00**	per specimen
Mycoplasma gallisepticum/Mycoplasma synoviae qPCR	\$25.00	per specimen
Spring Viremia of Carp PCR	\$30.00	per specimen
Tritrichomonas foetus qPCR	\$17.00	per specimen
	\$30.00	pooled specimens (up to 5)
Viral hemorrhagic septicemia virus qPCR	\$30.00	per specimen
Zika qPCR	\$30.00	pooled mosquitoes (up to 50)
Zika qPCR- Asian type	\$30.00	pooled mosquitoes (up to 50)
<u>Single Target PCR Test Not Otherwise Listed in Table #1</u>	<u>\$30.00</u>	<u>Per Test</u>

\*\* For poultry surveillance only

<b>Histopathology</b>		
Test	Cost	Unit
Biopsy (Microscopic examination)	\$40.00	first tissue specimen
	\$10.00	each subsequent tissue specimen

<b>Cytology</b>		
Test	Cost	Unit
Large/complex dissection	\$30.00	per animal
Necropsy in a bottle (Microscopic examination)	\$75.00	per animal
Slides/Blocks	\$15.00	per block

<b>Parasitology</b>		
Test	Cost	Unit
Baermann test, lungworm	\$8.00	per specimen
Cryptosporidium Direct fluorescent antigen	\$20.00	per specimen
Fecal centrifugation sucrose	\$10.00	per specimen
Fecal examination – direct smear	\$10.00	per specimen
Fecal occult blood	\$10.00	per specimen
Fecal sedimentation	\$8.00	per specimen
Giardia Direct fluorescent antigen	\$20.00	per specimen
<del>Giardia</del> Giardia Snap test (dogs and cats)	\$15.00	per specimen
Heartworm modified Knott's test	\$10.00	per specimen
McMaster's egg count	\$10.00	per specimen
Parasite identification	\$15.00	per specimen
Tick identification	\$15.00	per specimen
Trichomonas sp. culture	\$10.00	per specimen
Zinc sulfate floatation	\$10.00	per specimen

<b>Clinical Pathology</b>		
Test	Cost	Unit
CBC Food and Fiber animals (without differential)	\$10.00	per specimen
CBC Other mammals	\$15.00	per specimen
Comprehensive Diagnostic Panel	\$30.00	per specimen
Cytology & Fluid Chemistry Analysis	\$35.00	per specimen
Equine Chemistry Profile	\$20.00	per specimen
Fibrinogen	\$15.00	per

		specimen
Large Animal Profile	\$20.00	per specimen
Prothrombin Time/Activated Partial Thromboplastin PT/aPTT (dog/cat)	\$20.00	per specimen
T4/Cholesterol (Dog, Cat, Horse)	\$22.00	per specimen

Immunohistochemistry		
Test	Cost	Unit
Bovine Viral Diarrhea (ear notch)	\$25.00	per specimen
Chronic Wasting Disease	\$25.00	per specimen
Leptospira sp. (5-way)	\$25.00	per specimen
Scrapie	\$25.00	per specimen

Necropsy		
Test	Cost	Unit
Food and Fiber animal	\$100.00	per animal
Other animal	\$150.00 + cremation fee*	per animal
Non-Poultry (all birds not defined as poultry)	\$50.00 + cremation fee*	per bird
Poultry	\$50.00	per accession (accession may include up to 5 individual birds)
Forensics, Research and Insurance Necropsy (any species)	\$250.00 + cremation fee*	per animal
Brain removal & large, complex fresh tissue handling	\$30.00	per animal
OBEX/RPLN collection	\$30.00	per animal
Spinal cord removal	\$50.00	per animal
*Cremation Fees	\$50.00	< 30 lbs
	\$100.00	31 to 150 lbs
	\$200.00	>151 lbs

(2) through (3) No change.

(4) No portion of an animal’s body, ashes, collars, tissues or other articles will be returned following a lab service listed in Table #1 of subsection 5C-13.004(1), 5-13.004(1) F.A.C.

(5) No change.

Rulemaking Authority 570.07(23), 585.002(4) FS. Law Implemented 585.61 FS. History—New 12-25-84, Formerly 5C-13.04, Amended 11-27-88, 5-6-93, 2-21-95, 7-21-99, 7-4-02, 1-16-18, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: Dr. Michael A. Short, State Veterinarian, Director  
 NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Commissioner of Agriculture Wilton Simpson

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 9, 2025

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: December 12, 2025

**DEPARTMENT OF REVENUE**

**Property Tax Oversight Program**

RULE NO.:           RULE TITLE:

12D-7.016           Governmental Exemptions

PURPOSE AND EFFECT: The purpose of the proposed amendments to Rule 12D-7.016, F.A.C., is to reflect the update by the Federal Aviation Administration (FAA) to the definition of “fixed-base operator” as provided in FAA Order 5190.6B, Change 3.

SUMMARY: The proposed amendments update definitions and Federal Aviation Authority issued orders. These changes were made by the FAA in the process of compiling an Airport Compliance Manual.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:**

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: 1) no requirement for a SERC was triggered under Section 120.541(1), F.S.; and, 2) based on past experiences with activities for providing the public tax information and rules of this nature, the adverse impact or regulatory cost, if any, do not exceed nor would exceed any one of the economic analysis criteria in a SERC, as set forth in Section 120.541(2)(a), F.S.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 195.027(1) FS.

LAW IMPLEMENTED: 196.012, 196.199 FS

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW (IF NOT REQUESTED, THIS HEARING WILL NOT BE HELD):

DATE AND TIME: January 9, 2026, at 10:00 a.m.

PLACE: Room 1220, Building 2, Capital Circle Office Complex, 2450 Shumard Oak Blvd., Tallahassee, FL 32399

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 48 hours before the workshop/meeting by contacting: Mike Cotton at (850)617-8870. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Mike Cotton, Property Tax Oversight Program, telephone (850)617-8870 or email DORPTO@floridarevenue.com.

THE FULL TEXT OF THE PROPOSED RULE IS:

### **12D-7.016 Governmental Exemptions.**

(1) through (5) No change.

(6) Leasehold interests in governmentally owned real property used in an aeronautical activity as a full-service fixed-base operation which provides goods and services to the general aviation public in the promotion of air commerce are exempt from ad valorem taxation, provided the real property is designated as an aviation area which has aircraft taxiway access to an active runway for take-off on an airport layout plan approved by the Federal Aviation Administration.

(a) A “fixed-base operator” is a commercial entity an individual or firm operating at an airport and providing aeronautical general aircraft services, such as fueling, maintenance, storage, and ground and flight instruction, to the public. See Appendix 5, Federal Aviation Administration Authority Order 5190.6B, Change 3 5190.6A.

(b) An “aeronautical activity” is has been defined as any activity which involves, makes possible, or is required for the operation of aircraft, or that which contributes to or is required for the safety of such operations operation. See Appendix Z, Federal Aviation Administration Order 5190.6B Change 3, Authority Advisory Circular 150/5190-1A. The following examples are not considered aeronautical activities: ground

transportation (taxis, car rentals, limousines); hotels and motels; restaurants; barber shops; travel agencies and auto parking lots. *Rulemaking Authority 195.027(1), ~~213.06(1)~~ FS. Law Implemented 196.012, 196.199 FS. History—New 10-12-76, Formerly 12D-7.16, Amended 12-27-94, \_\_\_\_\_.*

NAME OF PERSON ORIGINATING PROPOSED RULE:

Mike Cotton

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Governor and Cabinet

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 17, 2025

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: September 8, 2025.

### **DEPARTMENT OF REVENUE**

#### **Property Tax Oversight Program**

RULE NO.: RULE TITLE:

12D-16.002 Index to Forms

PURPOSE AND EFFECT: The purpose of the proposed amendments to Rule 12D-16.002, F.A.C. (Index to Forms), is to incorporate form changes the Florida Legislature enacted in Chapter 2024-158, L.O.F., and Chapter 2025-208, L.O.F., to update the homestead exemption application, and amend forms used in administering the Truth in Millage requirements.

SUMMARY: The proposed amendments to amend Form DR-504AFH, Ad Valorem Tax Exemption Application and Return for Multifamily Project and Affordable Housing Property, is to update the form based on revisions to the existing nonprofit land lease exemption and the newly constructed multifamily project exemption, and to add two exemptions for multifamily projects on state-owned land and new multifamily projects on government-owned land. These changes incorporate section 16 of Chapter 2024-158, L.O.F., and sections 16 through 20 of Chapter 2025-208, L.O.F., amending section 196.1978, and creating sections 196.19781 and 196.19782, F.S.

The proposed amendments to the form DR-501, Original Application for Homestead and Related Tax Exemptions, to update how the additional homestead exemption is adjusted annually based on an increase to the Consumer Price Index.

The proposed amendments to forms used in administering the Truth in Millage requirements is to clarify that the information to be completed by taxing authorities, to remove obsolete critical capital outlay or critical operating needs and specific year references in the forms, to clarify the levy of the voted debt service millage, and to provide the required rule references to forms mentioned within a form for Forms, DR-420, Certification of Taxable Value, DR-420DEBT, Certification of Voted Debt Millage, DR-420MM, Maximum Millage Levy Calculation, Final Disclosure, DR-420MM-P, Maximum Millage Levy Calculation, Preliminary Disclosure, DR-420TIF, Tax Increment Adjustment Worksheet, DR-420S, Certification

of School Taxable Value, DR-421, Certification for Taxing Authorities that do not Levy Ad Valorem Taxes, DR-422, Certification of Final Taxable Value, DR-422DEBT, Certification of Final Voted Debt Millage, DR-428B, Maximum Millage Calculation, General Information for Fiscal Year 2009-10 and Thereafter (Repeal), DR-487, Certification of Compliance, DR-487V, Vote Record for Final Adoption of Millage Levy.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:**

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: 1) no requirement for a SERC was triggered under Section 120.541(1), F.S.; and, 2) based on past experiences with activities for providing the public tax information and rules of this nature, the adverse impact or regulatory cost, if any, do not exceed nor would exceed any one of the economic analysis criteria in a SERC, as set forth in Section 120.541(2)(a), F.S.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

**RULEMAKING AUTHORITY:** 95.18(3), 192.001(18), 193.085(4)(a), (b), 193.091(3)(b), 193.114(1), (6), 193.1142(1), 193.122(1), (2), 193.155(8)(f), (h), 193.1556(2), 193.461(3)(a), (e), 193.501(8), (9), 193.625(3)(a), 194.011(3), 194.014, 194.034(1)(b), (c), (2), 194.037(3), 195.002(2), 195.027(1), (4), 195.087(1)(a), (2), 196.011(1), (5), (6), 196.075(4)(d), (5), 196.101(4)(c), 196.121(1), 196.173(6)(a), 196.1975(4)(c), 196.1978, 197.1979, 196.198, 196.1983, 196.1995(8), 197.2423(3), 197.2425, 197.319, 197.323, 197.3632(5)(b), 197.3635, 197.552, 200.065(1), (5), 200.069, 218.12(12), 218.125(2), 218.135(2), 218.26(1) FS.

**LAW IMPLEMENTED:** 95.18, 136.03, 145.10(2), 145.11(2), 189.012, 192.001(18), 193.011(8), 193.023, 193.052, 193.075, 193.085, 193.092, 193.114, 193.1142, 193.122, 193.155, 193.1554, 193.1555, 193.1556, 193.461, 193.481, 193.501, 193.503, 193.621, 193.625, 193.703, 194.011, 194.014, 194.032, 194.034, 194.035, 194.037, 194.171, 194.181, 194.301(2)(b), 195.002, 195.022, 195.027(4), 195.073, 195.087, 196.011, 196.012(13), 196.015, 196.031, 196.075, 196.082, 196.092, 196.095, 196.101, 196.121, 196.131, 196.141, 196.151, 196.161(1)(a), 196.173, 196.183, 196.193,

196.195, 196.196, 196.1961, 196.197, 196.1975, 196.1977, 196.1978, 196.19781, 196.19782, 196.1979, 196.198, 196.1983, 196.199, 196.1995, 196.2001, 196.2002, 196.202, 196.24, 196.26, 197.182, 197.222, 197.2423, 197.2425, 197.252, 197.2524, 197.262, 197.319, 197.322(1), 197.323, 197.3632, 197.3635, 197.373, 197.412, 197.413, 197.417(1), 197.432, 197.443, 197.492, 197.502, 197.542, 197.552, 200.065, 200.068, 200.069, 200.071, 200.081, 218.12, 218.125, 218.135, 218.23, 218.63, 218.66(2), 218.67 FS., ss. 9(b), 12 of Article VII of Florida Constitution.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW (IF NOT REQUESTED, THIS HEARING WILL NOT BE HELD):

DATE AND TIME: January 9, 2026, at 10:00 a.m.

PLACE: Room 1220, Building 2, Capital Circle Office Complex, 2450 Shumard Oak Blvd., Tallahassee, FL 32399

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 48 hours before the workshop/meeting by contacting: Mike Cotton at (850)617-8870. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Mike Cotton, Property Tax Oversight Program, telephone (850)617-8870 or email DORPTO@floridarevenue.com.

THE FULL TEXT OF THE PROPOSED RULE IS:

**12D-16.002 Index to Forms.**

(1) The following paragraphs list the forms adopted by the Department of Revenue. A copy of these forms may be obtained from the Department's website at floridarevenue.com/property/forms, or by writing to: Property Tax Oversight Program, Department of Revenue, Post Office Box 3000, Tallahassee, Florida 32315-3000. Persons with hearing or speech impairments may call the Florida Relay Service at 711, 1(800)955-8770 (Voice) and 1(800)955-8771 (TTY). The Department of Revenue adopts, and incorporates by reference in this rule, the following forms and instructions:

	Form Number	Form Title	Effective Date
	(2) through (4) No Change.		
	(5)(a) No change.		
(b)	DR-	The 20XX Ad Valorem	02/26

	403E B	Assessment Rolls Exemption Breakdown of _____ County, Florida (r. <del>01/26 02/24</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19029+6344">https://www.flrules.org/Gateway/reference.asp?No=Ref-19029+6344</a>	<del>02/24</del>
(6)(a) No Change.			
(b)	DR-403 V	The 20XX Revised Recapitulation of the Ad Valorem Assessment Roll Value Data (r. <del>01/26 02/24</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19030+6345">https://www.flrules.org/Gateway/reference.asp?No=Ref-19030+6345</a>	<del>02/26 02/24</del>
(7) through (12) No change.			
(13)(a)	DR-420	Certification of Taxable Value (r. <del>01/26 5/12</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19031+01751">https://www.flrules.org/Gateway/reference.asp?No=Ref-19031+01751</a>	<del>02/26 11/12</del>
(b)	DR-420 DEB T	Certification of Voted Debt Millage (r. <del>01/26 6/10</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19032+01752">https://www.flrules.org/Gateway/reference.asp?No=Ref-19032+01752</a>	<del>02/26 11/12</del>
(c) No change.			
(d)	DR-420 MM	Maximum Millage Levy Calculation, Final Disclosure (r. <del>01/26 5/12</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19033+01754">https://www.flrules.org/Gateway/reference.asp?No=Ref-19033+01754</a>	<del>02/26 11/12</del>
(e)	DR-420 MM- P	Maximum Millage Levy Calculation, Preliminary Disclosure (r. <del>01/26 5/12</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19034+01755">https://www.flrules.org/Gateway/reference.asp?No=Ref-19034+01755</a>	<del>02/26 11/12</del>
(f)	DR-420S	Certification of School Taxable Value (r. <del>01/26 5/11</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19035+01756">https://www.flrules.org/Gateway/reference.asp?No=Ref-19035+01756</a>	<del>02/26 11/12</del>
(g)	DR-420T IF	Tax Increment Adjustment Worksheet (r. <del>01/26 6/10</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19036+01757">https://www.flrules.org/Gateway/reference.asp?No=Ref-19036+01757</a>	<del>02/26 11/12</del>

(14)(a)	DR-421	Certification for Taxing Authorities That Do Not Levy Ad Valorem Taxes (r. <del>01/26 11/12</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19037+01758">https://www.flrules.org/Gateway/reference.asp?No=Ref-19037+01758</a>	<del>02/26 11/12</del>
(b)	DR-422	Certification of Final Taxable Value (r. <del>01/26 5/11</del> ) <a href="http://www.flrules.org/Gateway/reference.asp?No=Ref-19038+01759">http://www.flrules.org/Gateway/reference.asp?No=Ref-19038+01759</a>	<del>02/26 11/12</del>
(c)	DR-422 DEB T	Certification of Final Voted Debt Millage (r. <del>01/26 5/11</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19039+01760">https://www.flrules.org/Gateway/reference.asp?No=Ref-19039+01760</a>	<del>02/26 11/12</del>
(d)	DR-428 B	<del>Maximum Millage Calculation, General Information for Fiscal Year 2009-10 and Thereafter (r. 5/11)</del> <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-01761">https://www.flrules.org/Gateway/reference.asp?No=Ref-01761</a>	<del>11/12</del>
(d)(e) No change.			
(e)(f) No change.			
(f)(g) No change.			
(15) through (23) No change.			
(24)(a) through (f) No change.			
(25)(a)(g)	DR-487	Certification of Compliance (r. <del>01/26 01/25</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19040+18024">https://www.flrules.org/Gateway/reference.asp?No=Ref-19040+18024</a>	<del>02/26 04/25</del>
(b)(h)	DR-487 V	Vote Record for Final Adoption of Millage Levy (r. <del>01/26 06/10</del> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19041+01780">https://www.flrules.org/Gateway/reference.asp?No=Ref-19041+01780</a>	<del>02/26 11/12</del>
(25) through (26) renumbered (26) through (27) No change.			
(28)(27)(a)	DR-489E B	The 20XX Ad Valorem Assessment Rolls Exemption Breakdown of _____	<del>02/26 02/24</del>

		County, Florida (r. <u>01/26 02/24</u> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19042+16346">https://www.flrules.org/Gateway/reference.asp?No=Ref-19042+16346</a>	
(b) No change.			
(c)	DR-489 V	The 20XX Preliminary Recapitulation of the Ad Valorem Assessment Roll, Value Data (r. <u>01/26 02/24</u> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19043+16347">https://www.flrules.org/Gateway/reference.asp?No=Ref-19043+16347</a>	<u>02/26 02/24</u>
(28) through (36) renumbered (29) through (37) No change.			
( <del>38</del> ) ( <del>37</del> )(a)	DR-501	Original Application for Homestead and Related Tax Exemptions (r. <u>01/26 08/25</u> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19044+18435">https://www.flrules.org/Gateway/reference.asp?No=Ref-19044+18435</a>	<u>02/26 08/25</u>
(b) through (k) No change.			
<del>(39)</del> ( <del>38</del> ) No change.			
<del>(40)</del> ( <del>39</del> )(a) No change.			
(b)	DR-504 AFH	Ad Valorem Tax Exemption Application and Return for <del>Multifamily Project and Affordable Housing Property</del> (r. <u>01/26 08/25</u> ) <a href="https://www.flrules.org/Gateway/reference.asp?No=Ref-19045+18437">https://www.flrules.org/Gateway/reference.asp?No=Ref-19045+18437</a>	<u>02/26 08/25</u>
(c) through (g) No change.			
(40) through (59) renumbered (41) through (60) No change.			

*Rulemaking Authority 95.18(3), 192.001(18), 193.085(4)(a), (b), 193.091(3)(b), 193.114(1), (6), 193.1142(1), 193.122(1), (2), 193.155(8)(f), (h), 193.1556(2), 193.461(3)(a), (e), 193.501(8), (9), 193.625(3)(a), 194.011(3), 194.014, 194.034(1)(b), (c), (2), 194.037(3), 195.002(2), 195.027(1), (4), 195.087(1)(a), (2), 196.011(1), (5), (6), 196.075(4)(d), (5), 196.101(4)(c), 196.121(1), 196.173(6)(a), 196.1975(4)(c), 196.1978, 197.1979, 196.198, 196.1983, 196.1995(8), 197.2423(3), 197.2425, 197.319, 197.323, 197.3632(5)(b), 197.3635, 197.552, 200.065(1), (5), 200.069, 218.12(12), 218.125(2), 218.135(2), 218.26(1) FS. Law Implemented 95.18, 136.03, 145.10(2), 145.11(2), 189.012, 192.001(18), 193.011(8), 193.023, 193.052, 193.075, 193.085, 193.092, 193.114, 193.1142, 193.122, 193.155, 193.1554, 193.1555, 193.1556, 193.461, 193.481, 193.501, 193.503, 193.621, 193.625, 193.703, 194.011, 194.014, 194.032, 194.034, 194.035, 194.037, 194.171, 194.181, 194.301(2)(b), 195.002, 195.022, 195.027(4), 195.073, 195.087, 196.011, 196.012(13), 196.015, 196.031, 196.075, 196.082, 196.092, 196.095, 196.101, 196.121, 196.131, 196.141, 196.151, 196.161(1)(a),*

*196.173, 196.183, 196.193, 196.195, 196.196, 196.1961, 196.197, 196.1975, 196.1977, 196.1978, 196.19781, 196.19782, 196.1979, 196.198, 196.1983, 196.199, 196.1995, 196.2001, 196.2002, 196.202, 196.24, 196.26, 197.182, 197.222, 197.2423, 197.2425, 197.252, 197.2524, 197.262, 197.319, 197.322(1), 197.323, 197.3632, 197.3635, 197.373, 197.412, 197.413, 197.417(1), 197.432, 197.443, 197.492, 197.502, 197.542, 197.552, 200.065, 200.068, 200.069, 200.071, 200.081, 218.12, 218.125, 218.135, 218.23, 218.63, 218.66(2), 218.67 FS., ss. 9(b), 12 of Article VII of Florida Constitution. History—New 10-12-76, Amended 4-11-80, 9-17-80, 5-17-81, 1-18-82, 4-29-82, Formerly 12D-16.02, Amended 12-26-88, 1-9-92, 12-10-92, 1-11-94, 12-27-94, 12-28-95, 12-25-96, 12-30-97, 12-31-98, 2-3-00, 1-9-01, 12-27-01, 1-20-03, 1-26-04, 12-30-04, 1-16-06, 10-2-07, 3-30-10, 11-1-12, 9-10-15, 4-5-16, 6-14-16, 1-9-17, 9-19-17, 1-17-18, 4-10-18, 9-17-18, 7-9-19, 12-7-20, 10-26-21, 11-11-21, 6-13-22, 10-30-22, 11-20-22, 7-18-23, 11-26-23, 2-8-24, 4-27-25, 8-28-25, \_\_\_\_\_.*

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Mike Cotton  
NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Governor and Cabinet  
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 17, 2025  
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: September 26, 2025

**DEPARTMENT OF REVENUE  
Property Tax Oversight Program**

RULE NOS.:      RULE TITLES:  
12D-17.001      Scope  
12D-17.002      Definitions  
12D-17.003      Truth in Millage ("TRIM") Compliance  
12D-17.0035      Instructions and Calculations  
12D-17.004      Taxing Authority's Certification of Compliance; Notification by Department  
12D-17.005      Taxing Authorities in Violation of Section 200.065, Florida Statutes  
12D-17.006      Notification of Noncompliance;  
12D-17.007      Withholding and Escrow of State Revenue Sharing Funds  
12D-17.007      Taxing Authorities Failing to Timely File Certification; Forfeiture of State Revenue Sharing Funds  
12D-17.008      Computation of Time  
12D-17.009      Tax Roll Approval; Extended Time Frames; Method of Adjustment of Millage  
12D-17.010      Certification of Compliance and Application  
PURPOSE AND EFFECT: The purpose of the proposed amendments to Rule Chapter 12D-17, Truth in Millage ("TRIM") Compliance, is to repeal obsolete rule provisions and references, update references, incorporate forms by reference, provide property appraisers the method to submit the TRIM Compliance Package using the Department's OASYS

Electronic Truth in Millage (eTRIM) internet-based system, and to clarify the TRIM compliance process.

SUMMARY: The proposed amendments: (1) remove the obsolete rule reference to Chapter 12-10, F.A.C., from Rule 12D-17.001, F.A.C.; (2) update terms used in Chapter 12D-17 and remove obsolete terms no longer used from Rule 12D-17.002, F.A.C.; (3) incorporate forms and add eTRIM to the submission process, in Rule 12D-17.003, F.A.C.; (4) provide for calculations of budget information by school districts in Rule 12D-17.0035, F.A.C.; (5) provide instructions for taxing authorities and school districts to submit forms in the compliance process to the Department, provide for the electronic Truth in Millage system for completing requirements, and provide for the incorporation of forms by reference in Rule 12D-17.004, F.A.C.; (6) include updates to language in Rule 12D-17.005, F.A.C.; (7) update process for disbursement and provide for incorporation of referenced forms in Rule 12D-17.006, F.A.C.; (8) remove obsolete references to Chapter 12-10, F.A.C., as revised, and provide for the incorporation by reference of forms in Rule 12D-17.007, F.A.C.; (9) provide clarity by removing archaic language from Rule 12D-17.008, F.A.C.; (10) allow for sending TRIM notices electronically in Rule 12D-17.009, F.A.C.; and (11) provide for the incorporation by reference of forms in Rule 12D-17.010, F.A.C.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: 1) no requirement for a SERC was triggered under Section 120.541(1), F.S.; and, 2) based on past experiences with activities for providing the public tax information and rules of this nature, the adverse impact or regulatory cost, if any, do not exceed nor would exceed any one of the economic analysis criteria in a SERC, as set forth in Section 120.541(2)(a), F.S.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 195.027(1), 218.26(1) FS.

LAW IMPLEMENTED: 129.03, 192.048, 193.1142, 195.002, 200.001, 200.065, 200.068, 218.21, 218.23, 218.26(4), 218.33, 218.63, 1011.62 FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW (IF NOT REQUESTED, THIS HEARING WILL NOT BE HELD):

DATE AND TIME: January 9, 2026, at 10:00 a.m.

PLACE: Room 1220, Building 2, Capital Circle Office Complex, 2450 Shumard Oak Blvd., Tallahassee, FL 32399

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 48 hours before the workshop/meeting by contacting: Mike Cotton at (850)617-8870. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Mike Cotton, Property Tax Oversight Program, telephone (850)617-8870 or email DORPTO@floridarevenue.com.

THE FULL TEXT OF THE PROPOSED RULE IS:

**12D-17.001 Scope.**

(1) No change.

(2) In the event the taxing authority does not fulfill these requirements, ~~then~~ under the provisions of Sections ~~200.065(13)~~ ~~200.065(12)~~, 218.23(1) and 218.63(2), F.S., the taxing authority ~~will shall~~ not receive its share of state revenue sharing funds and ~~will shall~~ be subject to forfeiture of such funds. ~~In such event, the Department will withhold and esrow state revenue sharing funds pursuant to this rule and Chapter 12-10, F.A.C.~~

(3) No change.

(4) The Executive Director, or the Executive Director's designee, ~~must shall~~ make determinations of compliance with the Truth in Millage ("TRIM") laws and ~~must shall~~ otherwise administer the provisions of Chapters 200 and 218, F.S.

(5) Nothing contained in this rule chapter ~~will shall~~ serve to authorize or extend any millage in excess of the maximum millage authorized by law. See, for example, Sections 125.01(1)(q), 200.071, 200.081 and 200.091, F.S., and Article VII, section 9(b), Florida Constitution.

*Rulemaking Authority 195.027(1), ~~213.06(1)~~, 218.26(1) FS. Law Implemented 195.002, 200.065, 200.068, 218.21, 218.23, 218.63 FS. History--New 6-20-91, Amended 10-30-91, \_\_\_\_\_.*

**12D-17.002 Definitions.**

(1) The definitions applicable under this rule chapter ~~are~~ given the same meanings as the definitions provided in Sections 192.001, 197.102, 200.001(8) and 218.21, Florida Statutes.

~~shall be those set forth at Section 200.001(8) Florida Statutes, and Rules 12D-1.002 and 12-10.002, F.A.C.~~

(2) In addition, the following definitions apply:

(a)1. “Adjacent to,” when used in reference to newspaper advertisements, means next to, touching or contiguous either at the sides or at the corners. This term includes advertisements placed adjacent either on the same page or adjoining pages with a crease separating them, so that the advertisements may be seen to be adjacent with the newspaper laid open upon a flat surface. The term ~~does shall~~ not include advertisements placed on opposite sides of the same page with the edge of a page separating them.

2. When used in reference to an online advertisement, adjacent to means the advertisements must appear on one webpage, next to, touching or contiguous either at the sides or at the corners. If advertisements are posted using weblinks, the advertisements should appear adjacent to one another, visible on one page. Separate links leading to separate advertisements should not be used.

(b) “Certification date” means the date of certification by the property appraiser to each taxing authority within the county of the taxable value within each taxing authority on the Certification of Taxable Value (form DR-420) or Certification of School Taxable Value (form DR-420S) (form ~~Form~~ DR-420 or DR-420S, incorporated by reference in Rule 12D-16.002, F.A.C.) ~~or Form DR-420S~~, or July 1, whichever is later. The certification date ~~is shall be~~ day 1, the day from which other significant dates regarding TRIM compliance are calculated.

(c) through (d) No change.

(e) “Filing,” “filed,” or “file” means submission of the TRIM Compliance Package through the Department’s Oversight and Assistance System (OASYS) electronic portal using the Truth in Millage (eTRIM) application at <https://eportal.oasys.floridarevenue.com/>.

(f) ~~(e)~~ “Final millage” ~~or “finally adopted millage”~~ means the millage finally adopted by a taxing authority pursuant to Section 200.065(2)(d), F.S.

(g) ~~(f)~~ “Final budget” means the budget finally adopted by a taxing authority pursuant to Section 200.065(2)(d), F.S.

(g) “Filing,” “filed,” or “file” means mailing and postmark or actual delivery to the following address:

<b>Mailing</b>	<b>or</b>	<b>Overnight Delivery</b>
Department of Revenue		Department of Revenue
TRIM Compliance		TRIM Compliance
Post Office Box 3000		2450 Shumard Oak Boulevard, Room 2 3200
Tallahassee, Florida 32315 3000		Tallahassee, Florida 32399 0126
(850)617 8919		

(h) “Fiscal year” means the 12-month period for local

governments which begins October 1 and ends September 30.

(i) ~~(h)~~ “Operating expenditures” means all moneys of the taxing authority, including dependent special districts, which were or could be either expended during the applicable fiscal year, or retained as a balance for future spending in the fiscal year. The term ~~does shall~~ not include those moneys held in or used in trust, agency, or internal service funds, or expenditures of bond proceeds for capital outlay or for advanced refunded debt principal.

(i) through (m) Renumbered as (j) through (n). No change.

(o) ~~(n)~~ “Taxing authority” includes, but is not limited to, any county, municipality, authority, special district as defined in Section ~~165.031(7)~~ ~~165.031(5)~~, F.S., or other public body of the state, any school district, library district, neighborhood improvement district created pursuant to the Safe Neighborhoods Act, metropolitan transportation authority, municipal service taxing or benefit unit (MSTU or MSBU), or water management district created under Section 373.069, F.S.

(o) through (p) Renumbered as (p) through (q) No change.

(r) ~~(q)~~ “TRIM notice” means the Notice of Proposed Property Taxes, (form ~~Form~~ DR-474, incorporated by reference in Rule 12D-16.002, F.A.C.), required by Sections 200.069 and 200.065(2)(b), F.S., required to be sent mailed by a property appraiser within 55 days of the certification date or 10 days after the tax roll is approved or the interim roll procedures under Section 193.1145, F.S., are instituted, whichever is later.

(s) “TRIM Compliance Package” means the set of documents that each taxing authority must submit to the Department to certify that they followed the TRIM requirements under Chapter 200, F.S.

(t) ~~(r)~~ “Unit of local government” means a county or municipal government, but ~~does shall~~ not include any special districts as defined by Section 165.031(7) or Chapters 189 and 218, F.S.

*Rulemaking Authority 195.027(1), 218.26(1) FS. Law Implemented 192.048(1)(a), 195.002, 200.001(8), 200.065, 200.068, 218.21, 218.23, 218.33, 218.63 FS. History—New 6-20-91, Amended 12-27-94, 12-25-96, 6-13-22, 3-27-25, \_\_\_\_\_.*

**12D-17.003 Truth in Millage (“TRIM”) Compliance.**

(1) It is the responsibility of the taxing authority to notify the Department, ~~at the address stated in this rule chapter~~, of its name, email address, mailing address, and the name of the person or official who is to receive all Truth in Millage (“TRIM”) correspondence using the OASYS eTRIM system to add or update information. The Department ~~will may~~ use the information address on file by May 1 of each year to send ~~in sending~~ out any forms and associated correspondence by June 1 of that year.

(2) Compliance with this rule chapter ~~by shall be necessary in order for~~ a taxing authority is necessary to be considered in

compliance with Section 200.065, F.S. For purposes of this rule chapter, ~~day 1 is the certification date, which shall be day 1, shall be the date of certification of the taxable value by the property appraiser on Form DR-420, or July 1, whichever is later.~~

(3) A taxing authority other than a school district must:

(a) Compute a proposed millage rate using not less than 95 percent of the taxable value certified to it pursuant to Section 200.065(1), F.S. For purposes of the calculation of the proposed millage rate by a special district, the determination by the Department of Commerce pursuant to Chapter 189, F.S., of the dependent or independent status of the district ~~is shall~~ be prima facie evidence of such status. Principal taxing authorities (counties and cities) ~~must shall~~ use 95 percent of the taxable value in each district or unit in which a millage is levied. Multicounty taxing authorities ~~must shall~~ use 95 percent of the taxable value within their jurisdiction in each county in which the millage is levied.

(b) Advise the property appraiser, on ~~form Form~~ DR-420, of its proposed millage rate, of its rolled-back rate computed pursuant to Section 200.065(1), F.S., and of the date, time and place at which a public hearing will be held to consider the proposed millage rate and the tentative budget. This advisement ~~must shall~~ be made within 35 days of the certification date. If the taxing authority fails to timely provide such information, as required by Section 200.065(2)(b), F.S., it ~~will shall~~ be prohibited from levying a millage rate greater than the rolled-back rate. One ~~form Form~~ DR-420 ~~must shall~~ be prepared for operating millage for each county, each special district, each municipality, and each taxing authority subordinate to a county or municipality. For each multicounty taxing authority, one ~~form Form~~ DR-420 ~~must shall~~ be prepared for each county in which the operating millage is levied. The property appraiser is required to ~~send mail the notice of proposed property taxes, the TRIM notice, within 55 days after the certification date. This notice serves as the notice of the tentative millage and budget hearing.~~

(c) Hold a public hearing on the tentative millage rate and budget, on or after 10 days after ~~sending the mailing of the TRIM notice and within 80 days but not earlier than 65 days~~ after the certification date, scheduled as required by Section ~~200.065(2)(c) 200.065(2)(e)2~~, F.S.

(d) through (e) No change.

(f) Certify the adopted millage to the property appraiser and the tax collector, submitting copies of the resolutions or ordinances. These submissions ~~must shall~~ be made within 3 days from the date of the final budget hearing and thus within 101 days of the certification date.

(g) Execute the Certification of Final Taxable Value, (~~form Form~~ DR-422, incorporated by reference in Rule 12D-16.002, F.A.C.), showing the adopted millage rate and return it to the

property appraiser, tax collector, and the Department within 3 days from receipt of the certification from the property appraiser. In the event variance in taxable value so certified for municipalities, counties, and water management districts is more than 1 percent from that initially certified by the property appraiser on the Certification of Taxable Value, ~~form Form~~ DR-420, then as provided by Section ~~200.065(6) 200.065(5)~~, F.S., the municipality, county or water management district may administratively adjust its adopted millage rate without a public hearing. Any other taxing authority, except a school district, may administratively adjust its millage if the taxable value is at variance by more than 3 percent. The adjustment ~~must shall~~ be such that the taxes computed by applying the adopted rate against the certified taxable value are equal to the taxes computed by applying the adjusted adopted rate to taxable value on the roll to be extended. No adjustment ~~can shall~~ be made to levies required by law to be a specific millage amount.

(h) Certify compliance with Chapter 200, F.S., to the Department, on the Certification of Compliance (form Form DR-487, incorporated by reference in Rule 12D-16.002, F.A.C.), within 30 days after adoption of the ordinance or resolution establishing a property tax millage levy, as provided elsewhere in this rule chapter.

(4) A school district must:

(a) No change.

(b) Prepare, through the superintendent, and submit the tentative budget to the school board, and the school board ~~must shall~~ approve or amend the tentative budget for advertising, within 24 days after the certification date, in accordance with Section 200.065(2)(a)3. and Chapter 1011, F.S.

(c) No change.

(d) Hold the tentative budget hearing on or after 2 days and within 5 days from the day the advertisement is first published, scheduled as required by Section ~~200.065(2)(f)1. 200.065(2)(e)2~~, F.S. Therefore, the tentative budget hearing ~~must shall~~ be held within 34 days from the certification date.

(e) Advise the property appraiser, on the Certification of School Taxable Value (form Form DR-420S, incorporated by reference in Rule 12D-16.002, F.A.C.), of its proposed millage rate within 35 days of the certification date. The property appraiser is required to ~~send mail~~ the notice of proposed property taxes, the TRIM notice, within 55 days of the certification date. This notice serves as the notice of the final millage and budget hearing.

(f) No change.

(g) Certify the adopted millage to the property appraiser and the tax collector. These submissions ~~must shall~~ be made within 3 days from the date of the hearing, and ~~thus~~ within 101 days of the certification date.

(h) Execute the Certification of Final Taxable Value, ~~form Form~~ DR-422, showing the adopted millage rate and return it

to the property appraiser, tax collector, and the Department within 3 days from receipt of the certification from the property appraiser. In the event variance in taxable value so certified is more than 1 percent from that initially certified by the property appraiser on the Certification of Taxable Value, ~~form Form~~ DR-420, then as provided by Section ~~200.065(6)~~ ~~200.065(5)~~, F.S., the school district may administratively adjust its adopted millage rate without a public hearing. The adjustment must ~~shall~~ be such that the taxes computed by applying the adopted rate against the certified taxable value are equal to the taxes computed by applying the adjusted adopted rate to taxable value on the roll to be extended. No adjustment can ~~shall~~ be made to levies required by law to be a specific millage amount.

(i) Certify compliance with Chapter 200, F.S., to the Department, on ~~form Form~~ DR-487, within 30 days following adoption of the ordinance or resolution establishing a property tax millage levy, as provided in this rule chapter.

*Rulemaking Authority 195.027(1), 218.26(1) FS. Law Implemented 129.03, 195.002, 200.065, 200.068, 218.21, 218.23, 218.63, 1011.62 FS. History—New 6-20-91, Amended 1-11-94, 4-18-94, 12-27-94, 12-25-96, 12-31-98, 6-13-22, 3-27-25.*

**12D-17.0035 Instructions and Calculations.**

(1) Rolled-back rate. Specific instructions for calculating the rolled-back rate are contained in the Truth in Millage (TRIM) TRIM compliance instructions for completing a Certification of Taxable Value (form Form DR-420, incorporated by reference in Rule 12D-16.002, F.A.C.). ~~The in general,~~ the calculation of the rolled-back rate must shall include all millages exclusive of voted debt service levies and millages in excess of the 10 mill cap pursuant to Section 200.071, F.S.

(2)(a) Percent increase over the current year rolled-back rate of tentative millage. The calculation is: current year aggregate tentative millage divided by the current year aggregate rolled-back rate, minus 1.00, times 100, equals the percent to publish in the Notice of Tax Increase advertisement. ~~The in other words,~~ the actual calculation is would be:

$((\text{current year aggregate tentative millage} / \text{current year aggregate rolled-back rate}) - 1.00) \times 100$	=	percent to publish in the <u>advertise in</u> Notice of Tax Increase advertisement.
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(b) Percent increase over the ~~rolled-back~~ rolled-back rate of final millage. The calculation is: current year final millage divided by the current year rolled-back rate, minus 1.00, times 100 equals the percent to state in the ordinance or resolution as required by Section 200.065(2)(d), F.S. ~~The in other words,~~ the actual calculation is would be:

$$\frac{((\text{current year final millage/rolled-back rate}) - 1.00) \times 100}{\text{percent to state in resolution or ordinance}}$$

(3) Taxing Authorities and School Districts: Calculation of proposed, tentative, and final budgets, proposed and final millage rates, and ad valorem proceeds. In calculating these figures, Section 200.065(2)(a)1., F.S., requires each taxing authority to use not less than 95 percent of the taxable value certified to it by the property appraiser. This is at least 95 percent of the gross taxable value appearing on line 4 of the ~~form Form~~ DR-420 or a Certification of School Taxable Value (~~form Form~~ DR-420S, incorporated by reference in Rule 12D-16.002, F.A.C.).

(a) The calculation of the tentative budget or ad valorem proceeds is:

Line 4 of <del>form Form</del> DR-420 or <del>form Form</del> DR-420S $\times$ $\cdot 95$ $\times$ tentative millage rate =	the absolute minimum of ad valorem proceeds to use for tentative budget purposes
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(b) The calculation of the final budget or ad valorem proceeds is:

Line 4 of <del>form Form</del> DR-420 or <del>form Form</del> DR-420S $\times$ $\cdot 95$ $\times$ final millage rate =	the absolute minimum of ad valorem proceeds to use for final budget purposes
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(4) Budget summary advertisement. The advertised budget must shall remain in balance. The tentative millages stated in the budget summary advertisement must shall be the millages the taxing authority is proposing to levy, and must shall be tied to the anticipated ad valorem proceeds resulting from each millage. Each tentative millage must shall be displayed in the budget summary advertisement. However, each millage may be divided and allocated to one or more funds or budgets, provided it is readily apparent in the advertisement that the sum of the millages is less than or equal to the respective proposed millage. The proceeds must shall be displayed in the appropriate fund or budget to which they are to be deposited.

*Rulemaking Authority 195.027(1), ~~213.06(1)~~, 218.26(1) FS. Law Implemented 195.002, 200.065, 200.068, ~~213.05~~, 218.21, 218.23, 218.63, 1011.62(4) FS. History—New 6-20-91, Amended \_\_\_\_\_.*

**12D-17.004 Taxing Authority’s Certification of Compliance; Notification by Department.**

(1) If an ordinance or resolution establishing a property tax millage levy is adopted, the taxing authority must file the TRIM Compliance Package including a Certification of Compliance (form Form DR-487, incorporated by reference in Rule 12D-16.002, FA.C.), with the Department within 30 days following the adoption of the levy.

(2)(a) For taxing authorities other than school districts, the certification of compliance must be made by filing the

following items with the Department:

1. A copy of the Certification of Taxable Value, ~~Form (form DR-420, incorporated by reference in Rule 12D-16.002, F.A.C.).~~

2. through 3. No change.

4. Proof of publication of the ~~The entire page from the print edition of the newspaper or the entire webpage from an Internet-only publication, containing the~~ final budget hearing advertisement, which is the notice of proposed tax increase advertisement required by Sections 200.065(2)(d) and (3)(a), F.S., or the notice of budget hearing advertisement required by Sections 200.065(2)(d) and (3)(b), F.S., whichever is appropriate, and which is required to be adjacent to the budget summary advertisement. For multicounty taxing authorities, proof of publication of the entire page from the newspaper or the entire webpage from an Internet-only publication, ~~containing~~ the notice of proposed tax increase advertisement or notice of tax increase advertisement required by Sections 200.065(2)(d), (3)(a), (3)(g) and (9), F.S., or the notice of budget hearing advertisement required by Sections 200.065(2)(d), (3)(b), (3)(e) and (8), F.S., and which is required to be adjacent to the budget summary advertisement.

5. Proof of publication of ~~The entire page from the print edition of the newspaper or the entire webpage from an Internet-only publication, containing the~~ budget summary advertisement required by Sections 200.065(3)(l) and 129.03(3)(b), F.S., adjacent to the advertisement required by subparagraph ~~paragraph~~ 4. of this paragraph ~~rule-subsection~~ above.

6. Proof ~~Proof(s)~~ of publication ~~from the newspaper~~ of the notice of tax increase or notice of proposed tax increase advertisement or notice of budget hearing advertisement, and the adjacent budget summary advertisement. In the event notice is not published but is mailed according to Section 200.065(3)(f), F.S., a taxing authority must submit a certification of mailing from the post office with a copy of the notices.

7. For counties only, a copy of the Notice of Tax Impact of the Value Adjustment Board advertisement described in Section 194.037, F.S., and Rule 12D-9.038, F.A.C. ~~(the entire page from the print edition of the newspaper or the entire webpage from an Internet-only publication).~~

8. For counties only, proof of publication of the notice of tax impact of the value adjustment board advertisement. If the value adjustment board completes its hearings after the deadline for certification under Section 200.068, F.S., the county must ~~shall~~ submit this item to the Department within 30 days from the completion of the hearings.

9. A copy of the Certification of Final Taxable Value, form ~~Form~~ DR-422, if the property appraiser has issued one as of this date. If the taxing authority has not received this certification, ~~then~~ the taxing authority must ~~shall~~ file the remainder of the

certification package with the Department within the deadline and ~~shall~~ file the certification form ~~Form~~ DR-422 as soon as it is received.

10. through 12. No change.

13. Form DR-487V, Vote Record for Final Adoption of Millage Levy.

14. Form DR-422DEBT, Certification of Final Voted Debt Millage, if used.

15. Certification of Compliance, form ~~Form~~ DR-487.

The forms listed above are incorporated by reference in Rule 12D-16.002, F.A.C.

(b) For school districts, the certification of compliance must be made by filing the following items with the Department:

1. A copy of the Certification of School Taxable Value, form ~~Form~~ DR-420S.

2. A copy of Department of Education form ~~Form~~ ESE-524.

3. No change.

4. Proof of publication of the tentative budget hearing advertisement ~~from the newspaper pursuant to Chapter 50, F.S., or a publicly accessible website pursuant to Chapter 50.0311, F.S.~~

5. The entire page from the print edition of the newspaper or the entire webpage from an Internet-only publication containing the budget summary advertisement, required by Sections 200.065(3)(l) and 129.03(3)(b), F.S., adjacent to the advertisement required by subparagraph ~~sub-paragraph~~ 4 of this paragraph.

6. through 8. No change.

9. Copy of the Certification of Final Taxable Value, form ~~Form~~ DR-422, if the property appraiser has issued one as of this date. If the school district has not received this certification, ~~then~~ the remainder of the certification package must ~~shall~~ be filed with the Department within the deadline and file form DR-422 ~~the certification shall be filed~~ as soon as it is received.

10. A copy of Certification of Voted Debt Millage, form ~~Form~~ DR-420DEBT, if used.

11. through 12. No change.

13. Copy of the Certification of Final Voted Debt Millage, form ~~Form~~ DR-422DEBT, if used.

14. Certification of Compliance, form ~~Form~~ DR-487.

The forms listed above are incorporated by reference in Rule 12D-16.002, F.A.C.

(3) The Department provides an internet-based system, OASYS eTRIM (electronic Truth in Millage) at <https://portal.oasys.floridarevenue.com/>, for taxing authorities, including school districts, to complete and submit the forms and documents required for certification of compliance with Chapter 200, F.S., Determination of Millage, and for conforming to the maximum millage limitation

requirements in Section 200.065(5), F.S. Using OASYS eTRIM, property appraisers will be able to electronically certify value data to municipalities and independent special districts in their counties. Counties, municipalities, and independent special districts, including water management districts, will be able to complete and return forms to the property appraiser containing information for inclusion in the Notice of Proposed Property Taxes, form DR-474, incorporated by reference in Rule 12D-16.002, F.A.C., and will be able to submit information and documentation to the Department. For more information about OASYS eTRIM, contact the TRIM section at TRIM@floridarevenue.com.

~~(4)(3)~~ If no ordinance or resolution establishing a property tax millage levy is adopted, then on or before November 1, a unit of local government ~~must shall~~ file a certification, ~~on Form DR-421,~~ with the Department that the requirements of Section 200.065, F.S., if applicable, were met. The certification must be filed on a Certification for Taxing Authorities that Do Not Levy Ad Valorem Taxes, (form DR-421, incorporated by reference in Rule 12D-16.002, F.A.C.)

~~(5)(4)~~ The Department ~~will shall~~ notify each taxing authority which has made a complete filing and which is in compliance with this rule section and Section 200.065, F.S.

*Rulemaking Authority 195.027(1), 218.26(1) FS. Law Implemented 195.002, 200.001, 200.065, 200.068, 218.21, 218.23, 218.63 FS. History—New 6-20-91, Amended 12-25-96, 12-31-98, 11-1-12, 6-13-22, 3-27-25, \_\_\_\_\_.*

#### **12D-17.005 Taxing Authorities in Violation of Section 200.065, Florida Statutes.**

(1) The Department ~~must shall~~ review the TRIM Compliance Package including the Certification of Compliance, (form ~~Form~~ DR-487, incorporated by reference in Rule 12D-16.002, F.A.C.), made by the taxing authority, if filed, in the respects set forth elsewhere in this rule chapter. If the taxing authority or school district has made an incomplete filing or is otherwise found to be in violation of any of the statutory elements, the Department ~~must shall~~ make such a determination and ~~shall so~~ notify the taxing authority or school district.

(2)(a) The Department ~~must shall~~ regard as major any violation or combination of violations of Section 200.065 or 200.068, F.S., which tend to misinform taxpayers whether or not such violation is specifically identified in the following guidelines.

(b) Where a violation is specified or found to be major, the taxing authority ~~must shall~~ be required to readvertise and rehold hearing(s). The specification of a violation as minor in the guidelines ~~must shall~~ not preclude the Department from considering it to be major where the surrounding circumstances indicate it to be major.

(c) The guidelines in this paragraph ~~are shall be~~ used by the Department based on the impact of the violation on the Truth in Millage (“TRIM”) process.

1. Failure to State Tentative Millage in Budget Summary Advertisement – Sections 200.065(3)(h), (j) and (l), 129.03(3)(b), F.S.

Major. The taxing authority ~~is shall be~~ required to readvertise and rehold hearing(s).

2. Advertisement Too Small (Notice of Tax Increase, Notice of Proposed Tax Increase, Notice of Tax for School Capital Outlay, Amended Notice of Tax For School Capital Outlay, etc.) – Section 200.065(3), F.S.

Major, unless the taxing authority made an attempt to comply and the error was not the fault of the taxing authority but of the newspaper that printed the advertisement. The taxing authority ~~will shall be~~ required to readvertise and rehold hearing(s).

3. Less Than 95 Percent of Ad Valorem Proceeds Shown in Budget Summary Advertisement – Sections 200.065(2)(a)1., (3)(l), F.S.

Major. The proceeds are understated. The taxing authority ~~is shall be~~ required to readvertise and rehold hearing(s).

4. No change.

5. Late Certification of Compliance Package – Section 200.068, F.S.

Minor, if all required documents are filed within 30 days of date due. Taxing authority ~~will shall be~~ advised of the violation. Major, if filed beyond 30 days. No revenue sharing funds ~~will shall be~~ disbursed, and all local millage in excess of the rolled-back rate ~~will shall be~~ directed to be placed in escrow, until the certification is filed.

6. Property Tax Levy – Notice of Proposed Tax Increase – Section 200.065(3)(a), F.S.

Major. If initially proposed tax levy, reductions due to the value adjustment board, actual tax levy for last year, or this year’s proposed tax levy is misstated. The taxing authority ~~is shall be~~ required to readvertise and rehold hearings.

7. Advertisements Not Adjacent – Section 200.065(3)(l), F.S.

Major, unless taxing authority made an attempt to comply by instructing the newspaper in writing to place the advertisements in compliance with this rule. Severity of this violation depends on whether or not the violation is the fault of the taxing authority or the newspaper that printed the ad. If major, the taxing authority ~~is shall be~~ required to readvertise and rehold hearing(s). Those taxing authorities who were notified of this same violation within the past two years ~~are shall be~~ required to readvertise and rehold hearing(s). If minor, the taxing authority ~~will shall be~~ made aware of the violation.

8. Percent Increase Over the Rolled-Back Rate Incorrect in Notice of Tax Increase Advertisement (for multicounty taxing authorities) or Incorrect Difference Between Taxes Levied Last

Year and Proposed Taxes This Year in Notice of Proposed Tax Increase (for all other taxing authorities and schools and first year levies) – Sections 200.065(3)(a), (c), (g) and (j), F.S.

Major. If understated, the taxing authority ~~is shall be~~ required to readvertise and rehold hearing(s).

9. through 10. No change.

11. Hearing Recessed or Continued Without Proper Readvertisement – Sections 200.065(2)(e)2. and (3), F.S.

Major. Taxing authority ~~is shall be~~ required to readvertise and rehold hearing(s) if taxpayers have not been given proper notification of the final adoption of the millage and budget.

12. Failure to State Percent Increase Over Rolled-Back Rate in Resolution or Ordinance – Sections 200.065(2)(d), (3)(j), F.S.

Minor. The taxing authority ~~will shall~~ be notified of the violation. However, if both the percentage increase over the rolled-back rate is understated in the notice of tax increase advertisement (violation #8), or the amounts required in the notice of proposed tax increase are misstated, or if the advertisements are otherwise misleading, and the same factors in the ordinance or resolution are understated or missing, the taxing authority ~~must shall~~ readvertise and rehold hearing(s).

13. Failure to Adopt Millage and Budget Separately – Sections 200.065(2)(d) and (2)(e)2., F.S.

Minor. The taxing authority ~~will shall~~ be notified of the violation and ~~must shall~~ furnish documentation that millage and budget were adopted by separate vote. If no such documentation is furnished, those taxing authorities who have been notified of this violation within the past two years ~~are shall~~ be required to readvertise and rehold hearing(s).

14. Failure to Show Categories in Notice of Tax for School Capital Outlay – Section 200.065(10)(a), F.S.

Minor. Those taxing authorities who have been notified of this violation within the past two years ~~are shall be~~ required to readvertise and rehold hearing(s).

15. No change.

16. Failure to Follow Statutory Verbiage – Section 200.065(3)(h), F.S.

Major, if deviation tends to misinform the taxpayers. Taxing authority ~~is shall be~~ required to readvertise and rehold hearing(s). Minor, if deviation did not modify the substantive content or misinform taxpayers. Taxing authority ~~will shall~~ be notified of the violation. If the violation occurs for two consecutive years the taxing authority ~~is shall be~~ required to readvertise and rehold hearing(s).

17. Budget Summary Advertisement Selection or Additional Verbiage – Section 200.065(3)(h), F.S.

Major, if deviation tends to misinform the taxpayers. Taxing authority ~~is shall be~~ required to readvertise and rehold hearing(s). Minor, if the violation does not misinform the taxpayers.

18. Too Much Time Between Tentative Millage and Budget Hearing and Final Millage and Budget Hearing – Section 200.065(2)(d), F.S.

Minor. Taxing authority ~~will shall~~ be advised of the violation. If the taxing authority is notified of the same violation for two consecutive years, then it ~~must shall~~ readvertise and rehold hearing(s).

19. Hearing Held Less Than 2 or More Than 5 Days Following Advertisement – Section 200.065(2)(d), F.S.

Minor. Taxing authority ~~will shall~~ be advised of the violation. If the taxing authority is notified of the same violation for two consecutive years, then it ~~must shall~~ readvertise and rehold hearing(s).

20. Publication of Both Notice of Tax Increase Advertisement or Notice of Proposed Tax Increase and Notice of Budget Hearing – Section 200.065(3), F.S.

Minor, if deviation does not tend to misinform the taxpayers. Taxing authority ~~will shall~~ be notified as to the correct selection of the advertisements.

21. Publication of Advertisements Combined – Section 200.065(3)(l), F.S.

Minor, unless the violation is the fault of the taxing authority. This is not a severe violation as long as all the information necessary is contained in the advertisement(s). However, the taxing authority ~~will shall~~ be made aware of the violation.

22. Improper Inclusion of Reference to “Verbatim Record of Proceedings” – Sections 286.0105, 200.065(3)(h), F.S.

Minor. Taxing authority ~~will shall~~ be notified of the violation.

23. Publication of Different Percent Millage Increase in Budget Summary Advertisement from That Based on Tentative Millage Adopted at First Budget Hearing – Sections 200.065(3)(1), (3)(j), F.S.

Major, if percentage is understated. If so, the taxing authority ~~is shall be~~ required to readvertise and rehold hearing(s). Taxing authority ~~will shall~~ be notified as to the correct method of calculating the percent of increase.

24. Publishing a Notice of Tax Increase Advertisement or a Notice of Proposed Tax Increase, Rather Than Notice of Budget Hearing Advertisement – Section 200.065(3), F.S.

Minor. This is not a severe violation since it provides more information than is needed. However, the taxing authority ~~will shall~~ be notified of the violation.

25. Adoption of Budget Before Millage – Section 200.065(2)(e)1., F.S.

Minor, provided there is no apparent prejudice to the taxpayers and the violation appears unintentional. The taxing authority ~~will shall~~ be notified of the violation.

26. Any Other Violation Which Tends to Misinform the Taxpayers Concerning Millage or Ad Valorem Proceeds – Sections 200.065(1)-(12), F.S.

Major. Taxing authority ~~is shall be~~ required to readvertise and

rehold hearing(s).

(3) No change.

*Rulemaking Authority 195.027(1), ~~213.06(4)~~, 218.26(1) F.S. Law Implemented 195.002, 200.001, 200.065, 200.068, 218.21, 218.23, 218.63 F.S. History—New 6-20-91, Amended 4-18-94, 12-25-96, 12-31-98, 11-1-12, \_\_\_\_\_.*

#### **12D-17.006 Notification of Noncompliance; Withholding and Escrow of State Revenue Sharing Funds.**

(1) If a taxing authority files a certification of compliance which violates Section 200.065, F.S., but which is permitted to be cured by the process specified in Section 200.065(13)(c), F.S., then the Department will shall notify the taxing authority, as provided in subsection (2) of this rule section, using its last known address, that it is in violation of Section 200.065, F.S., and is subject to Section 200.065(13)(c), F.S.

(2)(a) The Department's notice will shall specify the steps necessary to bring the taxing authority into compliance. These steps may include, but not be limited to, readvertisement, reholding hearing(s), adoption of new millage and adoption of new budget.

(b) The Department will shall notify the taxing authority to repeat the hearing and notice process required by Section 200.065(2)(d), F.S., and that the advertisement must appear within 15 days of the date the notice was issued from the Department, and shall contain the statement in boldface required by Section 200.065(13)(c)2., F.S.

(c) The Department must notify the taxing authority that it must be required to file a new certification after completion of the readvertisement and the reholding of the hearing(s), containing the following items:

1. through 5. No change.

6. Certification of Compliance, (~~form~~ ~~Form~~ DR-487, incorporated by reference in 12D-16.002, F.A.C.)

(d) The Department will shall direct the tax collector to hold in escrow all ad valorem revenues for the taxing authority collected in violation of Section 200.065, F.S., which ~~shall~~ normally will be those revenues in excess of the rolled-back rate, except those revenues from voted levies or levies imposed pursuant to Section 1011.60(6), F.S. The funds will shall be held in escrow until the completion, and approval by the Department, of the process required by Section 200.065(13)(c), F.S., and this rule section.

(e) The Department of Revenue, Property Tax Oversight Program will shall immediately notify in writing the Department of Revenue, General Tax Administration, Refunds and Revenue Accounting Distribution Process, of the noncompliance. That program will shall proceed consistently with Sections 218.23(1) and 218.63(2), F.S., ~~and Chapter 12-10, F.A.C.~~, to withhold revenue sharing funds, and to hold the funds in escrow until the noncompliance is cured, or if not

cured, to transfer the funds to the General Revenue Fund for the 12 months following the determination of noncompliance by the Department.

(f) The Department's notification to the taxing authority will shall be issued within 30 days of the taxing authority's deadline for filing the Certification of Compliance, form certification of compliance, Form DR-487, or within 60 days of the taxing authority's resolution or ordinance adopting the levy. The Department's notice will shall be sent electronically, by overnight delivery, ~~facsimile transmission (FAX)~~, regular or certified mail, ~~or hand delivery~~ to the last known address and person identified by the taxing authority as provided in this rule chapter.

(g) The Department's determination of non-compliance will shall be deemed made on the date of the initial notification of the violation(s) to the taxing authority.

(3) The taxing authority must shall hold a new hearing and adopt a new millage and a new budget. If the newly approved millage is less than the amount previously forwarded by the taxing authority to the property appraiser pursuant to Section 200.065(4), F.S., then the taxing authority must shall hold any excess moneys collected in reserve until the subsequent fiscal year, and must shall enact a resolution or ordinance to do so. Any millage newly adopted at a hearing required under this rule section will shall not be forwarded to the property appraiser or tax collector and must shall not exceed the rate previously adopted.

(4) If the taxing authority cures the violation under Section 200.065(13)(c), F.S., and this rule section, then the Department of Revenue will shall:

(a) No change.

(b) Notify the tax collector, who will shall disburse to the taxing authority, as provided by law, any funds held in escrow pursuant to this rule section; and,

(c) ~~Disburse Notify the Department of Revenue, General Tax Administration, Refunds and Distribution Process, which shall disburse~~ all funds held in escrow beginning with the next scheduled disbursement.

(5) If any county or municipality, dependent special district of the county or municipality, or municipal service taxing unit of the county is in violation of Section 200.065(5), F.S., because total county or municipal ad valorem taxes exceeded the maximum total county or municipal ad valorem taxes, respectively, that county or municipality, and any municipal service taxing unit and/or dependent district, is shall be subject to notification.

(6)(a) One or more taxing authorities whose taxes are included in the maximum total taxes levied must reduce their millage sufficiently so that the maximum total taxes levied is not exceeded if any county or municipality, dependent special district of the county or municipality, or municipal service

taxing unit of the county is in violation of Section 200.065(5), F.S., because total county or municipal ad valorem taxes exceeded the maximum total county or municipal ad valorem taxes. This is an alternative to the county or municipality forfeiting the half-cent sales tax revenues, as provided in Section 200.065(5), F.S.

(b) The county or municipality ~~will~~ ~~shall~~ forfeit the distribution of local government half-cent sales tax revenues during the 12 months following a determination of noncompliance, as described in Sections 218.63(2) and (3), 200.065(13), F.S., if a taxing authority does not reduce its millage so that the maximum total taxes levied is not exceeded, or if any county or municipality, dependent special district of the county or municipality, or municipal service taxing unit of the county has not remedied the noncompliance or recertified compliance with Chapter 200, F.S., as provided in Section 200.065(13)(e), F.S.

*Rulemaking Authority 195.027(1), 218.26(1) FS. Law Implemented 195.002, 200.001, 200.065, 200.068, 218.21, 218.23, 218.63 FS. History—New 6-20-91, Amended 12-25-96, 11-1-12, 6-13-22,*

#### **12D-17.007 Taxing Authorities Failing to Timely File Certification; Forfeiture of State Revenue Sharing Funds.**

(1) Any taxing authority which has not certified compliance on a Certification of Compliance, (~~form Form~~ DR-487, incorporated by reference in Rule 12D-16.002, F.A.C.), and provided all documentation as required in Section 200.065, F.S., or this rule chapter, ~~will~~ ~~shall~~ be subject to forfeiture of state funds otherwise available to it for the 12 months following a determination of noncompliance by the Department.

(2) The Department ~~will~~ ~~shall~~ notify the taxing authority, using its last known address, that it is in violation of Section 200.065, F.S., and is subject to forfeiture of state revenue sharing funds otherwise available to it. The Department's determination of non-compliance ~~will~~ ~~shall~~ be deemed made on the date of the initial notification of the violation(s) to the taxing authority.

(a) The Department ~~will~~ ~~shall~~ direct the tax collector to hold all ad valorem revenues for the taxing authority collected in violation of Section 200.065, F.S., which ~~will~~ ~~shall~~ normally be those revenues in excess of the rolled-back rate, in escrow, except those revenues from voted levies or levies imposed pursuant to Section 1011.60(6), F.S. The funds ~~will~~ ~~shall~~ be held in escrow until the completion and approval by the Department of the process required by Section 200.065(13)(c), F.S., ~~and this rule section.~~

(b) The Department of Revenue, Property Tax Oversight Program ~~will~~ ~~shall~~ immediately notify in writing the General Tax Administration of the noncompliance. That program ~~will~~ ~~shall~~ proceed consistently with Sections 218.23(1) and

218.63(2), F.S., and Chapter 12-10, F.A.C., to withhold revenue sharing funds, and to hold such funds in escrow until the noncompliance is cured, or if not cured, to transfer such funds to the General Revenue Fund for the 12 months following the determination of noncompliance by the Department.

(3) In the event the taxing authority files a Certification of Compliance (form ~~certification of compliance on Form~~ DR-487) after the deadline for filing, ~~then~~ the taxing authority ~~will~~ ~~shall~~ be subject to withholding of state funds and funds levied in violation of Section 200.065, F.S., until such certification is properly filed and approved in accordance with this rule chapter.

(4) The portion of revenue sharing funds which would otherwise be distributed to a taxing authority which has not certified compliance on a Certification of Compliance (form ~~Form~~ DR-487) as required in this rule chapter ~~or subsection 12-10.006(4), F.A.C.~~, or has otherwise failed to meet the requirements of Section 200.065, F.S., ~~will~~ ~~shall~~ be deposited in the General Revenue Fund for the 12 months following a determination of noncompliance by the Department.

*Rulemaking Authority 195.027(1), ~~213.06(1)~~, 218.26(1) FS. Law Implemented 200.065 FS. History—New 6-20-91, Amended \_\_\_\_\_.*

#### **12D-17.008 Computation of Time.**

(1) The time periods specified in this rule chapter ~~must~~ ~~shall~~ be determined by using the date of certification of value by the property appraiser pursuant to Section 200.065(1), F.S., or July 1, whichever is later. This date ~~must~~ ~~shall~~ be the certification date, and it ~~is~~ ~~shall~~ be immaterial whether it falls on a Saturday, Sunday, or legal holiday.

(2) In computing any period of time prescribed or allowed by this rule chapter or by Section 200.065, F.S., the day of the act from which the designated period of time begins ~~must~~ ~~shall~~ not be included, except for the certification date, which ~~will~~ ~~shall~~ always be day 1 and ~~must~~ ~~shall~~ be included. Where the term "within" is used in this rule chapter, and in Section 200.065, F.S., in reference to a period of days, it ~~must~~ ~~shall~~ be construed to mean "not later than" that number of days, and vice versa. The last day of the period ~~must~~ ~~shall~~ be included even if it is a Saturday, Sunday, or legal holiday. That event ~~will~~ ~~shall~~ not operate to extend or to change the day of the act from which any other periods begin to run.

(3) through (4) No change.

*Rulemaking Authority 195.027(1), ~~213.06(1)~~, 218.26(1) FS. Law Implemented ~~195.002, 200.065, 200.068, 213.05, 218.21, 218.23, 218.63~~ FS. History—New 6-20-91, Amended \_\_\_\_\_.*

#### **12D-17.009 Tax Roll Approval; Extended Time Frames; Method of Adjustment of Millage.**

(1) In the event that a review notice is issued by the Department in reviewing a tax roll pursuant to Section

193.1142(4) or (5), F.S., and Rule 12D-8.020, F.A.C., the following provisions ~~will shall~~ apply:

(a) The property appraiser ~~must shall~~ make any necessary adjustment required by Section 200.065(11), F.S., to the proposed millage rates provided by the taxing authority prior to issuing the notice of proposed property taxes, the TRIM notice, required by Section 200.065(2)(b), F.S. These adjustments ~~must shall~~ include all millages which are applicable to the taxable value on the approved tax roll at variance with the value certified by the property appraiser pursuant to Section 200.065(1), F.S., on the certification date. The property appraiser ~~must shall~~ provide written notice of the amount of the millage adjustment to all taxing authorities affected by the adjustment within 5 days of the date the tax roll is approved.

(b) If, as a result of the review notice and the remedial steps by the property appraiser, the TRIM notice, as required by Section 200.065(2)(b), F.S., is issued after the deadline (55 days after the certification date), all subsequent deadlines provided in this rule chapter ~~must shall~~ be extended a like number of days. In this event, the deadline date for the TRIM notice (the 55th day after the certification date) ~~must shall~~ not be included in calculating the number of extended days. Beginning with the day after the deadline date for the TRIM notice, the number of extended days ~~must shall~~ be counted until the day the tax roll was approved by the Department. That latter day ~~must shall~~ be included.

(2) If, as a result of the tax roll approval process provided in Section 193.1142, F.S., the roll is not approved and interim roll procedures have not commenced within 45 days of the certification date, then the deadline for ~~sending mailing~~ the notice of proposed property taxes, the TRIM notice, ~~is shall be~~ 10 days beyond the date the tax roll is approved or interim roll procedures have begun. In such event, all other deadlines in this rule chapter or under Section 200.065, F.S., ~~must shall~~ be extended by the same number of days by which the deadline for ~~sending mailing~~ the notice is extended beyond 55 days from the certification date. The deadline for ~~sending mailing~~ the notice is therefore the later of 55 days after the certification date, or 10 days after either the tax roll is approved or interim roll procedures have begun.

*Rulemaking Authority 195.027(1), ~~213.06(1)~~, 218.26(1) FS. Law Implemented ~~192.048~~, 193.1142, 195.002, 200.065, 200.068, 218.21, 218.23, 218.63 FS. History—New 6-20-91, Amended 10-30-91,*

**12D-17.010 Certification of Compliance and Application.**

Each year prior to November 1, or within 30 days of an ordinance or resolution adopting a millage levy, the taxing authority ~~must shall~~ file a Certification of Compliance, (~~form~~ Form DR-487, incorporated by reference in Rule 12D-16.002,

F.A.C.), with the Department. It ~~is shall be~~ the duty of each taxing authority required to submit certified information to the Department, pursuant to this rule chapter, to file timely information. Any taxing authority failing to provide timely information required by this rule chapter ~~must shall~~, by such action or noncompliance, authorize the Department to use the best information available. If no such information is available, the Department may take any necessary action, including disqualification from revenue sharing, either partial or entire. Further, by such action or noncompliance the taxing authority ~~will shall~~ waive any right to challenge the determination of the Department as to its portion, if any, pursuant to the privilege of receiving shared revenues under this rule chapter.

*Rulemaking Authority 195.027(1), ~~213.06(1)~~, 218.26(1) FS. Law Implemented 195.002, 200.065, 200.068, 218.21, 218.23, 218.26(4), 218.63 FS. History—New 6-20-91, Amended \_\_\_\_\_.*

NAME OF PERSON ORIGINATING PROPOSED RULE:

Mike Cotton

NAME OF AGENCY HEAD WHO APPROVED THE

PROPOSED RULE: Governor and Cabinet

DATE PROPOSED RULE APPROVED BY AGENCY

HEAD: December 17, 2025

DATE NOTICE OF PROPOSED RULE DEVELOPMENT

PUBLISHED IN FAR: September 26, 2025

**DEPARTMENT OF HEALTH**

**Board of Nursing Home Administrators**

RULE NO.: RULE TITLE:

64B10-11.001 Application for Licensure

PURPOSE AND EFFECT: The proposed rule amendment updates the requirements for licensure by endorsement regarding the incorporated Form DH-MQA-5101, Mobile Opportunity by Interstate Licensure Endorsement (MOBILE), pursuant to changes to s. 456.0145, F.S. The modifications became effective on July 1, 2025, in accordance with Chapter 2025-114, Laws of Florida.

SUMMARY: Updates are being made to the incorporated Form DH-MQA-5101, Mobile Opportunity by Interstate Licensure Endorsement (MOBILE), pursuant to changes to s. 456.0145, F.S. The modifications became effective on July 1, 2025, in accordance with Chapter 2025-114, Laws of Florida.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: During discussion of the economic impact of this rule at its Board meeting, the Board concluded that this rule change will not have any impact on licensees and their businesses or the businesses that employ them. The rule will not increase any fees, business costs, personnel costs, will not decrease profit opportunities, and will not require any specialized knowledge to comply. This change will not increase any direct or indirect regulatory costs. Hence, the Board determined that a Statement of Estimated Regulatory Costs (SERC) was not necessary and that the rule will not require ratification by the Legislature. No person or interested party submitted additional information regarding the economic impact at that time.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 456.0135, 456.0145, 468.1695 FS.

LAW IMPLEMENTED: 456.0135, 456.013, 456.0145, 456.0635, 468.1685, 468.1695, 468.1705 FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAR.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Evalee Taylor, Acting Executive Director, Board of Nursing Home Administrators, 4052 Bald Cypress Way, Bin #C-07, Tallahassee, Florida 32399-3257, (850)245-4355, or by email: Dayle.Mooney@flhealth.gov.

THE FULL TEXT OF THE PROPOSED RULE IS:

**64B10-11.001 Application for Licensure.**

Any person desiring to be licensed as a nursing home administrator shall apply to the Board of Nursing Home Administrators Application fees, pursuant to Rule 64B10-12.0001, F.A.C., shall apply.

(1) No Change.

(2) For licensure by endorsement, an applicant shall submit the application for Mobile Opportunity by Interstate Licensure Endorsement (MOBILE), form DH-MQA-5101, (Revised 10/2025 4/2025), hereby adopted and incorporated by reference, which can be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-1905648197>, or from the Board of Nursing Home Administrators, 4052 Bald Cypress Way, Bin #C-07, Tallahassee, FL 32399-3257, <http://floridasnursinghomeadmin.gov/resources>. Applicants for licensure shall comply with Section

456.0145(2), F.S., the requirements for which are also referenced in part in subsection 64B10-11.002(3), F.A.C.

Rulemaking Authority 456.0135(~~4~~), 456.0145(~~5~~), 468.1695(~~4~~) FS. Law Implemented 456.0135, 456.013, 456.0145, 456.0635, 468.1685(~~2~~), 468.1695(~~4~~), (~~2~~), 468.1705 FS. History—New 12-26-79, Formerly 21Z-11.01, Amended 1-18-87, 10-2-88, 3-5-89, 3-15-90, 12-3-90, 11-3-92, Formerly 21Z-11.001, 61G12-11.001, Amended 12-4-95, 9-4-96, 7-21-97, Formerly 59T-11.001, Amended 5-15-00, 1-7-04, 2-15-06, 11-9-08, 10-24-10, 2-6-13, 9-10-14, 3-20-17, 6-8-20, 10-21-20, 1-7-25, 7-17-25, 7-17-25,\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Board of Nursing Home Administrators

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Nursing Home Administrators

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October 31, 2025

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: September 19, 2025

**DEPARTMENT OF CHILDREN AND FAMILIES**

**Agency for Persons with Disabilities**

RULE NOS.:	RULE TITLES:
65G-2.002	License Application and Renewal Procedures
65G-2.0021	Change of Ownership
65G-2.003	Length of Licenses
65G-2.0032	Agency Monitoring and Oversight
65G-2.004	License Violations
65G-2.0041	License Violations - Disciplinary Actions
65G-2.005	License Denial, Suspension or Revocation
65G-2.006	Licensed Capacity
65G-2.007	General Facility Standards
65G-2.0071	Foster Care Facility Standards
65G-2.0072	Group Home Facility Standards
65G-2.0073	Residential Habilitation Center Standards
65G-2.0074	Adult Day Training Program Standards
65G-2.008	Staffing Requirements
65G-2.009	Resident Care and Supervision Standards
65G-2.010	Fire and Emergency Procedures
65G-2.014	Comprehensive Transitional Education Program Standards
65G-2.015	Siting
65G-2.017	Health Safety Standards for Licensed Facilities

PURPOSE AND EFFECT: The purpose and effect is to update the rules by removing redundant language and reorganizing the structure of the rules to allow particular subject matters to be grouped into the same rule or subsection of rule. This will add clarity to the rules and allow the repeal of Rule 65G-2.017, F.A.C., the provisions of which will be moved into Rule 65G-2.007, F.A.C., thereby reducing the number of rules. The proposed rule amendments, the development of which included workshops with input from stakeholders, will remove or

mitigate unnecessary regulations, while sharpening the licensing and standards rules to ensure the health, safety, and welfare of individuals with developmental and intellectual disabilities who reside in facilities licensed by the Agency, or who participate in adult day training (ADT) programs licensed by the Agency. The proposed amendments also remove the tiered disciplinary violation classification system, replacing it with a disciplinary chart. This proposed change will better recognize the case-by-case nature of licensure cases and allow for greater consideration of mitigating and aggravating circumstances. Rule 65G-2.014, F.A.C., will be repealed because the law implemented was repealed.

SUMMARY: Rules 65G-2.014 and 65G-2.017, F.A.C., will be repealed. Month-to-month licensing will be removed, and conditional licenses will be issued to allow licensees to correct violations when a license is renewed. A disciplinary chart is incorporated which identifies the range of penalties possible for each rule violation after consideration of situational circumstances described in rule. Licensees will be required to document that all residents have exited a vehicle during trips. Residential facilities no longer must consult a dietician each year; they must do so only when the initial menu is developed. Residential facilities must maintain a census of the residents residing in the facility. Facilities that choose to use video monitoring must save footage relating to critical incidents or investigations for 30 days. Proposed new Rule 65G-2.0021 requires notice to the Agency whenever there will be a change of ownership of a licensed entity. The proposed rules remove the prohibition against licensed facilities existing on the same parcel or from being located on more than two adjacent parcels. Metal pressurized beverage containers, food packaged in cans, glass, or other waterproof containers no longer must be stored six inches off the floor when the floor is clean, and the food container is not exposed to moisture. For ADTs, the changes reduce the required ratio of two sinks and two toilets for every 25 persons to two sinks and two toilets for every 50 persons. The proposed amendments include grammatical and technical changes. The proposed changes also update citations to rulemaking authority and law implemented and delete sunset provisions.

#### SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The Agency has determined that this will have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has been prepared by the Agency.

The SERC can be summarized by: The Agency determined the rules do not have an adverse impact on economic growth, private sector job creation or employment, private sector

investment, business competitiveness, productivity, or innovation, nor do they increase regulatory costs, including transactional costs, in excess of \$200,000 in the aggregate within one year or in excess of \$1 million in the aggregate within five years after the implementation of these rules.

The Agency's website address where the SERC and supporting information may be viewed in the entirety is <https://apd.myflorida.com/resources/legal.htm>. The proposed rule, and proposed forms incorporated by reference in the proposed rules, may also be viewed at <https://apd.myflorida.com/resources/legal.htm>.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The agency utilized a survey of affected entities and based on the Agency's calculations and the SERC checklist, the result was that any potential estimated regulatory costs do not meet or surpass the threshold requiring legislative ratification.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 393.066(8), 393.0662(15), 393.067(1), 393.067(7), 393.0673(8), 393.501(1), 393.506(6) FS.

LAW IMPLEMENTED: 393.0655, 393.066, 393.0662, 393.067, 393.0673, 393.13, 393.135, 393.506 FS.

A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW:

DATE AND TIME: January 9, 2026, at 10:30 a.m.

PLACE: 4030 Esplanade Way, Tallahassee, FL 32399, Room 301. If unable to attend physically, one may attend via webinar at

<https://attendee.gotowebinar.com/register/3271455463406677597>

Webinar ID: 190-285-651

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 48 hours before the workshop/meeting by contacting: the contact person listed below. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Leslie E. Bryson, Senior Attorney, Agency for Persons with Disabilities, 4030 Esplanade Way, Suite 380, Tallahassee, Florida 32399, [leslie.bryson@apdcares.org](mailto:leslie.bryson@apdcares.org), (850)922-4464.

THE FULL TEXT OF THE PROPOSED RULE IS:

**65G-2.002 License Application and Renewal Procedures.**

(1) Providers required to be licensed under section 393.067, F.S., to provide services must maintain a valid current license issued by the Agency.

(2) Application. All applications for initial licensure as well licensure renewal must be submitted using License Application Form 65G-2.002-A (December 2025), which is incorporated herein by reference and available at <https://flrules.org/Gateway/reference.asp?No=Ref-1897117467> (February 2025), which is incorporated herein by reference. A copy of this form may also be obtained by contacting the Agency regional office. The Agency shall review license applications in compliance with the requirements of section 120.60, F.S.

(3) Conditional license. The Agency may issue a conditional license to a facility or program if, at the time of license renewal, the facility or program is found to have uncorrected violations that the facility or program has had an opportunity to correct. The issuance of a conditional license does not change the license expiration date.

(4)(3) License renewals. An application for the renewal of license must be submitted to the Agency at least 45 days prior to the expiration of the current license. The licensee shall submit an application for license renewal to the Regional Office at least 45 days prior to the expiration of the prior license. Failure to submit a complete application at least 45 days prior to the expiration of the prior license shall be considered a Class III violation. No fine shall be imposed if the renewal application is received between 30 and 45 days prior to expiration.

(a) A license which has not been renewed prior to the expiration date is terminated and invalid and the facility or program shall be considered unlicensed except as otherwise provided under section 120.60(4), F.S. If a timely and sufficient application for renewal has been received by the Agency, the original license shall remain in effect until the Agency acts upon the application for renewal.

(b) If the Agency receives an application to renew a license after its expiration date, the Agency shall consider it to be an application for an initial license rather than an application for license renewal.

(c) If an application for renewal has been submitted to the Agency but has not been completed prior to the date of expiration, the Agency may issue a conditional license until the renewal process is completed.

(5)(4) The Agency shall consider the following factors when reviewing an application for an initial license or license renewal. ~~prior licensing sanctions against a facility licensee, applicant, owner, or manager when reviewing whether to grant~~

~~a facility a license. This may also include consideration of whether a licensee, applicant, owner, or manager has previously been determined guilty of operating an unlicensed assisted living facility pursuant to Section 429.08, F.S. In making a determination under this subsection with respect to an applicant, licensee, owner or manager with prior sanctions, the Agency will consider the nature and seriousness of any violation for which a sanction was imposed, the type of sanction imposed including the amount of any applicable fine imposed, the number of prior sanctions, compliance with any conditions or requirements of any sanction and the length of time the facility has operated without any violation since the most recent violation for which a sanction was imposed. In making a determination under this subsection with respect to a licensee, applicant, owner or manager who has been determined guilty of operating an unlicensed assisted living facility, the Agency will consider whether the person at any time operated the assisted living facility with a proper license under Section 429.07, F.S., the length of time for which the facility operated with a license, and the length of time the facility was operated with an expired license.~~

(a) Prior disciplinary action against an applicant or controlling interest including:

1. the nature and seriousness of any violation for which a sanction was imposed;

2. the type of disciplinary action imposed, including the amount of any applicable fine imposed;

3. the number of prior disciplinary actions;

4. compliance with any conditions or requirements of any disciplinary action;

5. the length of time the applicant operated a facility or program without any violation since the most recent violation for which a disciplinary action was imposed; and

6. any failure by the applicant or controlling interest to comply with any settlement agreement with the Agency.

(b) If a licensee, applicant, owner, manager, or controlling entity has previously been determined to have operated a facility or program without a license or with an expired license, when a license was required by Florida Statutes or by rule, the length of time the facility or program operated without a license or with an expired license. Operating a facility or program with an expired license constitutes operating a facility or program without a license.

(c) If a licensee or controlling entity has had a license to operate a facility or program revoked by a state agency, including the:

1. license revocation; and

2. length of time that has passed since license revocation.

(d) Whether a licensee or controlling entity has received a bankruptcy order of discharge.

(e) Whether the Department of Children and Families has verified that the applicant or employee of the applicant is responsible for abuse, neglect, exploitation, or abandonment of a child or the abuse, neglect, or exploitation of a vulnerable adult in any health care setting.

(f) Whether the Agency has determined that there is clear and convincing evidence that the applicant is unqualified for a license because of a lack of good moral character. For purposes of this paragraph, "good moral character" means a personal history of honesty, fairness, and respect for the rights of others and for state and federal law.

(g) Any failure by the licensee to notify the Agency about a change of ownership in accordance with Rule 65G-2.0021, F.A.C.

(h) Whether there has been any prior disciplinary action under the license being renewed. This includes any prior disciplinary actions and verified findings against either the licensee or the licensee's employees. This also includes disciplinary action taken in accordance with section 393.0673(2), F.S.

(i) Whether a prior license was relinquished after notification to the licensee of:

1. an investigation for disciplinary action, or
2. disciplinary action that has been initiated or pending.

~~(6)(5)~~ No change.

~~(7)(6)~~ A license shall be valid for the dates specified on the license ~~but shall not exceed 1 year~~. A license which has not been renewed prior to the expiration date is invalid and the facility or program shall be considered unlicensed except as otherwise provided under ~~s~~Section 120.60(4), F.S.

~~(8)(7)~~ Each facility or program, regardless of whether it is owned or managed under a single individual, partnership, association, joint venture, company, sole proprietorship, corporation, limited liability corporation, or professional limited liability corporation, must operate under a separate and distinct license. A license to operate a facility or program is not assignable and is valid only for the applicant identified on the application, and for the premises and purposes specified on the license.

~~(9)(8)~~ Prior to issuing an initial license or renewing an existing license, the facility or program must be inspected by the Agency in accordance with Rule 65G-2.0032, F.A.C., to ensure that the facility or program meets the physical and safety standards of this chapter. Unless otherwise set forth in a conditional license, any deficiencies identified during the site inspection must be remediated by the applicant and the Agency must have confirmed the successful remediation prior to the issuance of a license or license renewal. The licensee must give at least 30 days' notice to the Regional Office in writing prior to the licensee's intent to close a licensed facility or program, intent to discontinue responsibility for the management of a

licensed facility or program, or intent to sell or lease the facility or program to another owner or operator. The applicant's failure to provide adequate and timely notice of a facility's or program's intent to close or the applicant's intent to sell or lease a facility or program shall be considered during the review of future license applications by the applicant.

~~(a) Notice of a licensee's intent to close that is delivered to the Agency between 20 and 30 days prior to the closure of the facility or program shall be considered a Class III violation for each facility resident.~~

~~(b) Notice of a licensee's intent to close that is delivered to the Agency between 10 and 19 days prior to the closure of the facility or program shall be considered a Class II violation for each facility resident.~~

~~(c) Notice of a facility's or program's intent to close that is provided less than 10 days prior to the closure of the facility or program shall be considered a Class I violation for each facility resident.~~

(10) Non-responsive applicant. If certified mail sent to the provider's address of record, or mailing address if applicable, is returned as unclaimed or undeliverable, the Agency will send a copy of the letter by regular mail to the provider's address of record, or mailing address if applicable, with a copy to the applicant's address if different from the provider. The applicant must respond to the request within 21 days of the date of the letter sent by regular mail. If timely response is not received, the applicant will be considered non-responsive, and the application will be subject to withdrawal or denial.

(11) An application is considered complete upon receipt of:

- (a) All required documents, information and required fees;
- (b) All required background screening results; and

(c) Completion of a satisfactory inspection if required by authorizing statutes or rules. Satisfactory inspection means no regulatory violations exist, or all prior violations found have been determined by the Agency to be corrected.

(12) A licensure inspection will not be authorized until paragraphs (11)(a) and (b) of this rule have been satisfied.

~~(13)(9)~~ The licensee must give at least 30 days written notice to the Agency prior to the licensee's intent to close a licensed facility or program. Each facility or program owned and managed under a single corporation, firm, partnership or association must operate under a separate and distinct license.

~~(14)(10)~~ If the applicant fails to submit a complete application prior to the expiration of the facility's or program's existing license, the application shall be considered an initial application rather than a renewal application.

(15) No facility or program licensed under this chapter shall provide services to non-citizens without a legal residency status.

~~(11) This rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.~~

~~Rulemaking Authority 393.066(8), 393.0662(15), 393.067(1), 393.067(7), 393.501(1) FS. Law Implemented 393.0655, 393.067, 393.0673, 393.13 FS. History—New 7-23-14, Amended 2-27-25,\_\_\_\_\_.~~

### **65G-2.0021 Change of Ownership.**

(1) Application Required. A license to operate a facility or program is not assignable or transferable and is valid only for the individual, entity, premises, and purposes specified on the license.

(2) The transferring facility or program is the licensee, and the receiving or transferee facility or program is the applicant.

(3) A change of ownership of a facility or program is not a transfer of the license itself consistent with Rule 65G-2.002, F.A.C.

(4) The licensee and applicant are jointly responsible for providing written notice to the Agency 90 days prior to the intended change of ownership. Failure to notify the Agency will result in disciplinary action. The notice shall be in writing and shall include:

(a) intended effective date of closure, transfer, or purchase;

(b) name of the licensee;

(c) name of the new entity, if applicable;

(d) signature of the licensee; and

(e) copy of any business agreement(s), purchasing agreement(s), or other changes of ownership agreement(s) between the licensee and the applicant.

(5) Copies of the notice must be provided to the licensee, the applicant, and the Agency.

(6)(a) The applicant's failure to provide adequate and timely notice of a facility's or program's intent to take over operation of the facility or program shall be considered during the review of the applicant's initial application by the receiving facility or program or controlling interest, including whether there are any residents or participants remaining in the facility or program.

(b) The licensee's failure to provide adequate and timely notice of a facility's or program's intent to complete a change of ownership under this rule shall be considered during the review of any future applications of the transferring facility or program or controlling interest, including whether there are any residents or participants remaining in the facility or program.

(7) A person or entity that has received the business ownership of a facility or program by way of a transfer must still submit an application for licensure and receive a license before it may operate as a facility or program under section 393.067, F.S.

(8) The applicant, or receiving facility or program, must submit a license application using License Application Form

65G-2.002-A (December 2025), which is incorporated by reference in Rule 65G-2.002, F.A.C., to the Agency 60 days prior to the intended effective date of the change of ownership.

(a) A license application must include the intended effective date of the change of ownership.

(b) The change of ownership intended effective date cannot be prior to the date the application is received and approved by the Agency.

(c) Failure to submit an application for licensure prior to the intended effective date of a change of ownership to a different legal entity constitutes unlicensed activity.

(d) Both the licensee and applicant facility or program are jointly and severally liable under this rule chapter for any lapse in the continuity of care due to an improper change in ownership as outlined in this rule.

(e) All required application documents and information must be received with the application or within 21 days of the request by the Agency with the exception of the transferee's proof of a written right to occupy, which includes and is not limited to, a lease, contract for sale of the property, or other written record of the right to occupy.

(9) When the licensee's license application is submitted for renewal, the pending renewal will be administratively withdrawn from review if the applicant's initial application is approved with an effective date prior to the expiration of the licensee's license.

(10) Expiration of the licensee's license prior to the approval of the applicant's initial license application, when no renewal application has been submitted, may result in the denial of an applicant's initial license application.

(11) If the applicant has not been issued the license on the effective date of the change of ownership, documentation must be submitted by the licensee that provides for continuation of operation of the licensee for those days between the date of the change of ownership and the date the applicant is licensed by the Agency.

~~Rulemaking Authority 393.067(1), 393.067(7), 393.0673(8), 393.501(1) FS. Law Implemented, 393.067, 393.0673 FS. History—New \_\_\_\_\_.~~

### **65G-2.003 Length of Licenses.**

The Agency shall determine the length of a program or facility's license based on the following:

(1) No change.

(2) ~~A license which has been renewed shall be issued for a period specified therein with an effective date being the date of the expiration of the previous license. Residential facilities with no current residents but which meet all applicable licensing standards shall be granted a one year license. However, such facilities shall have an on-site licensure review by the Regional Office within 30 days following the admission of their first~~

resident to ensure that they are in compliance with the requirements of Chapter 393, F.S., and with the requirements of this rule chapter which could not be previously monitored.

(3) A one month license shall be issued to facilities or programs that are awaiting administrative actions by the Agency or another state agency in order to complete requirements for Agency licensing. This shall include facilities or programs that are pursuing administrative or judicial appeals of Agency action and facilities or programs which are pending a fire inspection. Subsequent and consecutive one month licenses shall be issued if the matter has not been resolved within the initial one month licensure period.

(4) A three month license shall be issued to an existing facility or program which does not have any ongoing Class I violations, but fails to meet all requirements necessary for license renewal, for which no waiver has been approved by the Agency. A three month license shall be accompanied by an approved plan of correction. Failure to complete the actions specified in the plan of correction within the time limit specified in the plan shall result in the denial of the facility's or programs's application for license renewal.

(a) If the deficiencies have been corrected at the expiration of the three month license, and there are no other outstanding deficiencies, a one year license shall be issued.

(b) If the previously identified deficiencies have been corrected but new deficiencies are identified, a second three month license may be issued.

(c) A third consecutive three month license shall only be granted at the approval Agency's Director or the Director's designee and shall only be granted if the licensee has made substantial progress to correct the facility's or program's remaining deficiencies. If the facility or program is not in full compliance with all licensing standards prior to the expiration of their third consecutive three month license, the licensee's application for license renewal shall be denied.

(5) A license shall not be issued to any facility or program whose license has been suspended on an emergency basis.

(3)(6) The issuance of a license does not constitute a waiver of any statutory or rule violations by the licensee and does not prevent the Agency from seeking administrative disciplinary action sanctions against the licensee for violations committed by the licensee that occurred during the term of previous licenses, up to a period of two years, for the same facility or program.

(7) This rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.

Rulemaking Authority 393.067(1), 393.067(7), 393.0673(8), 393.501(1) FS. Law Implemented 393.067, 393.0673 FS. History—New 8-13-78, Formerly 10F-6.05, 10F-6.005, 65B-6.005, Amended 7-1-14, 2-27-25, \_\_\_\_.

### 65G-2.0032 Agency Monitoring and Oversight.

(1) The Agency shall conduct ongoing monitoring monitor of each facility or program, prior to the issuance of an initial license or the renewal of an existing license. In addition, the Agency shall conduct ongoing monitoring of each facility or program, either unannounced or announced, in order to ensure the facility or program is in full compliance with the applicable requirements of Chapter 393, F.S., and Agency the administrative rules adopted pursuant to Chapter 393, F.S. Each monitoring checklist shall be verified by the signature of the most senior facility or program staff member present during the monitoring. The Agency may temporarily suspend surveys for a specific time or location if the Agency determines that:

(a) A recent, impending, or ongoing disaster or emergency situation has made the monitoring unsafe or impossible;

(b) The residential facilities identified have no current residents, and may be monitored on a less frequent basis, or

(c) Monitoring should be suspended within a designated area or timeframe to promote the health, safety, or welfare of the public.

(2) through (3) No change.

(4) Licensees and employees of the licensee must permit any Agency staff or designated agent of the State of Florida, who presents proper State of Florida-issued identification, to enter and inspect any part of any facility or program building or to inspect records relating to the operation of the facility or program or the provision of client care at any time that staff, management, owners, directors, residents, or participants are present. A violation of this subsection shall constitute a Class II violation.

(a) Agency staff or its designee shall be permitted to obtain any documents related to the operation of the facility or program for those residents or participants.

(b) Agency staff or its designee shall be permitted to obtain photographs, video recordings or other methods of memorialization, of the residence or program site, the condition therein, and the condition of the residents or participants.

(5) Upon the Agency's request, the licensee must make available documentation relating to the licensee's financial ability to continue operations of the facility or program in accordance with the requirements of Chapter 65G-2, F.A.C., for up to 60 days without dependence upon payment from the state or other third-party fees from residents or participants. Such documentation shall include bank account statements, pay stubs, documentation of a line of credit, or any other documents which would demonstrate the current ability of the licensee to continue operations. This rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.

(6) Licensees and employees shall afford Agency staff the opportunity to observe any safety drills or protocols to verify the effectiveness and efficiency of evacuations.

(7) The Agency may temporarily suspend monitoring for a specific time or location if the Agency determines that a recent, impending, or ongoing disaster, or emergency situation has rendered monitoring unsafe or impossible.

(8) Licensees shall have an on-site licensure review by the Agency within 30 days following the admission of their first resident or participant to ensure that they are in compliance with the requirements of chapter 393, F.S., and Chapter 65G-2, F.A.C.

(9) Any records or documents that a licensee is required to provide or maintain shall be accurate and shall not include any false or misleading information.

(10) A licensee or applicant shall not make willful or intentional misstatements, orally or in writing, to intentionally mislead Agency staff, the Department of Children and Families, or law enforcement in the performance of their duties.

*Rulemaking Authority 393.067(1), 393.067(7), 393.0673(8), 393.501(1) FS. Laws Implemented 393.067, 393.0673 FS. History—New 7-1-14, Amended 2-27-25,\_\_\_\_\_.*

#### **65G-2.004 License Violations - Non-Disciplinary Actions.**

(1) Notice of Noncompliance. The Agency shall issue a Notice of Noncompliance as provided under Section 120.695, F.S., in response to the first occurrence of a Class II or III violation that is not corrected prior to the completion of the on-site monitoring which identified the aforementioned violation. Within 15 days following receipt of a Notice of Noncompliance, the licensee must submit a written Corrective Action Plan, to the regional office. Failure to submit a Corrective Action Plan within the required timeframe or repeat occurrences of Class II or III violations shall result in the imposition of disciplinary action as described in paragraph 65G-2.0041(4)(b) or (c), F.A.C. For the purposes of this subsection, a first occurrence of a Class II or III violation refers to those violations which have not been previously observed and cited by Agency staff within the past 12 months.

(a) The Agency shall issue a Notice of Noncompliance as provided under section 120.695, F.S., in response to the first occurrence of a minor violation unless corrected before the completion of the on-site monitoring which identified the minor violation.

(b) The Agency shall include at a minimum the following with a Notice of Noncompliance:

1. The specific rule that is being violated;
2. Information on how to comply with the rule, which may include directions for the licensee to formulate a Corrective Action Plan as set forth in subsection (2); and

3. A specific time frame within which the licensee must take corrective action to come into compliance with the rule.

(2) Corrective Action Plan. The licensee must develop and submit to the Agency a Corrective Action Plan within 15 days following the receipt of a Notice of Noncompliance. The Corrective Action Plan shall specify the actions the facility or program will take to correct each of the violations identified and to comply with the applicable licensing requirements, the name of the staff person(s) responsible for completing each action, and a timeframe for accomplishing each action. All action taken to correct a violation shall be documented in writing by the licensee. Failure to comply with the Corrective Action Plan shall result in the imposition of disciplinary action as described in paragraph 65G-2.0041(4)(b) or (c), F.A.C. The Agency shall reject any Corrective Action Plan that fails to identify all of the information described above. If the Agency rejects a Corrective Action Plan, the Agency shall notify the licensee in writing of the reasons for rejection and shall state that the licensee has 10 days from receipt of the notification to submit an amended Corrective Action Plan.

(a) Within 15 calendar days following the receipt of a Notice of Noncompliance, the licensee must submit a proposed written Corrective Action Plan to the designated regional office. Corrective Action Plan within the required timeframe or repeat occurrences of same or similar violations shall result in the imposition of disciplinary action as described in paragraph 65G-2.0041(4)(b) or (c), F.A.C. For the purposes of this subsection, a first occurrence of a violation refers to those violations which have not been previously observed and cited by Agency staff within the past 12 months.

(b) The Corrective Action Plan shall specify in writing all the following:

1. The specific actions the facility will take to correct each of the violations identified and to comply with the applicable licensing requirements;

2. The name(s) of the staff person(s) responsible for completing each action; and

3. A timeframe for accomplishing each action.

(c) The Agency shall reject any proposed Corrective Action Plan that fails to identify all of the information defined in paragraph (2)(b) of this rule.

(d) If the Agency rejects a Corrective Action Plan, the Agency shall notify the licensee in writing of the reasons for rejection and shall state that the licensee has 10 days from receipt of the notification to submit an amended Corrective Action Plan. If the licensee fails to timely submit an amended Corrective Action Plan that addressed the deficiencies defined in the 10-day notice sent by the Agency, the Agency shall consider this to be an additional violation(s).

(e) All action taken to correct a violation shall be documented in writing by the licensee.

(f) Failure to fully come into compliance with the rule specified in the Notice of Noncompliance or comply with the terms of a Corrective Action Plan shall result in the imposition of disciplinary action as defined in Rule 65G-2.0041, F.A.C. This includes imposing disciplinary action based on both the underlying violation and on the failure to timely correct the underlying violation after receipt of a Notice of Noncompliance or Corrective Action Plan that was approved or provided by the Agency.

~~(3) Moratoriums. A moratorium on the admission of new clients into a facility or program may be imposed pursuant to the criteria stated in Section 393.0673(6), F.S.~~

~~(4) Relinquishment and license expiration. The expiration or relinquishment of a license that is pending administrative sanctions does not render the administrative sanctions moot. The Agency may continue to seek administrative sanctions against a licensee for violations that occurred during a licensee's management or oversight of a facility or program even if the licensee ceases to own or lease the facility or program, operate the facility or program, or provide services in the facility or program after the violations have occurred.~~

~~Rulemaking Authority 393.067(1), 393.067(7), 393.0673(8), 393.0673, 393.501(1) FS. Law Implemented 393.067, 393.0673 FS. History—New 7-1-14, Amended 1-23-25,\_\_\_\_\_.~~

#### **65G-2.0041 License Violations – Disciplinary Actions.**

(1) Under a final order of the Agency, the Agency shall impose Determination of disciplinary action against a licensee for the violation of any facility or program standard as provided in chapter 393, F.S., or the Agency's rules. First offenses of minor violations will be issued a Notice of Noncompliance, as set forth within this rule chapter, prior to disciplinary action involving abuse, neglect, or exploitation. In determining whether to pursue disciplinary action in response to verified findings by the Department of Children and Families of abuse, neglect, or exploitation involving the licensee or direct service providers rendering services on behalf of the licensee, the Agency will consider the licensee's corrective action plan and other actions taken to safeguard the health, safety, and welfare of residents upon discovery of the violation. Considerations shall include the following:

(a) Each day a violation occurs, or continues to occur, constitutes a separate violation and is subject to a separate and additional disciplinary action. Whether the licensee properly trained and screened, in compliance with Section 393.0655, F.S., the staff member(s) responsible for the violation;

(b) Failure to comply with the terms of a Corrective Action Plan or settlement agreement shall constitute a separate violation subject to a separate and additional administrative proceeding and additional disciplinary action from the underlying violation. Whether, upon discovery, the licensee

~~immediately reported any allegations or suspicions of abuse, neglect, or exploitation to both the Florida Abuse Hotline as well as the Agency;~~

~~(c) A Plan of Remediation shall be in response to a violation of these rules and shall be included as part of a disciplinary action imposed as a result of the violations. Failure to timely complete a Plan of Remediation shall constitute an additional and separate violation beyond the violation for which it was implemented. Whether the licensee fully cooperated with all investigations of the violation;~~

~~(d) Whether the licensee took immediate and appropriate actions necessary to safeguard the health, safety and welfare of residents during and after any investigations.~~

~~(e) Whether the occurrence is a repeat violation and the nature of such violation.~~

~~(f) The specific facts and circumstances before, during, and after the violation.~~

~~(2) Factors considered when determining sanctions to be imposed for a violation. The Agency shall consider any aggravating and mitigating the following factors when determining appropriate disciplinary action, which include the following the sanctions for a violation:~~

~~(a) The severity gravity of the violation; including whether the incident involved the abuse, neglect, exploitation, abandonment, death, or serious physical or mental injury of a resident or participant, whether death or serious physical or mental injury could have resulted from the violation, and whether the violation has resulted in permanent or irrevocable injuries, damage to property, or loss of property or client funds;~~

~~(b) whether the incident involved the abuse, neglect, exploitation, abandonment, death, or serious physical or mental injury of a resident or participant; The actions already taken or being taken by the licensee to correct the violations, or the lack of remedial action;~~

~~(c) The connection between the death or serious physical or mental injury and the violation; types, dates, and frequency of previous violations and whether the violation is a repeat violation;~~

~~(d) any remedial actions taken to correct the violation and the timeliness of such actions; The number of residents or participants served by the facility or program and the number of residents or participants affected or put at risk by the violation;~~

~~(e) Whether the licensee willfully committed the violation, was aware of the violation, was willfully ignorant of the violation, or attempted to conceal the violation;~~

~~(f) the number of individuals impacted; The licensee's cooperation with investigating authorities, including the Agency, the Department of Children and Families, or law enforcement;~~

~~(g) whether the licensee reported the violation within the timeframes described in this chapter; The length of time the violation has existed within the home without being addressed; and;~~

~~(h) whether the licensee has cooperated with the Agency, or any other investigating regulatory or law enforcement agency regarding the violation; The extent to which the licensee was aware of the violation.~~

~~(i) whether there have been repeat instances of the same or similar violation or any other violation by the licensee, with consideration of the amount of time that has passed between violations;~~

~~(j) whether a violation involved more than one employee of the licensee; and~~

~~(k) any other relevant mitigating or aggravating factors.~~

~~(3) The Agency may take disciplinary action against licensees in accordance with sections 393.067 and 393.0673, F.S., as follows: Additional considerations for Class I violations, repeated violations or for violations that have not been corrected.~~

~~(a) a moratorium on admissions; Subject to the provisions of subsection 65G-2.0041(1), F.A.C., in response to a Class I violation, the Agency may either file an Administrative Complaint against the licensee or deny the licensee's application for renewal of licensure.~~

~~(b) the suspension, denial, or revocation of the license, including nonrenewal of the license; and A second Class I violation, occurring within 12 months from the date in which a Final Order was entered for an Administrative Complaint pertaining to that same violation, shall result in the imposition of a fine of \$1,000 per day per violation, revocation, denial or suspension of the license, or the imposition of a moratorium on new resident admissions.~~

~~(c) administrative fines, as follows: The intentional misrepresentation, by a licensee or by the supervisory staff of a licensee, of the remedial actions taken to correct a Class I violation shall constitute a Class I violation. The intentional misrepresentation, by a licensee or by the supervisory staff of a licensee, of the remedial actions taken to correct a Class II violation shall constitute a Class II violation. The intentional misrepresentation, by a licensee or by the supervisory staff of a licensee, of the remedial actions taken to correct a Class III violation shall constitute a Class III violation.~~

~~1. each fine shall not exceed \$1,000 per violation;~~

~~2. each day a violation occurs constitutes a new violation; and~~

~~3. no fine issued under this rule chapter may exceed the limitation in section 393.0673, F.S.~~

~~(d) Failure to complete corrective action within the designated timeframes may result in revocation or non-renewal of the facility's or program's license.~~

~~(4) The Agency may impose more than one type of disciplinary action for a single violation. Sanctions. Fines shall be imposed, pursuant to a final order of the Agency, according to the following three tiered classification system for the violation of facility standards as provided by law or administrative rule. Each day a violation occurs or continues to occur constitutes a separate violation and is subject to a separate and additional sanction. Violations shall be classified according to the following criteria:~~

~~(a) Class I statutory or rule violations are violations that cause or pose an immediate threat of death or serious harm to the health, safety or welfare of a resident and which require immediate correction.~~

~~1. Class I violations include all instances where the Department of Children and Families has verified that the licensee is responsible for abuse, neglect, or abandonment of a child or abuse, neglect or exploitation of a vulnerable adult. For purposes of this subparagraph, a licensee is responsible for the action or inaction of a covered person resulting in abuse, neglect, exploitation or abandonment when the facts and circumstances show that the covered person's action, or failure to act, was at the direction of the licensee, or with the knowledge of the licensee, or under circumstances where a reasonable person in the licensee's position should have known that the covered person's action, or failure to act, would result in abuse, neglect, abandonment or exploitation of a resident.~~

~~2. Class I violations may be penalized by a moratorium on admissions, by the suspension, denial or revocation of the license, by the nonrenewal of licensure, or by a fine of up to \$1,000 dollars per day per violation. Administrative sanctions may be levied notwithstanding remedial actions taken by the licensee after a Class I violation has occurred.~~

~~3. All Class I violations must be abated or corrected immediately after any covered person acting on behalf of the licensee becomes aware of the violation other than the covered person who caused or committed the violation.~~

~~(b) Class II violations are violations that do not pose an immediate threat to the health, safety or welfare of a resident, but could reasonably be expected to cause harm if not corrected. Class II violations include statutory or rule violations related to the operation and maintenance of a facility or to the personal care of residents which the Agency determines directly threaten the physical or emotional health, safety, or security of facility residents, other than Class I violations.~~

~~1. Class II violations may be penalized by a fine of up to \$500 dollars per day per violation.~~

~~If four or more Class II violations occur within a one year time period, the Agency may seek the suspension or revocation of the facility's license, nonrenewal of licensure, or a moratorium on admissions to the facility.~~

~~2. A fine may be levied notwithstanding the correction of the violation during the monitoring visit if the violation is a repeat Class II violation.~~

~~(e) Class III violations are statutory or rule violations related to the operation and maintenance of the facility or to the personal care of residents, other than Class I or Class II violations.~~

~~1. Class III violations may be penalized by a fine of up to \$100 dollars per day for each violation.~~

~~2. A repeat Class III violation previously cited in a notice of noncompliance may incur a fine even if the violation is corrected before the Agency completes its monitoring of the facility or program.~~

~~3. If twenty or more Class III violations occur within a one year time period, the Agency may seek the suspension or revocation of the facility's or program's license, nonrenewal of licensure, or moratorium on admissions to the facility or program.~~

~~(d) The aggregate amount of any fine imposed pursuant to this section shall not exceed \$10,000.~~

~~(5) Failure to pay any fine or adhere to a moratorium, suspension, or any other disciplinary measure implemented in accordance with this chapter shall constitute a separate violation.~~

~~(6) The expiration or relinquishment of a license that is pending administrative disciplinary action does not render the administrative proceeding moot and the licensee may still be subject to administrative disciplinary action. The Agency may continue to seek administrative disciplinary action against a licensee for violations that occurred during a licensee's management or oversight of a facility or program even if the licensee ceases to own, lease, operate, or provide services in the facility or program after the violations have occurred.~~

~~(7) For purposes of disciplinary action under these rules and chapter 393, F.S., for verified findings of abuse, neglect, abandonment, or exploitation of a child or vulnerable adult, the licensee is responsible not only for administration of the facilities in compliance with the standards provided by statute and administrative rule, but is ultimately responsible for the care and supervision of the clients in the facility or the participants of the program.~~

~~(a) A licensee may not delegate to others the ultimate responsibility for the safety of the clients in its care.~~

~~(b) A licensee is subject to disciplinary action for an employee's lapse in care or supervision of the clients at the facility or the participants of the program in which a verified finding of abuse, neglect, abandonment, or exploitation occurred at the licensee's facility or program.~~

~~(8) Disciplinary guidelines applicable to disciplinary actions taken under these rules and chapter 393, F.S., are set forth within the APD Licensing Disciplinary Chart Form 0041 (December 2025), which is incorporated herein by reference~~

and \_\_\_\_\_ available \_\_\_\_\_ at <http://flrules.org/Gateway/reference.asp?No=Ref-18973>. A copy may also be obtained by request to the Agency.

*Rulemaking Authority 393.067(1), 393.067(7), 393.0673(8), 393.501(1) FS. Law Implemented 393.067, 393.0673 FS. History—New 7-1-14, Amended 1-23-25,\_\_\_\_\_.*

### **65G-2.005 License Denial, Suspension or Revocation.**

~~(1) The Agency shall deny an application for licensure if: A license to operate a residential facility or program is not assignable and is valid only for the entity, premises, and purposes specified in the license.~~

~~(a) the applicant fails to provide the Agency with a complete application for licensure and has failed to respond to the Agency's request for the missing information by the deadline set by the Agency;~~

~~(b) the applicant or a controlling entity has an arrest awaiting final disposition for, has been found guilty of (regardless of adjudication), entered a plea of nolo contendere or guilty to, or has been adjudicated delinquent and the record has not been sealed or expunged for, any offense identified in sections 393.0655 or 435.04, F.S.;~~

~~(c) the applicant or a controlling entity has had a license to operate a residential facility revoked by the Agency, the Agency for Health Care Administration (AHCA), the Department of Children and Families (DCF), Department of Juvenile Justice (DJJ), or the Department of Health (DOH);~~

~~(d) the applicant or a controlling entity has had a previous disciplinary action taken against them by Medicaid or Medicare;~~

~~(e) the applicant or a controlling entity has voluntarily relinquished a license to operate a residential facility in lieu of the Agency, AHCA, DCF, DJJ, or DOH pursuing an investigation or an administrative complaint against the applicant or a controlling entity;~~

~~(f) the applicant fails to provide the Agency with satisfactory proof of financial ability to operate for up to 60 days without dependence upon payment from the state or other third-party fees;~~

~~(g) the Agency's monitoring of the applicant's facility reveals violations of chapter 393, F.S., or this rule chapter that the applicant does not correct within the timeframe set by the Agency;~~

~~(h) DCF has verified or substantiated that the applicant or a controlling entity, is responsible for the abuse, neglect, or abandonment of a child or the abuse, neglect, or exploitation of a vulnerable adult;~~

~~(i) the applicant or the applicant's agent or employee falsely represented or omitted a material fact in its license application submitted under section 393.067, F.S.;~~

(j) the applicant or a controlling entity has had a professional license revoked by a state licensing entity; or

(k) the Agency, AHCA, DOH, DJJ, or DCF have taken or are in the process of taking disciplinary action against the applicant's or a controlling entity's other licensed facility or facilities.

(2) In evaluating an application for licensure or renewal, the Agency shall consider whether DCF has verified or substantiated that the applicant's employee is responsible for the abuse, neglect, or abandonment of a child or the abuse, neglect, or exploitation of a vulnerable adult. In conducting the evaluation, the Agency shall consider the following factors:

(a) the severity of the nature of the incident;

(b) whether the incident involved the abuse, neglect, exploitation, abandonment, death, or serious physical or mental injury of a resident or participant;

(c) any remedial actions taken by the applicant in response to the incident and the timeliness of such actions;

(d) whether the applicant was aware of the incident, was willfully ignorant of the incident, or attempted to conceal the incident;

(e) the number of individuals impacted by the incident;

(f) whether the applicant reported the incident within the timeframes described in this rule chapter;

(g) whether the applicant has cooperated with the Agency or any other investigating regulatory or law enforcement agency regarding the incident(s);

(h) whether there have been repeat instances of the same or similar incident(s), with consideration of the amount of time that has passed between incidents;

(i) whether an incident(s) involved more than one employee of the applicant; and

(j) any other relevant mitigating or aggravating factors.

(3)(2) This rule is in addition to any disciplinary action listed in Rule 65G-2.0041, F.A.C. A change of licensee or a move of the facility or program to another location shall result in the revocation of the license.

*Rulemaking Authority 393.067(1), 393.067(7), 393.0673(8), 393.501(1), 393.067, 393.0673 FS. Law Implemented 393.067, 393.0673, 393.673 FS. History—New 8-13-78, Formerly 10F-6.03, 10F-6.003, 65B-6.003, Amended 7-1-14, 2-27-25, \_\_\_\_.*

### **65G-2.006 Licensed Residential Facility Capacity.**

(1) The maximum number of residents in each that may be served by a facility, shall be determined based upon the size of the physical facility, the number of staff and their qualifications, the type of facility license issued, and any limitations imposed by the Fire Marshal, Department of Health, and other relevant state and local authorities. The licensed capacity shall be noted on the license.

(a) A facility shall not serve more clients than the maximum capacity, as stated on the license.

(b) The licensed capacity shall be determined by the Agency after consideration of the following, as described in Rule 65G-2.007, F.A.C., General Residential Facility Standards:

1. the individual needs of each resident;

2. the number of staff members and direct service providers, and each staff member's or direct service provider's qualifications;

3. the experience, education, and qualifications of the facility operator or owner;

4. the type of services provided; and

5. any limitations imposed by the Fire Marshal and other relevant federal, state, and local authorities.

(c) The Agency shall reassess the maximum number of residents that may be served by a facility at any time the licensee requests a change of the facility's capacity determination. This shall be reviewed using the criteria listed under paragraph (1)(b) of this rule and:

1. the level of active and appropriate supervision as evidenced by the staffing pattern and the number of staffing hours provided;

2. the frequency and severity of incident reports and violations that occurred or were identified during the current or preceding licensure year, which could be reasonably attributable to the number of residents served by the facility; and

3. the licensee's response and cooperation with the Agency and whether the licensee has completed all Corrective Action Plans.

(d) If a licensee requests to increase the capacity of the facility, the licensee must submit a request to the Regional Office in writing at least 30 days prior to the proposed change. The request must:

1. include documentation showing that the licensee has successfully passed a fire inspection; and

2. demonstrate that the facility is in compliance with any local governmental or municipal zoning requirements as defined in section 419.001, F.S., and Rule 65G-2.015, F.A.C.

(e) The Agency shall monitor the facility and reassess the staffing pattern and the number of staff whenever it receives a request for capacity increase.

(f) If the request is approved, the Agency shall issue an amended license setting forth the new maximum capacity for the remainder of the previously existing license.

(g) The Agency may waive the 30-day prior notice requirement in paragraph (1)(d) of this rule due to an emergency or natural disaster wherein the licensee, after consultation and approval by the Agency, may increase the capacity of the facility.

(2) Census – the Licensee shall maintain one census, for each license issued, of residents living at the facility, regardless

~~of whether they are clients of the Agency. The census information shall include the names, dates of birth, and if the resident is a client, the level of waiver services reimbursement, and client eligibility diagnosis. For changes to the census the licensee shall inform the Agency in writing prior to any change in the census to include an updated census. The updated census shall be sent to the Agency within five calendar days. The maximum number of residents who may be served by a facility shall be reassessed annually as part of the license renewal process. The Agency reserves the right to decrease the licensed capacity of a facility based upon an annual review of the individual needs of each client or resident, the level of active and appropriate supervision, and the background, experience, and skill of the direct service providers. The Agency shall also consider incident reports and violations that occurred or were identified during the current or preceding licensure year, which could be reasonably attributable to the number of residents served by the facility.~~

~~(3) Needs and characteristics of residents in each facility. The types of residents that may be served by a facility shall be determined on the basis of construction, design and use of the facility, the type of programs and services offered by the facility, the number and qualifications of the personnel employed by the facility, and the level of care and services needed by residents.~~

~~(a) Each facility licensed under this rule chapter shall serve only those residents whose characteristics, level of care, age, and sex are included on its license application.~~

~~(b) The Agency shall determine the needs and characteristics of residents who may be served by a facility based on a review of the following:~~

~~1. the layout, accessibility, and use of the facility;~~

~~2. the number of staff and direct care providers employed by the facility;~~

~~3. qualifications of staff; and~~

~~4. the level of care and services needed by the residents.~~

~~(c) The Agency shall reassess the characteristics of residents that may be served by a facility at any time the licensee requests a change of the facility's capacity. This shall be reviewed using the criteria listed under paragraph (3)(b) of this rule and:~~

~~1. the level of active and appropriate supervision as evidenced by the staffing pattern and the number of staffing hours provided;~~

~~2. the frequency and severity of incident reports and violations that occurred or were identified during the current or preceding licensure year, which could be reasonably attributable to the characteristics of residents served by the facility; and~~

~~3. the licensee's response and cooperation with the Agency and whether the licensee has completed all Corrective Action Plans.~~

~~(d) If a licensee wishes to change the level of care, age, or sex of residents that may be served in the facility from what was specified within the licensee's most recent application for licensure, the licensee shall notify the Regional Office in writing 30 days prior to the proposed change. The Agency shall reinspect the facility if changes in the needs and characteristics of services provided or the level of care, age, or sex of residents served require additional modification to the home or staffing requirements. Upon approval the Agency shall inform the licensee and update the appropriate electronic systems to reflect the new needs and characteristics of residents served.~~

~~(4) The Agency's evaluation of the characteristics, level of care and demographics of the facility's residents or maximum number of residents served by a facility does not constitute a determination that the licensed facility is being operated in a safe or effective manner, a determination that the facility is acting in full compliance with the licensing requirements of this chapter, or a determination that any individual staff member employed by the facility is qualified or properly trained to serve the facility's residents. If a licensee wishes to increase or decrease the capacity of the facility, he or she shall notify the Regional Office in writing at least 30 days prior to the proposed change. Increases in licensed capacity shall not be granted unless the licensee has successfully passed a fire inspection that reflects the proposed capacity. Requests for capacity increases will require the facility to be resurveyed by Agency staff and, if approved, an amended license shall be issued setting forth the new maximum capacity for the remainder of the previously existing license.~~

~~(5) If a licensee wishes to change the types of residents that may be served in the facility, as specified within their most recent application for licensure, he or she shall notify the Regional Office in writing 30 days prior to the proposed change. The facility shall be resurveyed if changes in the types of residents served require additional modification to the home or staffing requirements, and if approved, an amended license shall be issued by the Agency.~~

~~(6) The Agency's evaluation of the type or maximum number of residents served by a facility does not constitute a determination that the licensed facility is being operated in a safe or effective manner, a determination that the facility is acting in full compliance with the licensing requirements of this chapter, or a determination that any individual staff members employed by the facility are qualified or properly trained to serve the facility's residents.~~

~~(7) Exceeding a facility's maximum authorized capacity or housing a resident type not authorized for the facility shall constitute a Class III violation.~~

Rulemaking Authority 393.067(1), 393.067(7), 393.501(1), 393.067 FS. Law Implemented 393.067 FS. History—New 8-13-78, Formerly 10F-6.02, 10F-6.002, 65B-6.002, Amended 7-1-14, \_\_\_\_\_.

**65G-2.007 General Residential Facility Standards.**

(1) Facility name and identification.

(a) No ~~residential~~ facility may be referred to or use names such as “nursing facility” or “rest facility” unless it is a nursing facility licensed under ~~c~~Chapter 400, F.S.

(b) No ~~residential~~ facility may use the word “school” in its name unless there is a state or county certified educational program operated within the facility.

(c) No ~~residential~~ facility may erect any exterior sign which would label the residents or functions of the facility by indicating that the facility serves persons with developmental disabilities.

~~(d) A violation of this subsection shall constitute a Class III violation.~~

(2) Leasing of property by licensees. If the licensee is not the owner of the property, the licensee must have a fully executed lease.

(a) The lease must be current at the time of initial licensure and renewal.

(b) The lease must not lapse during the term of the license.

(c) The terms of the lease must not preclude the facility from being able to operate as a group home or foster home in accordance with Chapter 65G-2, F.A.C.

(3)(2) General physical facility and site requirements. The facility is responsible for providing a healthy, safe, and caring residential environment that is clean, hygienic, and sanitary. For the facility to create such an environment, it must have and maintain the minimum standards as established by paragraphs (a) through (h) of this subsection, except in the event of impossibility such as a natural disaster or loss of power outside of the control of licensee.

(a) The facility must be free of any dangerous physical conditions and hazards. Interior and exterior building surfaces must be free of:

1. cracks, holes, tears, uneven projections, protruding nail splinters;

2. broken, warped, or loose boards, tile, linoleum, handrails, railings, plaster, lath, window panes, hanging fixtures;

3. exposed pipes or electric wiring;

4. water spillage or damage; and

5. tripping hazards.

(b) All areas of the facility occupied by residents, including bedrooms, common areas, hallways, bathrooms, and dining areas shall have natural or mechanical ventilation.

~~(c)(a)~~ No change.

~~(d)(b)~~ No change.

~~(e)~~(e) Each facility that public utility customer who requires medically essential service is solely responsible for any backup equipment or power supply and a planned course of action in the event of a power outage or interruption of service in accordance with sSection 366.15, F.S.

~~(d) Mobile homes or manufactured homes, as described in Section 320.01(2), F.S., may not be used for foster care facilities, group home facilities, or residential habilitation centers.~~

~~(f)(e)~~ The facility shall provide safe and sanitary housing. Floors, walls, ceilings, windows, doors, and all parts of the structures shall be of sound construction, properly maintained or in working order, and kept clean, hygienic, and sanitary as necessary to ensure the health and safety of the facility’s residents.

~~(g)(f)~~ No change.

~~(h)(g)~~ Exterior doors must not prevent individuals from exiting the building, but may utilize delayed egress systems provided such systems meet all of the following conditions:

1. ~~E~~gress is prevented for a maximum of 30 seconds;

2. ~~A~~pproval of the delayed egress system has been approved by the local authority having jurisdiction over fire safety or the State Fire Marshall; and;

3. ~~L~~ocks are automatically disengaged in the event of a fire, power outage, or activation of the fire alarm.

~~(h) A violation of this subsection shall constitute a Class II violation.~~

~~(4)(3) Common living and dining areas.~~

(a) A minimum of 35 square feet of combined living and dining area shall be provided per household member, excluding bedrooms, bathrooms, hallways, kitchens, utility rooms, garage, and laundry rooms.

(b) The living area shall be provided with an adequate number of appropriate furnishings for the usual functions of daily living. These furnishings shall be sturdily constructed, in working condition, and designed of satisfactory design to meet the daily needs of household members.

(c) The dining area furnishings shall be adequate in number, in working condition, well constructed and designed of satisfactory design to meet the daily needs of household members.

~~(d)~~ No change.

~~(e) A violation of this subsection shall constitute a Class III violation.~~

~~(5)(4) Kitchen.~~

~~(a)~~ No change.

(b) The kitchen shall have equipment, utensils, and supplies in good condition and working order to properly store, prepare, and serve the required number of meals. Chipped, cracked, and otherwise unsafe utensils or dishware shall not be

used. The kitchen shall have sufficient supplies of dish soap, paper towels, napkins, etc. supplied and paid for by the facility.

(c) Multi-use utensils, tableware, and equipment shall be thoroughly cleaned with hot water and disinfected after each meal. A violation of this subsection shall constitute a Class III violation.

(d) Cleaned and disinfected utensils, equipment, and all single-use articles shall be stored at least six inches above the floor in a clean, dry location and in a way that protects them from contamination by splashing, dust, and other contaminants.

(e) The food-contact surfaces of fixed equipment shall be protected from contamination. Such surfaces must be cleaned and disinfected, including equipment, counter tops, storage shelves, and similar areas. Food contact surfaces must be maintained in a clean, hygienic, and sanitary condition.

(f) All sinks shall be of sufficient size and depth to accommodate the utensils being washed.

(g) After cleaning, all equipment and utensils shall be dried. Cleaned equipment and utensils and all single-use articles shall be handled in a way that protects them from contamination.

(h) Dishwashers shall be properly installed and maintained in good repair and shall be operated in accordance with the manufacturer's instructions and specifications, which must be retained by the facility. Dishwashers should be kept clean and free from food and mineral deposits. Items being loaded into a dishwasher should be scraped and rinsed prior to loading. For efficiency purposes dishwashers should not be overloaded.

(i) In homes where stoves have ventilation hoods and devices, the ventilation hoods shall be designed to prevent grease or condensation from collecting on walls and ceilings and from dripping into food or onto food contact surfaces. Filters or other grease extracting equipment, if used, shall be readily removable for cleaning and replacement if not designed to be cleaned in place.

(6)(5) Bedrooms.

(a) Bedrooms shall be arranged to provide for so that resident privacy is assured. Bedroom doors shall not have vision panels except as may be necessary for residents who require visual supervision due to documented behavioral or medical issues. Direct access to a resident's bedroom from a common area is required. Sole access to a resident's bedroom shall not be through a bathroom or other bedroom.

1. Bedroom doors shall not have vision panels except as may be necessary for residents who require visual supervision due to documented behavioral or medical issues.

2. Direct access to a resident's bedroom from a common area is required. Sole access to a resident's bedroom shall not be through a bathroom or other bedroom.

3. In determining licensed capacity, only bedrooms that are fully accessible and available for resident use may be

considered. Bedrooms that are utilized exclusively by direct care staff, live-in caregivers, or the family members of live-in caregivers shall not be considered as available for resident use and will not be considered in determining the licensed capacity of the facility.

(b) For facilities initially licensed before July 1, 2014, with no lapse in licensure or change of licensee, can have prior to the date of this rule revision, a maximum of four residents sharing are allowed to share a bedroom. Facilities initially licensed on or after July 1, 2014, can receiving an initial license after the date of this rule revision are allowed to have a maximum of two residents sharing a bedroom.

(c) Single bedrooms for residents shall provide at least 80 square feet of usable floor space. Multi-occupancy bedrooms used by residents shall provide at least 60 square feet per person of usable floor space. Usable floor space shall include only those areas with vertical wall heights of five feet or more and does not include closet areas.

(d) Multi-occupancy bedrooms used by residents shall provide at least 60 square feet per person of usable floor space.

(e) Usable floor space shall include only those areas with vertical wall heights of five feet or more and does not include closet areas.

(f)(d) No change.

(g) No portable heaters shall be used in bedrooms in facilities serving six or fewer residents.

(h)(e) Dresser drawers and either, a wardrobe, or an enclosed closet space adequate to store the appropriate belongings of each resident shall be provided commensurate with any physical or behavioral limitations of the resident and the physical limitations of the facility. Additional storage space shall be available elsewhere in the facility to accommodate residents' luggage and large or seldom used personal belongings. Captain-style beds with drawers installed as part of the bed frame may be substituted or used as dresser drawers.

(i)(f) Each resident shall have an individual bed. Futons, hammocks, and sleeper sofas shall not be used as permanent bedding. Each resident's bed shall have a clean, firm, comfortable mattress which is free from fabric tears, holes, odors, loose springs, and noticeable sagging. Beds shall be of suitable dimensions to accommodate residents who are using them. Bunk beds shall not be used unless appropriate to the functioning level of the residents. If residents use bunk beds, they must be safe and sturdy and not be higher than two tiers. Residents who are not able to climb safely into or out of the top tier without staff assistance shall not be permitted to sleep in the upper tier.

1. Futons, cots, inflatable mattresses, hammocks, and sleeper sofas shall not be used as permanent bedding.

2. Each resident's bed shall have a clean, firm, comfortable mattress which is clean and in good condition, and free from fabric tears, holes, odors, loose springs, and noticeable sagging.

3. Beds shall be of suitable dimensions to accommodate residents who are using them. The bedding must consider and accommodate the physical needs and requirements of the individual resident.

4. Bunk beds shall not be permitted.

5. Enclosure bed system shall not be permitted unless it is required within a resident's approved behavioral plan under Chapter 65G-8, F.A.C., and is used in conformity therewith.

~~(j)(g)~~ The facility shall offer bedding and linens for each resident. ~~These shall include a suitable pillow, pillowcase, sheets, blanket, and a bedspread or comforter which shall all be clean and in good condition. A mattress cover or waterproof sheet shall be provided if needed by the resident due to allergies, incontinence, or other medical or physical reasons. Bedding shall be appropriate to the season. Bed linens shall be replaced with clean linens at least once each week, or more frequently as required. Residents shall not be permitted to sleep or rest on soiled beds and bed pillows. A resident may choose to purchase their own bedding and linens in order to personalize his or her bedroom. Bedding and linens purchased by the licensee must be available to accommodate the licensed capacity of the home.~~

1. These shall include a suitable pillow, pillowcase, sheets, blanket, and a bedspread or comforter which shall all be clean and in good condition.

2. All bedding and linens shall be clean and in good condition.

3. Bed linens shall be replaced with clean linens at least once each week, or more frequently as required.

4. Residents shall not be permitted to sleep or rest on soiled beds and bed pillows.

5. A resident may choose to purchase their own bedding and linens in order to personalize his or her bedroom or when it is determined by a licensed physician to be medically necessary to address a diagnosed medical condition.

6. Bedding and linens purchased by the licensee must be available to accommodate the licensed capacity of the home.

7. A mattress cover or waterproof sheet shall be provided if needed by the resident due to allergies, incontinence, or other medical or physical reasons.

8. Bedding shall be appropriate to the season.

~~(k)(h)~~ No change.

(l) Additional storage space shall be available elsewhere in the facility to accommodate residents' luggage and large or seldom used personal belongings commensurate with the physical limitations of the facility. The storage space must be able to be secured or locked and free from insects or pests.

(m)(i) Each resident shall be allowed to decorate his or her private quarters in an individual style that will respect the care

of the property and other residents who may share the bedroom commensurate with the physical limitations of the facility.

~~(j) A violation of this subsection shall constitute a Class III violation.~~

~~(7)(6)~~ Bathrooms.

(a) There shall be at least one toilet, lavatory, and tub or shower, accessible and available for resident use for every three residents in facilities initially licensed on or after July 1, 2014 the effective date of this rule revision. Facilities initially licensed before July 1, 2014, prior to the effective date of this rule revision, and continuously thereafter shall have no less than one toilet and lavatory for every six residents, and one shower for every eight residents.

(b) Only bathrooms that are functional and that meet the needs of the individual residents shall be considered when determining the licensed capacity of a facility. Bathrooms used solely by staff, live-in staff, or family members of live-in staff are not available to residents and shall not be considered in the calculation of licensed capacity.

~~(c)(b)~~ No change.

~~(e) Toilets, tubs and showers used by household members shall provide for individual privacy. A violation of this paragraph shall constitute a Class II violation.~~

(d) Bathrooms shall be clean, hygienic, sanitary and well-ventilated.

(e) Bathrooms must be indoors.

(f) Bathrooms shall provide individual privacy. When multiple residents share a bathroom, the licensee and direct care staff are responsible for ensuring that the rights, preferences, and privacy of other residents are taken into consideration and respected.

~~(g)(d)~~ No change.

~~(e) Bathrooms shall be well ventilated by natural or mechanical methods.~~

(h)(f) Toilet and bathing area fixtures shall be in good working condition and approximate normal patterns found in residential construction, except for where special requirements are applicable for residents with physical impairments or for special needs.

(i)(g) Bathrooms The bathroom shall have sufficient supplies of toiletry items such as shampoo, toothpaste, soap, and toilet paper to accommodate resident needs. A resident may choose to purchase his or her own toiletry items based on his or her personal preference. A resident may discontinue his or her choice at any time and request to use facility-supplied toiletry items. Each client shall be provided a separate and appropriate place for the resident's own toothbrush and towel.

~~(h) With the exception of paragraph (e), a violation of this subsection shall constitute a Class III violation.~~

(8) Water temperature. The facility must have an adequate supply of hot water for bathing and dishwashing, sufficient to

meet the needs of all household members. Hot water accessible to residents must not exceed 120 degrees Fahrenheit (48.9 degrees Celsius) at the outlet.

~~(9)(7)~~ Laundry.

(a) through (c) No change.

~~(d) A violation of this subsection shall constitute a Class III violation.~~

~~(10)(8)~~ Heating and cooling.

(a) Indoor temperature shall be maintained within a range of 68 degrees to 80 degrees Fahrenheit, as appropriate for the climate. ~~Temperatures exceeding this range by more than 2 degrees but less than 5 degrees constitute a Class III violation. Temperatures exceeding this range by 5 degrees or more constitute a Class II violation.~~

(b) ~~Any~~ The heating equipment or apparatus employed shall not constitute a burn hazard to the residents. Violation of this paragraph constitutes a Class II violation.

(c) There shall be no discernible differences between the temperature and humidity of areas within the facility that are used by staff and those areas used by the residents, unless such differences are based on documented resident need or preference. ~~A violation of this paragraph shall constitute a Class III violation.~~

(d) Temperature variances due to a natural disaster, power outages outside of the licensee's control, or equipment failures that are being repaired in a timely manner that will not endanger the facility's residents shall not be considered violations of this subsection. The licensee must notify the Agency when repairs or replacement to the heating and air conditioning system are needed to maintain the required temperature range in accordance with paragraph (10)(a). The licensee must keep the Agency updated with respect to any repairs or replacement.

(e) Portable heaters, such as space heaters, must utilize an automatic safety switch that turns the unit off if it is tipped over, and a thermostatic control or timer which ensures that the unit will turn itself off and prevent overheating or creating an electrical hazard.

~~(11)(9)~~ Lighting. All areas of the facility shall be adequately lighted in accordance with area usage and to ensure the health and safety of residents. A violation of this subsection shall constitute a Class III violation.

~~(12)(10)~~ Housekeeping and mMaintenance. The interior and exterior of the facility shall be maintained by the licensee to ensure the health and safety of residents. The licensee must:

(a) keep the buildings in a clean, safe and orderly condition. This includes all rooms, corridors, attics, basements, and storage areas; The interior and exterior of the facility shall be maintained by the licensee so the health and safety of residents is assured. The facility shall supply and pay for necessary cleaning supplies. A violation of this paragraph shall constitute a Class II violation.

(b) keep attics, basements, stairways and similar areas free of accumulations of refuse, discarded furniture, discarded equipment, newspapers, magazines, boxes, and other similar items;

(c) keep floors clean and non-slip to ensure client safety;

(d) supply and pay for necessary cleaning supplies;

~~(e)(b)~~ keep tThe facility shall be free of unpleasant or noxious odors;:-

~~(f)(e)~~ ensure that tThe grounds and any additional buildings on the grounds are kept shall be free of unkempt vegetation and excess debris and maintained in a safe and sanitary condition;:-

~~(g)(4)~~ ensure that aAll outdoor garbage and other waste materials are shall be kept in covered containers until removed. Containers shall be emptied as often as necessary to prevent public nuisance and health hazards in accordance with municipal and county requirements of the jurisdiction within which the facility is located;:-

(h) ensure that all indoor garbage and other waste materials are stored in a manner that maintains a sanitary condition. Trash cans or other such waste containers must be emptied as often as necessary to prevent attracting pest or vermin and unpleasant and noxious odors;

(i) provide mitigation of risk or assurances of safety to prevent harm or injury from hazardous areas. Such mitigating risk or assurances of safety methods include door chimes, alarms, fencing or a wall of at least four feet in height. A hazardous area is that area designated as such by Agency staff at the time of initial licensure, or in the case of a significant change in the needs and characteristics of the residents of the facility, or a significant change to the facility, property or land adjacent, which may include, but is not limited to, water hazards such as, canals, creeks, holding ponds, rivers, lakes, swamps. In determining the hazardous area, Agency staff shall consult with the licensee and any determination about the hazardous area designation must be related to and consider the needs and characteristics of the residents of the facility; and

~~(j)(e)~~ eExcept when restitution is a component of a client's LRC-approved behavior plan, licensees are solely responsible for any costs associated with the repair or replacement of any facility equipment or property which is owned or leased by the licensee when such equipment or property is lost, damaged or destroyed by a resident. Unless the licensee agrees to cover replacement or repair costs, a resident who damages or destroys equipment or property which is owned or leased by himself/herself or other residents of the facility shall be responsible for any costs associated with the repair or replacement of such equipment or property.

~~(f)~~ With the exception of paragraph (a), a violation of this subsection shall constitute a Class III violation.

~~(13)(11)~~ Meal services. Unless contraindicated by documented medical, behavioral, or dietary requirements for

individual residents, the following meal service standards shall apply to all facilities:

(a) Food and beverages shall be of adequate quantity and variety, served at appropriate temperatures, prepared by methods which conserve nutritional value, and served in a form easy for residents to manage and, within reason, in keeping with resident preferences. ~~Within reason, dietary practices in keeping with the religious requirements of the resident's faith group shall be observed at the request of the resident, or the resident's authorized representative.~~

(b) Within reason, dietary practices in keeping with the religious requirements of the resident's faith group shall be observed at the request of the resident, or the resident's authorized representative.

~~(c)(b)~~ Residents who are not routinely absent from the facility for work or other purposes must be prepared at least three meals at regular times during each 24-hour period. If a resident is absent from the facility for work or for an approved program during a regular meal time, ~~the resident he or she~~ must be provided a meal at no charge to the resident. Snacks shall be available and provided by the facility at appropriate times during the day or evening.

~~(d)(e)~~ No change.

(e) Menus are developed in consultation with a dietician and in accordance with residents' individual medical, behavioral, and dietary requirements.

~~(f)(d)~~ Meals shall be prepared and served in accordance with the facility's ~~menu(s) menu~~.

~~(g)(e)~~ Menus shall be planned, ~~and~~ written, and dated at least two days in advance of consumption. ~~Menus, as served, shall be kept on file for a minimum of one month. Resident Client participation in meal planning is recommended but not required.~~

~~(f) When food services are not supervised by a nutritionist, a dietician must be consulted at least annually. Documentation of such consultation and a summary of the dietician's recommendation shall be submitted to the Regional office. A violation of this paragraph shall constitute a Class II violation.~~

~~(h)(g)~~ No change.

~~(h) With the exception of paragraph (f), a violation of this subsection shall constitute a Class III violation.~~

(14) Food preparation, storage, and service.

(a) All food preparation surfaces, preparation equipment, utensils, cutlery, and dishes must be maintained in a clean and disinfected manner, free of any damage, and safe for intended use.

(b) Food must be free from cross-contamination.

(c) All food must be stored at the appropriate temperature and location to maintain safety.

(d) Hotplates, grills, propane stoves, and similar equipment must be operated in a well-ventilated area and free from hazard(s).

(e) All food received or used in a licensed facility shall be clean, hygienic and sanitary, and safe for human consumption, and free from spoilage, adulteration, and misbranding.

(f) Food, while being transported, stored, prepared, displayed, or served within the facility, shall be protected from dust, flies, rodents or other vermin, toxic materials, unclean equipment and utensils, flooding, sewage, overhead leakage, and any other source of contamination.

(g) Food shall be stored a minimum of six inches above the floor, on clean shelves, racks, or other clean surfaces in such a manner as to be protected from splashing and other contamination. Food must be stored in a manner which permits free air circulation in and around food. Metal pressurized beverage containers, food packaged in cans, glass, or other waterproof containers need not be elevated when the floor is clean, and the food container is not exposed to moisture.

(h) Food not subject to further washing or cooking (ready-to-eat food) before being served shall be stored in a manner that protects it from cross-contamination with food requiring washing or cooking. Packaged food shall not be stored in contact with water or undrained ice.

(i) Food, whether raw or prepared, if removed from the container or package in which it was obtained, shall be stored in a clean, covered, and labeled container, except during necessary periods of preparation or service. Container covers shall be impervious and nonabsorbent.

(j) Prior to the food being placed into the freezer, the container must be clearly marked to indicate the date of freezing. Food must be dated if not consumed upon initial preparation.

(k) Hot food shall be cooled within four hours to 41 degrees Fahrenheit or below.

(l) Potentially hazardous food. For purposes of this rule, "potentially hazardous food" means food that requires refrigeration or freezing to prevent spoilage while it is in storage. The following requirements apply to potentially hazardous food:

1. Different types of raw animal products such as beef, fish, lamb, pork, or poultry shall be separated during storage and processing by use of different containers, partitions, shelves, or by cleaning and sanitizing the equipment between product use. Raw food products shall be physically separated from ready-to-eat food products during display or storage by storing the raw products below all ready-to-eat food products.

2. Upon receipt, potentially hazardous food shall be stored in a refrigerator or freezer, as appropriate, at temperatures that will protect it from spoilage. All potentially hazardous food

shall be kept at safe temperatures, either below 41 degrees Fahrenheit or above 135 degrees Fahrenheit after cooking.

3. Potentially hazardous foods that are to be served without further cooking (ready-to-eat foods) and that will require refrigeration shall not be allowed to remain between 41 and 135 degrees Fahrenheit for a period in excess of four hours.

4. Frozen potentially hazardous food shall be thawed in refrigerated units at a temperature not to exceed 41 degrees Fahrenheit, under cold potable running water, or in a microwave. Frozen potentially hazardous food shall be cooked immediately after thawing.

5. Potentially hazardous foods shall be kept for no more than seven days after its initial cooking.

(15)(12) Firearms and weapons Safety requirements.

~~(a) The facility must have an adequate supply of hot water for bathing and dish washing sufficient to meet the needs of all household members. Hot water accessible to residents must not exceed 120 degrees Fahrenheit (43 degrees Celsius) at the outlet.~~

~~(a)(b) No change.~~

~~(b)(c) All firearms must be stored unloaded. Firearms and ammunition shall be stored separately from each other within locked storage areas. Weapons normally associated with hunting, fishing, hiking, or recreational target sports, such as bows and arrows, spear guns or slingshot type devices, shall be stored unloaded within locked storage areas not accessible to facility residents. Other weapons normally associated with personal protection such as stun guns or chemical aversive sprays such as Mace or pepper spray shall also be kept in locked storage areas not accessible to facility residents.~~

~~(d) All poisonous and toxic compounds and potentially hazardous instruments shall be used with extreme caution. Compounds harmless to human consumption shall be used whenever reasonably possible. Poisonous and toxic compounds shall not be stored in an area which may constitute a hazard to residents. Such items shall be safeguarded and not commingled with food items in storage areas or elsewhere. In all cases, such products shall be stored in their original containers or, if transferred to other containers for dispensing purposes, clearly labeled as to the contents and locked in a storage area.~~

~~(e) The facility shall provide fencing of at least four feet in height in areas identified by the Agency as hazardous. A hazardous area is that area designated as such by Agency staff at the time of initial licensure. In determining the hazardous area, Agency staff shall consult with the licensee and consider the needs and characteristics of the residents of the facility. A violation of this paragraph shall constitute a Class III violation.~~

~~(f) With the exception of paragraph (e), a violation of this subsection shall constitute a Class I violation.~~

(16) Hazardous and toxic chemicals or compounds.

(a) All poisonous and toxic chemicals or compounds and potentially hazardous instruments shall be used with extreme caution. Chemicals or compounds harmless to humans shall be used whenever reasonably appropriate.

(b) Poisonous and toxic compounds shall be kept in a locked storage space.

(c) Such items shall be safeguarded and not commingled with food items in storage areas or elsewhere.

(d) In all cases, such products shall be stored in their original containers or, if transferred to other containers for dispensing purposes, clearly labeled as to the contents and locked in a storage area.

(e) Facilities constructed before 1978 may have lead-based paint hazards. For facilities built before 1978, the licensee must provide written disclosure of the presence of lead-based paint or lead-based paint hazards to current and prospective residents of the facility.

(17)(13) Swimming pools and other bodies of water hazards.

~~(a) Residents who are not proficient swimmers; must be supervised by sight and sound at all times when they are within 50 feet of any body of water or water hazard such as pools, hot tubs, canals, creeks, holding ponds, rivers, lakes, swamps or areas subject to flooding. Access to bodies of water or other water hazards must be restricted when supervision is not available. Supervision must be provided by an adult employee of the facility who is responsible for the resident and who is also certified in first aid and CPR.~~

1. Must be supervised by sight and sound at all times when they are within 50 feet of any body of water or water hazard such as pools, hot tubs, canals, creeks, holding ponds, rivers, lakes, swamps or areas subject to flooding. Access to bodies of water or other water hazards must be restricted when supervision is not available. Supervision must be provided by an adult employee of the facility who is responsible for the resident and who is also certified in first aid and CPR.

2. Must not be allowed in pools or other bodies of water without wearing a life jacket or other U.S. Coast Guard approved flotation device unless engaged in swimming lessons or while under the direct supervision of an on-shift employee capable of assisting with swimming-related emergencies who is also certified in first aid and CPR.

~~(b) Residents who are not proficient swimmers shall not be allowed in pools or other bodies of water without wearing a life jacket or approved flotation device, unless engaged in swimming lessons or while under the supervision of a responsible adult capable of assisting with swimming-related emergencies.~~

(b)(c) All high risk water-related recreational activities in which residents are participating, such as boating or water

sports, must be directly supervised by an ~~have direct~~ adult employee of the facility supervision.

~~(c)(d)~~ Pools without filters, such as wading or kiddie pools, are permitted for use by facilities and shall be assembled set up and used in accordance with manufacturer's instructions. Such pools must be emptied and stored away when not in use and filled with clean water before the next use.

~~(d)(e)~~ No change.

~~(e)(f)~~ No change.

~~(f)(g)~~ While the pool or spa is in use, accessible ingress and egress must be provided. A violation of this subsection shall constitute a Class II violation.

~~(g)~~ All stairs and ladders in and around the pool or spa must be in good working condition.

~~(h)~~ Any pool or spa located on the facility property shall be maintained in a clean, hygienic, and sanitary condition.

~~(18)(14)~~ Smoking. In facilities that do not prohibit adult residents or staff from smoking indoors, either through admission criteria, house rules or self-government, smoking shall be permitted only in areas that are designated by the residents. Under no circumstances shall the designated smoking area include indoor common areas shared or accessed by non-smoking residents. Residents shall not be permitted to smoke in bed, except that those confined to bed by infirmity may be permitted to do so only under the visual supervision of staff. Smoking shall not be permitted indoors if any of the residents of the facility are children or possess a medical condition, such as asthma, which would be aggravated by indoor smoking by other household members. A violation of this subsection shall constitute a Class II violation.

(a) Facilities that do not prohibit residents or staff from smoking indoors, either through admission criteria, house rules or self-government, may permit smoking only in areas that are designated by the residents, except that the designated smoking area shall not include indoor common areas shared or accessed by non-smoking residents.

(b) Residents shall not be permitted to smoke in bed, except that those confined to bed by infirmity may be permitted to do so only under the visual supervision of staff.

(c) Smoking shall not be permitted indoors if any of the residents of the facility are children or possess a medical condition, such as asthma, which would be aggravated by indoor smoking.

~~(19)(15)~~ Alarms. Alarms ~~that~~ which are activated when an exterior door or window is opened are permitted for use within residential facilities.

~~(20)(16)~~ Smoke and carbon monoxide detectors. Facilities shall be equipped with smoke and carbon monoxide detectors in good working condition. ~~A violation of this subsection shall constitute a Class II violation.~~

~~(17) Educational services for exceptional children. Within ten business days after an exceptional student, as described in Section 1003.01, F.S., is admitted by a residential facility, the facility shall provide written notification of the placement to the school district where the student is currently counted for funding purposes under Section 1011.62, F.S. and also to the receiving school district. The facility shall be responsible for enrolling the student in school. A violation of this subsection shall constitute a Class III violation.~~

~~(18) Foreclosures and evictions.~~

~~(a) Licensees must provide notification to the Regional office within two business days of receipt of a foreclosure notice involving the property at which the license is maintained.~~

~~(b) Licensees must notify the Regional Office within 24 hours upon the receipt of a Notice of Eviction involving the property at which the license is maintained.~~

~~(c) A violation of paragraph (a), of this subsection, shall constitute a Class II violation. A violation of paragraph (b), of this subsection, shall constitute a Class I violation.~~

~~(21) Insect, rodent, and vermin control.~~

(a) Effective measures shall be utilized to minimize the presence of rodents, flies, cockroaches, bedbugs, and other insects on the premises, which includes maintaining a clean environment in the facility.

(b) All buildings shall be effectively maintained rodent-proofed and rodent free.

(c) All outside openings shall be effectively sealed or screened to prevent entry of insects, rodents, and vermin.

(d) For persistent pest control problems, a licensed pest control operator must be utilized to eliminate the threat.

~~(22) Animal health and safety.~~

(a) Animals must be kept free from disease or under treatment by a licensed veterinarian.

(b) Animals being kept indoors or having access to the indoors must be treated for flea and tick control in accordance with the recommendations of a licensed veterinarian to prevent infestations.

(c) Animals requiring rabies vaccination must be vaccinated for rabies and their vaccinations must be current at the time of inspection. Proof of rabies vaccination or veterinary certification of vaccination exemption shall be kept on the premises at all times.

(d) Facility property must be kept reasonably free from animal waste.

~~(23) Response to resident sickness.~~

(a) Facility staff must carefully clean any areas contaminated with vomit, stool, or bodily fluids.

(b) Vomit, stool, and bodily fluids shall be cleaned up before disinfecting. Responsible staff shall wear disposable gloves to clean and disinfect whenever possible. Cleaning shall

be done with disposable towels, and used towels shall be disposed of in a non-absorbent plastic bag.

(c) Facility staff must disinfect the affected area after it is completely cleaned. Staff shall allow the area to air-dry, and discard all materials used to clean the area, including placing used towels and gloves in a non-absorbent plastic bag. Staff must wash their hands with soap and water immediately after removing gloves.

(d) Soiled linens, soiled clothes, or other soiled items shall be carefully removed and kept separated from uncontaminated items. Soiled linens, soiled clothes, or other soiled items that are contaminated shall be washed separately from uncontaminated items using a regular wash cycle at high temperature with detergent, or regular wash cycle with detergent and bleach or other sanitizer.

(24) Foreclosures, evictions, and bankruptcies.

(a) Licensees must notify the Agency within 24 hours upon the receipt of a notice of eviction or foreclosure involving the property at which the license is maintained.

(b) Licensees who file for bankruptcy protection must notify the Agency within 24 hours of filing for bankruptcy.

(25) Mobile homes or manufactured homes, as defined in section 320.01(2), F.S., may not be used for foster care facilities, group home facilities, or residential habilitation centers. This does not include modular homes. For the purposes of this rule, a mobile or manufactured home is a home that is transported on a non-removable chassis which remains a structural part of the home and considered relocatable.

(26)(19) Optional in-service training. The licensee may develop in-service training for family members, guardians or guardian advocates of residents. This training may address topics such as appropriate behavioral interventions, guardianship, social security benefit issues, or other topics of relevance. Under no circumstances may the licensee, or its contracted trainer or presenter, charge a fee for the provision of such training. A violation of this subsection shall constitute a Class III violation.

(27)(20) Willful or intentional misstatements. A licensee or applicant shall not make willful or intentional misstatements, orally or in writing, to intentionally mislead Agency staff, the Department of Children and Families, or law enforcement in the performance of their duties.

(a) Willful or intentional misstatements regarding the health, safety, welfare, abuse, neglect, exploitation, abandonment or location of a resident shall be considered a Class I violation.

(b) All other willful misstatements shall be considered Class II violations.

Rulemaking Authority 393.067(1), 393.067(7), 393.15(5), 393.501(1); 393.067 FS. Law Implemented 393.067 FS. History—New 8-13-78,

Formerly 10F-6.08, 10F-6.008, 65B-6.008, Amended 7-1-14, 5-5-15,

### **65G-2.0071 Foster Care Facility Standards.**

(1) ADMINISTRATION: Each foster care facility shall be located in an area which complies with local zoning restrictions. designate a person as responsible for the on-going operation of the foster care facility and for ensuring compliance with Chapter 65G-2, F.A.C., and Section 393.067, F.S. A violation of this subsection shall constitute a Class II violation.

(2) Each foster care facility shall designate a person as responsible for the ongoing operation of the foster care facility and for ensuring compliance with Chapter 65G-2, F.A.C., and section 393.067, F.S. FINANCIAL STANDARDS:

(a) Fiscal records pertaining to the cost of providing care to Agency clients shall be maintained in accordance with generally accepted accounting principles.

(b) The Agency may audit the records of a foster care facility to ensure compliance with Chapter 65G-2, F.A.C., and Section 393.067, F.S., provided that financial audits shall be limited to the records of Agency clients.

(c) Upon request by the Agency, the foster care facility shall make available copies of any internal or external audit reports pertaining to funding received on behalf of Agency clients.

(d) The provider, the provider's employees, and any family members thereof are prohibited from:

1. Being the named beneficiary of a resident's life insurance policy unless related to the resident by blood or marriage;

2. Receiving any indirect financial benefit from a resident's life insurance policy unless related to the resident by blood or marriage; or

3. Borrowing or otherwise using a resident's personal funds for any purpose other than the resident's benefit.

(e) A violation of this subsection shall constitute a Class III violation.

(3) STAFFING. In addition to the staffing requirements delineated under Rule 65G-2.008, F.A.C., foster care facilities which utilize live-in caregivers must provide for at least one back-up direct care staff, who has undergone a successful background screening in accordance with §Section 393.0655, F.S., and cChapter 435, F.S. This back-up direct care staff must, that would be willing and able to render services to residents in the event that neither of the live-in caregivers are able to do so. A violation of this subsection shall constitute a Class II violation.

Rulemaking Authority 393.067(1), 393.067(7), 393.501(1), 393.067 FS. Law Implemented 393.067 FS. History—New 8-13-78, Formerly 10F-6.09, 10F-6.009, 65B-6.009, Amended 7-1-14, Formerly 65G-2.011, Amended \_\_\_\_\_.

**65G-2.0072 Group Home Facility Standards.**

(1) ~~Each group home facility shall be located in an area which complies with local zoning restrictions~~ ADMINISTRATION.

(2)(a) Each group home facility shall have a designated facility operator on-site or on call at all times. The facility operator is responsible for the ~~ongoing~~ ~~on-going~~ operation of the group home facility and for ensuring compliance with Chapter 65G-2, F.A.C., and section 393.067, F.S., whenever the facility operator is onsite or on call and one or more residents are present in the facility.

(3)(b) No change.

(4)(e) An area of the facility shall be designated as office space where files, desk, telephone and other administrative tools and equipment are located. Adequate provisions shall be made for ensuring the security of confidential files and other types of records, such as account books, inventories, audits, resident records, and resident funds. These records may be kept electronically. ~~A violation of this paragraph shall constitute a Class III violation.~~

(d) ~~With the exception of paragraph (e), a violation of this subsection shall constitute a Class II violation.~~

**(2) FINANCIAL STANDARDS.**

(a) ~~Fiscal records pertaining to the cost of providing care to Agency clients shall be maintained in accordance with generally accepted accounting principles.~~

(b) ~~The Agency may audit the records of a group home facility to ensure compliance with Chapter 65G-2, F.A.C., and section 393.067, F.S., provided that financial audits shall be limited to the records of Agency clients.~~

(e) ~~Upon request by the Agency, the group home facility shall make available copies of any internal or external audit reports pertaining to funding received on behalf of Agency clients.~~

(d) ~~The provider, the provider's employees, and any family members thereof are prohibited from:~~

1. ~~Being the named beneficiary of a resident's life insurance policy unless related to the resident by blood or marriage;~~

2. ~~Receiving any indirect financial benefit from a resident's life insurance policy unless related to the resident by blood or marriage; and,~~

3. ~~Borrowing or otherwise using a resident's personal funds for any purpose other than the resident's benefit.~~

(e) ~~A violation of this subsection shall constitute a Class III violation.~~

*Rulemaking Authority 393.067(1), 393.067(7), 393.501(1), 393.067 FS. Law Implemented 393.067 FS. History—New 8-13-78, Formerly 10F-6.10, 10F-6.010, 65B-6.010, Amended 7-1-14, Formerly 65G-2.012, Amended \_\_\_\_\_.*

**65G-2.0073 Residential Habilitation Center Standards.**

(1) ~~Organization and administration~~ ORGANIZATION AND ADMINISTRATION.

(a) No change.

(b) Each facility shall ~~designate~~ ~~have~~ a facility operator ~~who is onsite or on call at all times.~~ The facility operator is ~~designated as~~ responsible for the ongoing operation of the residential habilitation facility and for ensuring compliance with Chapter 65G-2, F.A.C., and ~~chapter 393, F.S. Section 393.067, F.S., at all times that one or more residents are present in the facility.~~

(c) No change.

(d) An area of the facility shall be designated as office space where files, desk, telephone and other administrative tools and equipment are installed. Provisions shall be made for locking and protecting confidential files and other types of records, e.g., account books, inventories, audits, resident records, and resident funds. ~~A violation of this paragraph shall constitute a Class III violation.~~

(e) ~~With the exception of paragraph (d), a violation of this subsection shall constitute a Class II violation.~~

**(2) FINANCIAL STANDARDS.**

(a) ~~Fiscal records pertaining to the cost of providing care to Agency clients shall be maintained in accordance with generally accepted accounting principles.~~

(b) ~~The Agency may audit the records of a residential habilitation center to ensure compliance with Chapter 65G-2, F.A.C., and section 393.067, F.S., provided that financial audits shall be limited to the records of Agency clients.~~

(e) ~~Upon request by the Agency, the residential habilitation center shall make available copies of any internal or external audit reports pertaining to funding received on behalf of Agency clients.~~

(d) ~~The provider, the provider's employees, and any family members thereof are prohibited from:~~

1. ~~Being the named beneficiary of a resident's life insurance policy unless related to the resident by blood or marriage;~~

2. ~~Receiving any indirect financial benefit from a resident's life insurance policy unless related to the resident by blood or marriage; and,~~

3. ~~Borrowing or otherwise using a resident's personal funds for any purpose other than the resident's benefit.~~

(e) ~~A violation of this subsection shall constitute a Class III violation.~~

(2)(3) ~~Resident training.~~ RESIDENT TRAINING. ~~The residential habilitation center shall ensure that all residents receive habilitative services to meet their individualized needs. The residential habilitation center will assist the resident in exercising maximum independence in the following:~~

(a) The residential habilitation center shall ensure that all residents receive habilitative services to meet their individualized needs.

(b) The residential habilitation center will assist the resident in exercising maximum independence in the following:

(a) through (g) renumbered 1. through 7. No change.

~~8.(h) Basic knowledge or cognitive development, including both pre-academic and academic skills; and~~

~~9.(i) Job related skills, such as personal work interests, work capabilities, work habits, practical work interests, community mobility, and job seeking skills; and,~~

~~(j) A violation of this subsection shall constitute a Class II violation.~~

*Rulemaking Authority 393.067(1), 393.067(7), 393.501(1), 393.067 FS. Law Implemented 393.067 FS. History—New 8-13-78, Formerly 10F-6.11, 10F-6.011, 65B-6.011, Amended 7-1-14, Formerly 65G-2.013, Amended \_\_\_\_\_.*

#### **65G-2.0074 Adult Day Training Program Standards.**

(1) Right to use and occupy.

(a) through (b) No change.

~~(e) A violation of this section is a Class II violation.~~

(2) Physical site standards.

(a) through (b) No change.

(c) The physical site must be free of dangerous conditions and hazards. Interior and exterior building surfaces must be free of hazardous conditions including. ~~Violation of this paragraph constitutes a Class II violation. hazardous conditions include:~~

1. through 6. No change.

(d) No change.

(e) Each program must have documentation showing that the licensee has successfully passed and maintains compliance with fire safety inspections ~~that reflects the maximum occupancy.~~

(f) through (l) No change.

~~(m) A violation of this section shall be a Class II violation.~~

(3) Activity area and dining area.

(a) The number of occupants in the building shall not exceed the maximum occupancy indicated on the license as directed by the Fire Marshall.

(b) through (c) No change.

(4) Food preparation, storage, and service.

(a) through (g) No change.

(h) Food shall be stored a minimum of six 6 inches above the floor, on clean shelves, racks, or other clean surfaces in such a manner as to be protected from splashing and other contamination. Food must be stored in a manner which permits free air circulation in and around food. Metal pressurized beverage containers, food packaged in cans, glass, or other waterproof containers need not be elevated when the floor is clean, and the food container is not exposed to moisture.

(i) through (m) No change.

(n) When meal services are served or prepared by the program, the following standards shall apply:

1. through 2. No change.

3. Menus shall be planned and written and dated at least two days in advance of consumption. ~~Menus, as served, shall be kept on file for a minimum of one month.~~

4. through 5. No change.

~~6. A dietician must be consulted at least annually. Documentation of such consultation and a summary of the dietician's recommendation shall be kept on file for three years.~~

~~(e) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

~~(o)(p) No change.~~

(5) Bathrooms and ~~c~~Changing ~~a~~Areas.

(a) No change.

(b) Bathrooms and changing areas used by participants shall provide individual privacy. ~~A violation of this paragraph shall constitute a Class II violation.~~

(c) through (e) No change.

(f) For ADTs licensed prior to 60 days after the effective date of the rule and for only as long as there is no lapse in licensure from the date of the original license, the physical site shall have a minimum of two (2) toilets and (2) sinks for every thirty five (35) individuals, including participants and staff. For all ADTs, newly licensed after 60 days from the effective date of the rule, the physical site shall have at minimum two (2) toilets and two (2) sinks for every 50 twenty five (25) individuals, including participants and staff.

~~(g) Except for paragraph (b), a violation of this subsection shall constitute a Class III violation.~~

(6) Water ~~t~~Temperature. The program must have an adequate supply of clean water. Hot water, if available in changing facilities or sinks, used by participants must not exceed 120 degrees Fahrenheit (48.9 degrees Celsius) at the outlet.

~~(a) The program must have an adequate supply of clean water. Hot water, if available in changing facilities or sinks, used by participants must not exceed 120 degrees Fahrenheit (48.9 degrees Celsius) at the outlet.~~

~~(b) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(7) Heating and cooling.

(a) through (g) No change.

~~(h) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(8) Lighting. All areas of the physical site shall be suitably lit in accordance with area usage.

~~(a) All areas of the physical site shall be suitably lit in accordance with area usage.~~

~~(b) A violation of this subsection shall constitute a Class III violation.~~

(9) Housekeeping and mMaintenance.

(a) through (g) No change.

(h) All indoor garbage and other waste materials shall be stored in a manner that would maintain a sanitary condition. Trash cans ~~Trash cans~~ or other such waste containers must be emptied as often as necessary to prevent attracting pest or vermin and prevent unpleasant or noxious odors.

(i) No change.

~~(j) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(10) Firearms and weapons.

(a) through (b) No change.

~~(e) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(11) Hazardous and toxic compounds.

(a) through (d) No change.

~~(e) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(12) Swimming pools and other bodies of water.

(a) through (d) No change.

~~(e) A violation of this subsection shall constitute a Class II violation.~~

(13) Smoking. Smoking, vaping, or use of other tobacco products shall not be permitted indoors.

~~(a) Smoking, vaping, or use of other tobacco products shall not be permitted indoors.~~

~~(b) A violation of this subsection shall constitute a Class III violation.~~

(14) No change.

(15) Smoke and carbon monoxide detectors.

(a) Facilities shall be equipped with smoke and carbon monoxide detectors in good working condition. Battery activated detectors must be tested at least every six ~~6~~ months.

(b) No change.

~~(c) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(16) Insect, rRodent, and vVermin cControl.

(a) through (d) No change.

~~(e) Violations of paragraphs (a) through (d) shall constitute a Class I or Class II violation in accordance with Rule 65G-2.0041, F.A.C.~~

~~(c)(f) In the event of an infestation, all measures taken must be documented by the licensee and provided to the Agency. A violation of this paragraph shall constitute a Class III violation.~~

(17) Animal hHealth and sSafety.

(a) through (c) No change.

~~(d) Violations of this subsection shall constitute a Class III violation.~~

(18) Response to pParticipant sSickness.

(a) through (g) No change.

~~(h) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(19) Foreclosures, eEvictions and bBankruptcies.

(a) through (b) No change.

~~(c) A violation of this subsection shall constitute a Class II violation.~~

(20) Optional in-service training. The licensee may develop optional in-service training for family members, guardians, or guardian advocates of participants This training may include but is not limited to parent and caregiver training. The program shall not require such training as a condition upon the provision of adult day training services.

~~(a) The licensee may develop optional in-service training for family members, guardians, or guardian advocates of participants This training may include but is not limited to parent and caregiver training. The program shall not require such training as a condition upon the provision of adult day training services.~~

~~(b) A violation of this subsection is a Class III violation.~~

(21) Emergency mManagement pPlans.

(a) through (c) No change.

(d) Evacuation. The physical site must evacuate the premises during or after an emergency if so directed by the local emergency management agency.

1. No change.

2. The physical site shall not be reoccupied ~~re-occupied~~ until (1) the area is cleared for reentry by the local emergency management agency, local fire marshal, or any other agency or entity having authority and (2) the physical site meets the immediate needs of the participants.

(e) No change.

(f) Emergency management plans, documents regarding staff training, and any logs must be made available to the Agency within three ~~3~~ days of the request.

~~(g) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or~~

~~welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(22) No change.

(23) Transportation.

(a) When the ADT is providing transportation for participants during the course of program's activities, a record log must be maintained for each participant transported in a vehicle. The licensee must maintain the record log for a minimum of 12 months.

(b) All transportation records logs must be available for review by the Agency during monitoring visits and upon request.

(c) The transportation record log must include, at minimum:

1. through 4. No change.

5. Name of all staff involved in the transportation and the staff member responsible for keeping the record log to verify that all participants have arrived safely at the destination.

~~(d)(e)~~ Prior to each departure, the transportation record log must be recorded with each participant's name, date and time of departure, and initialed by the direct service provider verifying each participant is accounted for.

~~(e)(f)~~ Upon arrival at the destination, the driver must complete the transportation record log and mark each participant off the record log as the participant departs the vehicle.

~~(f)(g)~~ The driver must complete a physical inspection and visual sweep of the vehicle at the arrival of the destination to ensure that no participant is left inside the vehicle. A participant shall not be left unattended in a vehicle.

(h) through (o) renumbered (g) through (p) No change.

~~(p) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(24) Administration.

(a) No change.

(b) The Governing Authority shall establish that the owner, operator, or a designated Program director is on-site during the program's hours of operation and is responsible for the daily and ongoing operation of the program and for ensuring compliance with all rules and regulations, including Chapter 65G-2, F.A.C., the iBudget Handbook, ; and ~~Chapter 393, F.S.,~~ whenever one or more participants are present.

(c) through (d) No change.

(e) The licensee shall ensure that each staff member:

1. No change.

2. Refrains from abusive, neglectful, exploitative, and other unacceptable conduct such as the use of alcohol, illegal use of narcotics or other impairing drugs, and behavior or language which may be injurious to participants; and

3. No change.

~~4. If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

(f) An area of the physical site shall be designated as office space where files, desk(s), telephone(s), and other administrative tools and equipment are located. Provisions shall be made for ensuring the security of confidential files and other types of records, such as account books, inventories, audits, and client/participant records. These records may be kept electronically. ~~A violation of this paragraph shall constitute a Class II violation.~~

(g) All documentation must be completed in English. ~~A violation of this paragraph shall constitute a Class III violation.~~

(25) Financial Standards,

(a) through (c) No change.

(d) The Agency may audit the records of a program to ensure compliance with Chapter 65G-2, F.A.C., and ~~Chapter 393, F.S.,~~ provided that financial audits shall be limited to the records of the Agency's clients. ~~Failure to maintain records shall constitute a Class III violation. Failure to allow the Agency access to records for an audit shall constitute a Class II violation.~~

(e) Upon request by the Agency, the program shall make available copies of any internal or external audit reports pertaining to funding received on behalf of the Agency's clients. ~~Failure to allow the Agency access to client record shall constitute a Class II violation.~~

(f) The licensee, the program staff, direct service providers, and any family members thereof are prohibited from:

1. through 3. No change.

~~4. Violation of paragraph (f) shall constitute a Class II violation.~~

(26) Staffing ratios, requirements

(a) The licensee shall employ and schedule adequate staff to maintain the program in a manner that promotes and ensures the health, safety, and welfare of all participants, and protects participants and the public from any known dangerous behaviors. At a minimum, the licensee shall maintain the staffing pattern delineated and described on the participants' support plan(s), approved service authorizations, or agreed contract of care. Every participant, regardless of the funding source, must be included in the staffing ratio calculations. Staffing Ratios.

~~1. The licensee shall employ and schedule adequate staff to maintain the program in a manner that promotes and ensures the health, safety, and welfare of all participants, and protects participants and the public from any known dangerous behaviors. At a minimum, the licensee shall maintain the staffing pattern delineated and described on the participants'~~

~~support plan(s), approved service authorizations, or agreed contract of care. Every participant, regardless of the funding source, must be included in the staffing ratio calculations.~~

~~(b)2. No change.~~

~~(27) Required Skills for aAll dDirect sService pProviders.~~

~~(a) through (d) No change.~~

~~(e) Violations of this paragraph shall constitute a Class II violation. If a violation of this paragraph results in, or poses a serious immediate threat of, death or serious harm to the health, safety or welfare of a resident to a participant, the violation shall constitute a Class I violation, instead.~~

~~(28) Safety sStandards.~~

~~(a) through (j) No change.~~

~~(k) If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

~~(29) Behavioral interventions and responses to behavioral issues.~~

~~(a) through (d) No change.~~

~~(e) A violation of this section shall be a Class I violation.~~

~~(30) Investigations,~~

~~(a) The licensee and program staff must cooperate and comply with any investigation conducted by the Agency or a law enforcement agency or any other agency authorized by law. Violations of this paragraph shall constitute a Class I violation.~~

~~(b) No change.~~

~~(c) If a licensee, direct service provider, volunteer, or any other person working in the program has been identified as an alleged perpetrator in an active protective investigation of abuse, neglect, or exploitation of a vulnerable adult under chapter 415, F.S., or abuse, abandonment, or neglect of a child under part II of chapter 39, F.S., and the protective services investigator has reasonable suspicion that the abuse, neglect, exploitation, or abandonment has occurred, the alleged perpetrator shall be prohibited from being alone with participants unless he or she is under the constant visual supervision of another staff member who is not under such investigation. Violations of this paragraphs shall constitute a Class II violation.~~

~~(d) No change.~~

~~(e) Failure to timely create a Corrective Action Plan in (e) shall constitute a Class III violation. Failure to follow a Corrective Action Plan shall constitute a separate Class II violation.~~

~~(e)(d) No change.~~

~~(31) Medication and specialized equipment,~~

~~(a) through (b) No change.~~

~~(e) Violations of this paragraph shall constitute a Class II violation. If a violation of this paragraph results in the abuse, exploitation or harm to a participant, the violation of this~~

~~subparagraph shall constitute a Class I violation. If a violation of this section poses an immediate threat of, or causes, death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation.~~

~~(32) Requirements for personnel policies, procedures, and records.~~

~~(a) through (b) No change.~~

~~(e) Violations of this subsection constitutes a Class III violation.~~

~~(33) Direct service provider trainng rrequirements.~~

~~(a) through (d) No change.~~

~~(e) Violations of paragraphs (a), (b), and (c) shall constitute Class II violations. Violation of paragraph (d) shall constitute a Class III violation.~~

~~(34) Sexual activity and physical contact.~~

~~(a) The licensee shall develop and enforce a written policy regarding sexual activity involving participants of the program. Violations of this paragraph shall constitute a Class II violation. If a violation of this paragraph results in, or poses a serious immediate threat of, death or serious harm to the health, safety or welfare of a resident to a participant, the violation shall constitute a Class I violation, instead. Such policy shall:~~

~~1. through 4. No change.~~

~~5. address appropriate physical boundaries and standards between a direct service provider and participants, including the following elements:~~

~~a. physical contact between a direct service provider and participants should be brief, age appropriate, and shall not include sexual activity;~~

~~b. through f. No change.~~

~~(b) The licensee shall provide direct service providers with training regarding the licensee's policy regarding sexual activity, involving participants prior to providing direct care services. Violation of this paragraph shall constitute a Class II violation.~~

~~(c) The following safeguards shall be implemented in any program that serves one or more sexually aggressive participants, or those who require a Safety Plan under the iBudget Handbook, Chapter 65G-2, F.A.C., or any other similar requirement:~~

~~1. No change.~~

~~2. Prior to attendance, the program must review the Safety Plan of any participant. The program is responsible for complying with any requirements of the Safety Plan and implementing its provisions, as applicable to the program. All staff must be trained on the Safety Plan prior to working with the participant; an individualized Safety Plan shall be developed by a team to assess the risks of serving the sexually aggressive participant and determine the level of support and supervision required. The team shall include the prospective participant's support coordinator, facility operator, behavior~~

~~analyst, the prospective resident and his or her legal representative, day program manager, companion, job coach, mental health counselor/psychologist, and school representative, as applicable. The staff shall be trained on safety plans before working with sexually aggressive individuals.~~

3. The program must maintain a signed copy of the most current safety plan, when applicable;:-

4. No change.

5. Known sexually aggressive participants shall never be left alone with other participants;:-

6. Only one participant may use the bathroom at any time that the bathroom door is closed; and;:-

7. No change.

8. ~~If a violation of this section causes or poses an immediate threat of death or serious harm to the health, safety or welfare of a resident, it shall be a Class I violation. All other violations of this section shall be a Class II violation.~~

~~(35) This rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.~~

*Rulemaking Authority, 393.067(1), 393.067(7), 393.0673(8), 393.501(1) FS. Law Implemented 393.067, 393.0673, 393.13 FS. History—New 1-23-25, Amended \_\_\_\_\_.*

### **65G-2.008 Staffing Requirements for Residential Facilities.**

(1) The licensee shall employ adequate staff to maintain the facility in a manner that promotes and ensures the health, safety, and welfare of residents, and protects nonresidents ~~those who are not residents of the facility~~ from any known dangerous behaviors that the residents exhibit. At a minimum, the licensee shall maintain the staffing pattern sufficient to accommodate the number and characteristics of the residents it offers to serve in its most recent application for licensure and as approved by the Agency. A violation of this subsection shall constitute a Class I violation.

(a) The Agency shall consider the following when deciding whether a facility has adequate staff to maintain the facility: appropriate number and type of staff employed by the licensee is dependent upon a number of factors including state and/or federal requirements, court orders, the number of residents and their unique service requirements, the competency, training, and education of staff, and the range of services offered. At a minimum, the licensee shall maintain the staffing pattern delineated and described on its most recent application for licensure. A violation of this paragraph shall constitute a Class II violation.

1. the documented level of need for each resident;

2. state and/or federal requirements;

3. behavior plan;

4. support plan;

5. safety plan;

6. medically ordered care;

7. additional staffing needs identified by licensee for residents funded through other means;

8. court orders, if applicable;

9. the number of residents and their unique service requirements;

10. the competency, training, and education of staff; and

11. the range of services offered.

~~(b) It is the licensee's responsibility to provide adequate staffing levels to meet the health and safety needs of each resident, even if the staffing levels exceed the minimum identified for the facility. All staffing patterns must meet the minimum requirements set forth in this rule and other applicable rules as residents move in or out of the facility or when the identified level of need changes. At least one staff person must be present at all times while clients are in the facility unless the licensee has received Agency approval for a specified client to be left alone for limited periods of time during the day or night pursuant to paragraph 65G-2.009(6)(b), F.A.C. A violation of this paragraph shall constitute a Class I violation.~~

~~(c) Direct service providers shall not be under the influence of alcoholic beverages or illegal controlled substances to the extent their normal faculties are impaired. For purposes of this paragraph "normal faculties" include but are not limited to the ability to see, hear, walk, talk, judge distances, drive an automobile, make judgments, act in emergencies and, in general, to normally perform the many mental and physical acts of daily life. A violation of this paragraph shall constitute a Class I violation.~~

~~(d) Direct service providers shall be at least 18 years of age. A violation of this paragraph shall constitute a Class III violation.~~

~~(e) Direct service providers must have at least a high school diploma or equivalent. When determining the equivalency of high school diplomas, providers may accept official transcripts, affidavits from educational institutions, and other formal or legal documents that can be reasonably used to determine educational background. Direct service providers who have been hired using the best judgment of the licensee prior to the date of this rule revision, are exempt from this education related documentation screening requirement. A violation of this paragraph shall constitute a Class III violation.~~

~~(f) Prior to beginning employment, direct service providers must have at least one year of experience in a medical, psychiatric, nursing or childcare setting or working with persons with a developmental disability. Successfully completed college, vocational or technical training equal to 30 semester hours, 45 quarter hours, or 720 classroom hours in special education, mental health, counseling, guidance, social~~

~~work or health and rehabilitative services can substitute for the required experience. Direct service providers hired by the licensee prior to July 1, 2014, shall continue to be exempt from this paragraph. Licensees may allow direct service providers to begin their employment without meeting the experience requirements described within this section if such direct service providers spend their first 90 days of employment working directly under the supervision or oversight of another direct service provider who does possess the required experience requirements. For purposes of this section, "direct supervision or oversight" refers to the physical presence of a direct service provider who meets the experience requirements and who is immediately available for assistance as needed and who at all times shall be under the same contiguous roof line as the direct service provider who does not meet the one year experience requirement. The direct service provider who does not meet the one year experience requirement may take residents out of the facility only if accompanied by another direct service provider who meets the one year experience requirement as long as the experienced direct service provider remains at all times within 100 feet of the direct service provider who does not meet the one year experience requirement. If such arrangements will be made for a direct service provider, the licensee shall provide written notification to the Regional Office, to include the name of the direct service provider and the facility in which he or she will be working, no later than five business days after the direct service provider starts employment with the licensee. The licensee shall conduct a performance evaluation of any direct service provider employed under the exception to the experience requirement of this paragraph no later than 120 days after the direct service provider began his or her employment with the licensee. This performance evaluation shall, at a minimum, include an assessment of the direct service provider's ability to perform the prescribed duties of his or her position. Documentation of this performance evaluation shall be maintained within the personnel file of the direct service provider and made available to the Agency upon request. A violation of this paragraph shall constitute a Class III violation.~~

~~(g) Direct service providers must be capable of demonstrating effective communication with the residents of the homes as well as other individuals such as waiver support coordinators, Agency staff, family members of residents, and others who routinely interact with residential staff. A violation of this paragraph shall constitute a Class III violation.~~

~~(h) Direct service providers must be mentally competent to comprehend, comply with, and implement all requirements provided by law and Agency rule for the provision of services rendered to residents of their facilities. In addition, they must be physically capable of performing duties for which they are responsible. A violation of this paragraph shall constitute a Class II violation.~~

(2) Direct Service Provider Qualifications. The licensee must comply with the screening requirements established in Section 393.0655, and Chapter 435, F.S. A violation of this subsection shall constitute a Class I violation.

(a) A direct service provider shall be at least 18 years of age.

(b) A direct service provider must undergo employment screening as required by section 393.0655, F.S., and chapter 435, F.S. The licensee shall be responsible for ensuring that every direct service provider in the facility has complied with section 393.0655, F.S., and chapter 435, F.S. Any staff or volunteers, including direct service providers, managers, supervisors, and licensees that do not meet eligibility under section 393.0655, F.S. and chapter 435, F.S., must not provide direct care services or have access to any resident, resident funds, or resident living setting.

(c) A direct service provider must have at least a high school diploma or the equivalent. When determining the equivalency of high school diplomas, providers may accept official transcripts, affidavits from educational institutions, and other formal or legal documents that can be reasonably used to determine educational background. A direct service provider hired using the licensee's best judgment prior to July 1, 2014, and who has remained continuously employed by the licensee is exempt from this screening requirement.

(d) Prior to beginning employment, a direct service provider must have:

1. At least one year of experience in a medical, psychiatric, nursing or childcare setting, or other environment where he or she worked directly with persons with a developmental disability.

2. Successfully completed college, vocational or technical training equal to 30 semester hours, 45 quarter hours, or 720 classroom hours in special education, mental health, counseling, guidance, social work or health and rehabilitative services can substitute for the required experience.

(e) A direct service provider hired by the licensee prior to July 1, 2014, and who has remained continuously employed by the licensee, shall be exempt from this subsection.

(f) The requirements in paragraph (2)(d) of this rule may be waived if the facility meets the following conditions with respect to its staff and provides the written notification discussed in paragraph (2)(g) of this rule:

1. A direct service provider who does not meet the experience requirements must spend his or her first 90 days of employment working directly under the supervision or oversight of another direct service provider who meets the requirements. For purposes of this section, "direct supervision or oversight" means a direct service provider who meets the experience requirements and is physically present and immediately available to provide assistance to the new direct

service provider who does not meet the experience requirement. For purposes of this section, "physically present" means under the same contiguous roof line.

2. With respect to transporting residents, the direct service provider who does not meet the experience requirement may take residents out of the facility only if accompanied by another direct service provider who meets the one-year experience requirement. In those instances, the experienced direct service provider must remain, at all times, within 100 feet of the direct service provider who does not meet the one-year experience requirement.

(g) If the licensee makes an arrangement as described in paragraph (2)(f) of this rule the licensee shall provide written notification to the Regional Office no later than five days after the direct service provider starts employment with the licensee. This notification must include the name of the direct service provider and the facility in which he or she will be working.

(h) If the licensee makes an arrangement described in paragraph (2)(f) of this rule, the licensee shall also conduct a performance evaluation of any direct service provider employed under subparagraphs (2)(f)1. or 2. of this rule no later than 120 days after the direct service provider began his or her employment with the licensee. This performance evaluation shall, at a minimum, include an assessment of the direct service provider's ability to perform the prescribed duties of his or her position. Documentation of this performance evaluation shall be maintained within the personnel file of the direct service provider and made available to the Agency upon request.

(3) Required Skills for All Direct Service Providers. Licensees are responsible for assuring that all direct service providers who transport clients have a valid driver's license. Direct service providers who are responsible for transporting clients shall not possess driving violations, committed within the past three years, which relate to driving under the influence of alcohol or drugs or any other moving violation(s) which resulted in the suspension or revocation of that direct service provider's license. Direct service providers must obey all traffic laws while transporting residents. A violation of this subsection shall constitute a Class III violation.

(a) A direct service provider must be capable of effective communication with the residents of the homes as well as other individuals such as support coordinators, Agency staff, family members of residents, and others who routinely interact with residential staff.

(b) A direct service provider must be mentally competent to comprehend, comply with, and implement all requirements provided by law and Agency rule for the provision of services rendered to residents of their facilities.

(c) A direct service provider must be physically capable of performing duties for which he or she is responsible.

(4) Safety Standards. On at least an annual basis, all licensees must access the Florida Department of Law Enforcement's Sex Offender/Predator Database for the purposes of identifying database registrants who reside within a one-mile radius of the facility. The licensee shall notify staff of the location of sexual offenders or predators who live within one mile of the facility. A violation of this subsection shall constitute a Class III violation.

(a) A direct service provider shall not be under the influence of alcoholic beverages, medications, or other substances to the extent his or her normal faculties are impaired. For the purposes of this paragraph "normal faculties" include but are not limited to the ability to see, hear, walk, talk, judge distances, drive an automobile, make judgments, act in emergencies and, in general, to perform the mental and physical acts of daily life and employment duties.

(b) Licensees are responsible for ensuring that a direct service provider who transports clients has a valid driver's license.

1. A direct service provider responsible for transporting clients shall not possess driving violations, committed within the past three years, which relate to driving under the influence of alcohol or drugs or any other moving violation(s) which resulted in the suspension or revocation of that direct service provider's license.

2. Licensees must update their staff's driving history on an annual basis.

3. A direct service provider must obey all traffic laws while transporting residents.

(c) On at least an annual basis, all licensees must access the Florida Department of Law Enforcement's Sex Offender/Predator Database for the purposes of identifying database registrants who reside within a one-mile radius of the facility. The licensee shall notify facility staff of the location of sexual offenders or predators who live within one mile of the facility and document such notification.

(5) Investigations. If a licensee, direct service provider, volunteer, or any other person working in the facility has been identified as an alleged perpetrator in an active protective investigation of abuse, neglect, or exploitation of a vulnerable adult under Chapter 415, F.S., or abuse, abandonment, or neglect of a child under Part II of Chapter 39, F.S., and the protective services investigator states a reasonable suspicion that the abuse, neglect, exploitation or abandonment has occurred, the alleged perpetrator shall be prohibited from being alone with facility residents until the investigation is closed.

(a) If a licensee, direct services provider, volunteer, or any other person working in the facility receives a verified finding of abuse, neglect, abandonment, or exploitation under chapter 415, F.S. and chapter 39, F.S., in the course of their position with the facility, the licensee is subject to disciplinary action

outlined in this rule chapter pursuant to section 393.0673, F.S. ~~The alleged perpetrator may still provide direct services to facility residents if the alleged perpetrator is under the constant visual supervision of another person working in the facility who has not been named as the alleged perpetrator in an ongoing protective investigation.~~

(b) ~~If a licensee, direct service provider, volunteer, or any other person working in the facility has been identified as an alleged perpetrator in an active protective investigation of abuse, neglect, or exploitation of a vulnerable adult under chapter 415, F.S., or abuse, abandonment, or neglect of a child under Part II of chapter 39, F.S., the alleged perpetrator shall be prohibited from being alone with facility residents or having access to resident funds, unless he or she is under the constant visual supervision of another person working in the facility who has not been named as the alleged perpetrator in an ongoing protective investigation. This subsection is only applicable in situations where the licensee has been made aware of the aforementioned investigation.~~

(c) ~~If the protective investigation concludes with a verified finding of abuse, neglect, exploitation, or abandonment against the alleged perpetrator, the perpetrator shall be prohibited from being alone with facility residents unless he or she is under the constant visual supervision of another person working in the facility who has not, to the knowledge of the licensee, been named as the alleged perpetrator in an ongoing protective investigation, or has a verified finding, until a Corrective Action Plan is accepted and completed. If the perpetrator remains employed by the licensee, the licensee must submit a Corrective Action Plan that contains the following documentation to the Regional Office within 15 days of notification of the verified finding: A violation of this subsection shall constitute a Class I violation.~~

1. explanation of why the licensee is not terminating the employment of the perpetrator;

2. what disciplinary action was taken against the perpetrator;

3. any training, including dates, that the direct service provider received; and

4. how the licensee will protect facility residents from abuse, neglect, or exploitation by the perpetrator.

(d) ~~If the protective investigation concludes with no verified finding of abuse, neglect, exploitation, or abandonment against the alleged perpetrator, the licensee, direct service provider, volunteer, or other person working in the facility may be permitted to resume unsupervised contact with residents of the facility.~~

(e) ~~The licensee shall cooperate with DCF during an abuse, neglect, or exploitation investigation and request and obtain documentation of the conclusion of the investigation.~~

(6) ~~Requirements for Personnel Policies, Procedures, and Records. All licensees with employees shall develop and maintain the following personnel policies, procedures and records:~~

(a) All licensees with employees shall develop and maintain the following:

~~1.(a) No change.~~

~~2.(b) Documentation of all facility staff training, including a record of training dates, training content and trainers, and staff in attendance, shall be kept on file;~~

~~3.(c) No change.~~

~~4.(d) A weekly written schedule indicating staff coverage for at least one week in advance. Weekly schedules of actual staff coverage shall be maintained for a six-month period and provided to the Regional Office upon request.~~

~~(b) The licensee shall provide a copy of any or all items discussed in paragraph (6)(a) of this rule to the Agency or Regional Office upon request, within three calendar days.~~

~~(c) A violation of this subsection shall constitute a Class III violation.~~

(7) ~~Staff Training Requirements. Written documentation of all required staff training must be maintained by the licensee for at least three years following the receipt of such training and be made available to the Agency upon request.~~

~~(a) No change.~~

~~(b) Written documentation of all required staff training must be maintained by the licensee for at least three years following the receipt of such training and be made available to the Agency upon request.~~

~~(c)(b) All direct service providers hired to work in a licensed residential facility facilities subsequent to the date of this rule revision must complete the Agency's Zero Tolerance training curriculum on the detection, prevention, and reporting of abuse, neglect, and exploitation prior to providing direct services. The Zero Tolerance curriculum, effective June 1, 2014, consists of the Zero Tolerance Classroom Participant's Manual,~~

~~<https://www.flrules.org/Gateway/reference.asp?No=Ref-04211>, the Zero Tolerance Facilitator's Guide,~~

~~<https://www.flrules.org/Gateway/reference.asp?No=Ref-04212>, <https://www.flrules.org/Gateway/reference.asp?No=Ref-04213>, and the "Zero Tolerance — a statewide initiative to end abuse, neglect, and exploitation," (overhead Power Point) which are hereby incorporated by reference. A copy of the Zero Tolerance curriculum materials may be obtained from the Agency' Central Office.~~

~~In addition, all direct service providers must complete a refresher Zero Tolerance training course every three years. Staff must be able to successfully demonstrate their knowledge of required abuse reporting procedures both in theory and in practice.~~

~~(d)(e)~~ A ~~All~~ direct service ~~provider providers~~ must complete a basic first aid course, including instruction in the abdominal thrust maneuver and cardio-pulmonary resuscitation (CPR), and shall maintain a current certification in CPR within 90 days of providing direct services. Online or computer-based courses are not acceptable ~~to meet for meeting~~ this requirement; such training must be provided in a classroom setting by a certified trainer. Facilities shall ensure there is always at least one direct service provider with current CPR certification onsite when residents are present.

~~(e)(d)~~ No change.

~~(f)(e)~~ For those residents with behavior plans, staff must be trained on the residents' current behavioral plans by a certified behavioral analyst. Documentation of the training must be maintained in the staffs' personnel record. facilities shall comply with the requirements of Chapter 65G-8, F.A.C.

(g) Facilities shall comply with the requirements of Chapter 65G-8, F.A.C.

~~(f) A violation of this subsection shall constitute a Class III violation.~~

*Rulemaking Authority 393.067(1), 393.067(7), 393.501(1), 393.067 FS. Law Implemented 393.0655, 393.067 FS. History—New 7-1-14, Amended 8-6-17, \_\_\_\_\_.*

### **65G-2.009 Resident Care and Supervision Standards.**

~~(1) Resident Care Standards. MINIMUM STANDARDS. Residential facility services shall ensure the health and safety of the residents and shall also address the provision of appropriate physical care and supervision.~~

(a) To ensure the health and safety of the facility's residents, which includes providing appropriate physical care and supervision, each facility shall:

~~1. f~~Facilitate the implementation of resident ~~client~~ support plans, behavior plans, and any other directions from medical or health care professionals as applicable;

2. correctly and appropriately implement reactive strategy as necessary in accordance with the resident's behavior plan, the staff's training in reactive strategies, Florida Statutes, and the Florida Administrative Code;

~~3.2. c~~Contact the resident's ~~client's~~ support coordinator, as necessary, to ensure the timely provision of needed medical and dental care; and,

4. contact the resident's legal representative, if no support coordinator is assigned, to ensure the timely provision of needed medical and dental care;

5. provide care and treatment for each resident that is individualized and appropriate to reflect the differences in each individual resident's personal goals, abilities, sex, age, and special needs;

~~6.3. p~~Participate in staff training and meetings as required by the Agency, and,

7. employ sufficient staff so that it is not dependent upon the use of volunteers or residents. However, residents shall be encouraged, but not required, to perform personal housekeeping chores and independent activities of daily living that are appropriate to their age, behavioral considerations, and ability such as:

a. maintaining his or her own quarters; and

b. participating in ordinary household tasks such as meal preparation, grocery shopping, dishwashing, laundering, cleaning common areas of the residence or site, lawn care, gardening, and other tasks generally performed by a typical family.

~~(b) The facility must employ sufficient staff so that it is not dependent upon the use of volunteers or residents. However, residents shall be encouraged to perform age and ability appropriate personal housekeeping chores such as maintaining his or her own quarters. A resident may also be expected to participate in an independent daily living skills program which may include the sharing of, or responsibility for, ordinary household tasks such as meal preparation, grocery shopping, dishwashing, laundering, and cleaning of common areas of the residence, lawn care, gardening and other tasks generally performed by a typical family.~~

~~(e) The treatment and care of residents shall be individualized and appropriate to differences in personal goals, abilities, sex, age, and special needs.~~

~~(b)(d) The facility shall adhere to and protect resident rights and freedoms in accordance with the Bill of Rights of Persons with Developmental Disabilities, as provided in sSection 393.13, F.S. This includes, but is not limited to, honoring and protecting each resident's right to:—Violations of Section 393.13(3)(a), F.S., relating to humane care, abuse, sexual abuse, neglect, or exploitation and all violations of Section 393.13(3)(g), F.S., shall constitute a Class I violation. All other violations of Section 393.13(3), F.S., shall constitute Class III violations. All violations of Sections 393.13(4)(e)1. and 2., (f), and (g), F.S., shall constitute Class I violations. All violations of Section 393.13(4)(h), F.S., shall constitute Class II violations. All other violations of Section 393.13(4), F.S., shall constitute Class III violations.~~

1. Dignity, privacy, and humane care, including the right to be free from abuse, including sexual abuse, neglect, and exploitation, as set forth in section 393.13(3)(a), F.S.;

2. Be free from harm, including unnecessary physical, chemical, or mechanical restraint, isolation, excessive medication, abuse, or neglect;

3. Religious freedom and practice;

4. Receive services, within available sources, which protect his or her personal liberty and which are provided in the least restrictive conditions necessary to achieve the purpose of treatment;

5. Participate in an appropriate program of quality education and training services, within available resources, regardless of chronological age or degree of disability;

6. Social interaction and participation in community activities;

7. Physical exercise and recreational opportunities;

8. Consent to or refuse treatment, subject to the powers of a legal representative, natural guardian, or guardian advocate appointed under section 393.12, F.S., or a guardian appointed under chapter 744, F.S.;

9. When otherwise qualified, not be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity which receives public funds by reason of having a developmental disability; and

10. When otherwise qualified, not be denied the right to vote in public elections on the basis of having a developmental disability.

(c)(e) No change.

(d) Each facility shall establish, maintain, and make available to residents and employees written house rules and regulations in consultation with residents, for the orderly operation of the group home facility.

(e) Each facility shall, when appropriate, help establish resident government within the meaning of section 393.13, F.S.

(f) Within the scope of the licensee's responsibility for care and supervision of residents, the licensee shall ensure that there is appropriate action taken for a resident's essential, routine, or preventative care following a resident's medical, dental, therapy or other health care-related appointments. The licensee's responsibility includes, but is not limited to: include scheduling additional appointments for residents, or assisting residents in scheduling their own appointments, as well as appropriate training of staff on changes in medication or dietary regimens, positioning of residents, utilization of specialized equipment, or any other area which has changed subsequent to any such appointments that would be within the purview and authority of the licensee to accomplish. As used in this paragraph "essential care" refers to care and follow up measures that are medically necessary or directed by a treating physician or health care practitioner for the purpose of continuing an ongoing course of treatment of, or therapy for, a resident's illness, injury, medical condition or diagnosis until such time as such care and follow up measures are no longer directed or recommended by the physician or health care practitioner. A violation of this paragraph shall constitute a Class I violation.

1. scheduling additional appointments for residents or assisting residents in scheduling their own appointments; and

2. providing staff with appropriate training on changes in medication or dietary regimens, positioning of residents,

utilization of specialized equipment, or any other area which has changed after any such appointments that would be within the licensee's purview and authority to supervise. Within the scope of the licensee's responsibility for care and supervision of residents, the licensee shall ensure that there is appropriate action taken for a resident's routine or preventive care following a resident's medical, dental, therapy or other health care-related appointments to include scheduling additional appointments for residents, or assisting residents in scheduling their own appointments. As used in this paragraph "routine or preventive" means care other than essential care such as routine examinations, annual check ups, or preventive screenings and dental care and cleanings. A violation of this paragraph shall constitute a Class II violation.

(g) Except as otherwise provided a violation of this subsection shall constitute a Class III violation.

(2) COMMUNITY RELATIONSHIP AND RECREATIONAL ACTIVITIES. Facilities shall provide opportunities for residents to participate in community activities. A violation of this subsection shall constitute a Class III violation.

(3) Transfer and Placement of Residents. TRANSFER AND PLACEMENT OF CLIENTS.

(a) No change.

(b) The facility shall only accept and serve persons with developmental disabilities, whether or not such persons are clients of the Agency.

(c) Licensees must notify the Agency prior to accepting each new resident.

(d) The facility shall not accept or serve a resident unless it can meet his or her their specific programmatic and physical accessibility needs. The facility must be capable of effectively and safely meeting the needs of all facility residents accepted for placement. The licensee shall ensure that the placement of new residents within the facility does not adversely affect the health, safety, or welfare of existing facility residents. The licensee must obtain the Agency's approval prior to any proposed placement that would deviate from the criteria specified on the facility's application for licensure. The licensee shall notify the Agency and provide descriptive information on the prospective resident if the proposed placement involves an individual who is not a client of the Agency.

(e) When determining whether to accept a person as a resident of the facility, the facility shall:

1. Ensure that the placement of new residents within the facility does not adversely affect the health, safety, or welfare of current facility residents;

2. Obtain the Agency's approval prior to any proposed placement that would deviate from the criteria specified on the facility's application for licensure; and

3. Provide descriptive information to the Agency on the prospective resident if the proposed placement involves an individual who is not a client of the Agency. This information must include:

a. documentation showing that the individual has an intellectual or developmental disability as defined in Chapter 65G-4, F.A.C.;

b. documentation showing whether the individual has any medical needs or limitations;

c. documentation showing whether the individual has any behavioral issues; and

d. a statement regarding any known criminal history of the individual and, if the individual does have a criminal history, an explanation and documentation of his or her involvement with the legal system.

~~(f)(e)~~ Prior to a proposed transfer of a client from one licensed facility to another, the licensee shall discuss the transfer and reasons for transfer with the client, the client's authorized representative (if one has been appointed), support coordinator (if available), the Agency, and other involved service providers, as appropriate.

(g) The licensee shall notify the Agency, in writing, of changes in the census of the home within five calendar days.

~~(h)(d)~~ A licensee who operates, administers, or manages more than one foster care facility, group home facility or residential habilitation center facility must receive approval from the Agency prior to transferring a client from one of its licensed facilities to another of its licensed facilities. Prior approval shall not be required in the event of an emergency in which there is a substantial probability that the health or safety of the client would be jeopardized in the absence of immediate relocation. ~~Agency approval or notification is not required when a client is transferred within a single comprehensive transitional education program (CTEP).~~

~~(i)(e)~~ When a resident client is moving from a licensee's facility moved to a new residential setting, the licensee releasing the resident shall provide any personal belongings of the resident client to the resident client or the resident's legal client's authorized representative. The property inventory list completed in accordance with subparagraph (j)4. paragraph (g), below, shall be referenced in order to account for all items.

~~(j)(f)~~ Prior to placement, and To ensure the smooth, safe and most effective transition of a new resident client to the licensee's facility, the licensee receiving the resident shall:

1. prior to placement, provide an opportunity for the referred resident client and his or her legal the client's authorized representative to visit the facility;

2. prior to placement, cooperate with and assist the Agency, the resident's client's support coordinator, and the resident's legal client's authorized representative with the new

resident's client's discharge from the former residential setting; and,

3. make needed preparations for the new resident client, including ensuring that all staff are made aware of the resident's client's needs, and are properly trained and equipped to meet those needs;-

~~4.(g) u~~Upon receiving the resident for care, complete placement, an itemized property inventory list accounting for the resident's client's records, personal funds, serviceable clothing, and any other personal belongings. This inventory shall be completed and signed by the licensee and the resident client or the resident's legal client's authorized representative; and, This inventory record shall be updated within 30 days to reflect the acquisition of new items and reflect items that have been discarded, except that new and discarded articles of clothing are not required to be continually inventoried.

5. update the inventory list within 30 days to reflect the acquisition of new items and reflect items that have been discarded, except that new and discarded articles of clothing are not required to be continually inventoried.

~~(h) Facilities that plan to use facility staff to take clients of the Agency out of Florida overnight shall provide prior notification to the Agency.~~

~~(i) The licensee shall cooperate and assist the Agency, the client's support coordinator, and the client's authorized representative in ensuring a smooth discharge of clients to other facilities or residential settings. Within 30 days, unless otherwise approved by the Agency, the licensee shall transfer all personal funds, medications, records, and possessions of the resident in the providers possession to the Agency, the client's support coordinator, the client's authorized representative, or the receiving facility, as applicable.~~

~~(j) A violation of this subsection shall constitute a Class III violation.~~

~~(4) Resident Funds. RESIDENT FUNDS. Neither the licensee nor staff employed by the licensee may receive any financial benefit by charging a fee against, borrowing, or otherwise using the personal funds of a client for their personal benefit.~~

(a) Neither the licensee nor staff employed by the licensee may receive any financial benefit by charging a fee against, borrowing, or otherwise using the personal funds of a resident for their personal benefit.

(b) The licensee must develop policies and procedures which detail the methods for management and accounting of any personal funds or benefits of facility residents. The policies and procedures must comply with generally accepted accounting principles. Each staff member having access to resident funds and account information must be trained in the proper implementation of these policies and procedures.

(c) The licensee must obtain written authorization, signed by the resident or the resident's legal representative annually, if the licensee will be responsible for the management of any personal funds of the resident.

(d)(a) With respect to clients of the Agency, the licensee shall maintain written receipts for purchases made with clients funds, valued at \$25.00 or more for at least one year following the date of purchase.

1. Written receipts for purchases made with client funds, valued at \$25.00 or more for at least one year following the date of purchase; and

2.(b) An accounting A record of income and expenditures from each client's personal funds, which includes any benefits received by a client. Each client's individual accounting must include, but is not limited to: shall be maintained in accordance with generally accepted accounting principles.

a. The group home facility's name and address;

b. The client's name;

c. The client's ending balance for the previous month;

d. The month and year for the accounting form;

e. The date and amount of all deposits and withdrawals;

f. An accounting of the client's personal needs allowance, as defined in Rule 65G-2.018, F.A.C., and any increase in the personal needs allowance based on the annual posting of the maximum federal benefit rate;

g. The account balance following each deposit or withdrawal;

h. A brief statement of the purpose or reason for each deposit and withdrawal;

i. The name and signature of the staff member that completed each deposit or withdrawal;

j. The client's signature, in any instance where money has been withdrawn for the client to use at his or her own discretion; and

k. The ending balance for the month.

(e)(e) No change.

(f) Accounting information for financial accounts and for cash must be made on separate forms.

(g)(d) Licensees who received benefits on behalf of clients The licensee shall maintain a checking or savings account for the personal funds of clients. If a single account is maintained for multiple clients, a separate accounting must be maintained for each individual client that reconciles monthly to the account's total, as noted on the bank statement, and shall be retained by the provider for review by the Agency. With the exception of the facility's other residents, the personal funds of clients must not be co-mingled with the funds of any other person or entity, including those of the licensee or staff.

1. If a single account is maintained for multiple clients, a separate accounting must be maintained for each individual client that reconciles monthly with the account's total, as noted

on the bank statement, and shall be retained by the provider for review by the Agency. This accounting shall include, but is not limited to, an accounting of the client's personal needs allowance, as defined in Rule 65G-2.018, F.A.C., and any increase in the personal needs allowance based on the annual posting of the maximum federal benefit rate.

2. With the exception of the facility's other residents or clients, the personal funds of residents or clients must not be co-mingled with the funds of any other person or entity, including those of the licensee or staff.

(e) Each client's individual accounting must include:

1. The group home facility's name and address;

2. The client's name;

3. The client's ending balance for the previous month;

4. The month and year for the accounting form;

5. The date and amount of all deposits and withdrawals;

6. The account balance following each deposit or withdrawal;

7. A brief statement of the purpose or reason for each deposit and withdrawal;

8. The name and signature of the staff member that completed each deposit or withdrawal;

9. The client's signature, in any instance where money has been withdrawn for the client to use at his or her own discretion; and;

10. The ending balance for the month.

(h)(f) Each licensee must maintain this client accounting information on Agency form APD 2014 09, (effective April 1, 2014), which is incorporated herein by reference, or in an alternative format that includes all required information contained in the form and tracks all of the information required in paragraph 65G 2.009(4)(e), F.A.C. A copy of this form may be obtained from the Regional Office. The Client accounting records shall be kept on the premises or maintained electronically and in a central location. Relevant current financial information, such as the account balance and a supply of funds, shall be maintained and secured in each facility to allow for purchases and other client or guardian-authorized uses of resident funds. Any cash shall be kept in a secure location within the facility. All records shall be made available, as requested by Agency staff for inspection and monitoring purposes.

(g) A violation of this subsection shall constitute a Class II violation.

(i) All client records shall be made available upon request by Agency staff for inspection and monitoring purposes.

(j) The licensee, the licensee's employees, and any family members thereof are prohibited from:

1. Being the named beneficiary of a client or resident's life insurance policy unless related to the client or resident by blood or marriage;

2. Receiving any indirect financial benefit from a client or resident's life insurance policy unless related to the client or resident by blood or marriage; or

3. Borrowing or otherwise using a client or resident's personal funds for any purpose other than the client or resident's benefit.

(k) Any records required under this subsection shall be produced, maintained, and contain information required under generally accepted accounting principles.

(5) Resident Records. CLIENT RECORDS. The facility shall establish and maintain an individual record for each client on the premises. The record shall contain information pertinent to the resident's health, supervision, and care. The records may be maintained electronically.

(a) The facility shall establish and maintain an individual record for each resident on the premises. The record shall contain information pertinent to the resident's health, supervision, and care. The records may be maintained electronically. be the property of the client and shall remain with the client in the event the client moves to a different facility or the facility has a change in providers. However, in accordance with HIPAA, the licensee shall retain a copy of the records for six years, which shall be made available to the Agency for surveying, monitoring and inspection purposes. The licensee is solely responsible for the costs of reproduction of client records for the purposes of this subsection.

(b) All documentation must be in legible English.

(c)(b) At a minimum, each resident record the client records shall include:

1. The resident's client's name and date of birth;

2. The name, addresses and telephone number of the resident's client's physician and dentist;

3. Contact information for the resident's legal client's authorized representative and support coordinator;

4. written authorization signed by the resident or resident's legal Client or authorized representative authorization for routine medical or dental care;

5. Medical and dental reports, including any examination results and laboratory findings, if received by the facility, and the resident's client's medication history and any special instructions for carrying, lifting, positioning, bathing, assisting with meals or other aspects of personal care;

6. No change.

7. If applicable, a copy of the client's current support plan, as supplied by the client's support coordinator, and any other applicable plans such as an implementation plan; or behavior plan;

7.8. a Property inventory list;

8.9. Incident reports directly involving the resident; client; and,

9.10. aA color photograph of the resident client taken within the past five years; and-

10. If applicable, a copy of the resident's current support plan, as supplied by the resident's support coordinator, and any other applicable plans such as an implementation plan or behavior plan.

(d)(e) The records shall be current to the greatest extent possible and updated at least 30 days following receipt of new information. If any of the required information is not available, the licensee shall include written documentation in the record that a diligent effort was made to obtain the missing information.

1. The property inventory list must be updated:

a. every twelve months; and

b. 30 days prior to a resident being discharged.

2. If any of the required information is not available, the licensee shall include written documentation in the record that a diligent effort was made to obtain the missing information.

(e)(d) Resident and cClient records shall be kept confidential in accordance with sSection 393.13, F.S.

(e) A violation of this subsection shall constitute a Class III violation.

(f) Resident records shall be accessible for inspection and duplication by any Agency staff or designated agent of the State of Florida who presents proper State of Florida-issued identification. If Agency staff or a designated agent requests a copy of the records, the facility shall provide a complete copy to the Agency, as soon as possible given the volume of records requested, but in any instance no later than two calendar days.

(g) Client records in the possession of the facility shall be the property of the client and shall remain with the client in the event that he or she moves to a different facility or the facility has a change in providers. However, in accordance with HIPAA, the licensee shall retain a copy of the records for six years, which shall be made available to the Agency for surveying, monitoring, and inspection purposes. For the purposes of this subsection, the licensee is solely responsible for the costs of reproducing client records.

(6) Resident Supervision. RESIDENT SUPERVISION.

(a) No change.

(b) At least one staff person must be present at all times while residents clients are in the facility. The only exception would be if the licensee prepares a written plan proposing that a specified client be left alone for limited periods of time during the day or night. Such plans must be approved by the Regional Office prior to implementation. In granting plan approval, the Agency shall consider the needs, characteristics, and abilities of the resident and the proposed circumstances under which the resident will be left alone. Non-compliance with the approved plans may result in the imposition of administrative fines, the

suspension or revocation of such plans, or other administrative actions as appropriate.

~~(e) A violation of this subsection shall constitute a Class I violation.~~

(7) Video Monitoring. VIDEO MONITORING.

~~(a) The use of video cameras for the purposes of visually monitoring residents is permitted. Video footage must not be used in any way that may humiliate, punish, demean, or violate the privacy rights of any resident. Video monitoring may also be required by the Agency as a component of any settlement agreement with a licensee, when necessary to assist in the behavioral or medical monitoring, diagnosis, intervention or treatment of residents who require ongoing and continuous supervision due to intensive medical and/or behavioral programmatic issues or if the licensee intends to use the monitoring as a means by which to prevent or detect abuse, neglect, exploitation, or sexual misconduct. Any providers that utilize a video monitoring system shall develop written criteria for determining which residents will be monitored by video camera, and protocols for implementing video monitoring.~~

(b) A licensee who uses video monitoring, shall:

1. Develop written criteria for determining which residents will be monitored by video camera;

2. Develop written protocols for implementing video monitoring, including but not limited to:

a. who may access video footage;

b. the purpose and use of video recordings; and

c. how, when, and where such footage will be stored, and for how long, to include a minimum thirty-day retention period;

~~3.(b) Receive Monitoring shall be permitted only with the written consent of the resident, if competent, or the resident's guardian or legal authorized representative prior to using video monitoring. The facility must explain when and where monitoring will occur and the purposes of the monitoring system.~~

4. Explain to the Agency, the facility's residents, or, if applicable, a resident's legal representative when and where monitoring will occur and the purpose of the monitoring system;

~~5.(e) Provide to the Agency (The titles and positions of all persons authorized to access video feeds at off-site locations must be disclosed to the Agency. Such remote access must be accompanied by safeguards, such as firewalls and other security measures, sufficient to ensure resident privacy; and-~~

6. Preserve video footage as follows:

a. for a minimum of thirty days from the recording;

b. upon the occurrence of a critical incident, as defined in paragraph 65G-2.010(6)(f), F.A.C., captured by video monitoring;

c. upon notice of any law enforcement or Department of Children and Families' investigation of any incident captured by video monitoring; and

d. at the request of the Agency and in accordance with paragraph (7)(f) of this rule.

~~(c)(d) The use of remote interactive video monitoring, where the licensee or its designee can watch live video from another location in the facility or from an offsite location, shall be limited to vocational and educational settings, medical and special treatment spaces, administrative offices, or common areas. Remote interactive video monitoring may not be used in bedrooms or bathrooms.~~

~~(d)(e) The Agency reserves the right to preclude, restrict, or suspend a facility's authority to conduct video monitoring under pursuant to this subsection at any time if the Agency determines that any provision of the provisions of this subsection or of §Section 393.13, F.S., has have been violated.~~

(e) The videos obtained by the facility through video monitoring shall be considered records of the facility and made available for viewing and duplication by any Agency staff or designated agent of the State of Florida who presents proper State of Florida-issued identification. Such videos must be maintained in a format that permits access and duplication.

(f) Storage – if a facility or licensee elects to install a video monitoring system, it must have (1) a method for saving any video of violations of Florida law and (2) a method to release the saved video to the Agency. Video shall be stored in accordance with the licensee's written protocols and preserved as required in paragraph (7)(b) of this rule. A violation of this subsection shall constitute a Class II violation.

1. It is the licensee's responsibility to have an adequate storage system capable of saving and releasing the video to the Agency for review.

2. The responsibility to save and release a video to the Agency is the licensee's responsibility. Failure to comply with this section shall be a violation under this chapter.

3. Defenses – Limited storage capacity, technical errors, or design limitations in the video licensee's technology, system, or equipment shall not be defenses to a violation of this subsection.

~~(8) Behavioral Interventions and Responses to Behavioral Issues Involving Residents. BEHAVIORAL INTERVENTIONS AND RESPONSES TO BEHAVIORAL ISSUES INVOLVING RESIDENTS.~~

~~(a) The facility shall have a written statement of policies and procedures governing actions that may be taken by direct service providers to help prevent or respond to problematic behaviors exhibited by residents, including emergency procedures and reporting requirements. Such policies and procedures, as well as any actions taken by direct service providers involving residents of the facility, shall include~~

~~emergency procedures, reporting requirements, and be consistent with the provisions of Section 393.13, F.S., as well as Chapters 65G-4 and 65G-8, F.A.C. A violation of this paragraph shall constitute a Class II violation.~~

~~(b) A direct service provider must providers shall be trained to appropriately respond in responding to serious and spontaneous behavioral incidents requiring emergency intervention procedures. A violation of this paragraph shall constitute a Class II violation.~~

~~(c) A direct service provider must not implement emergency intervention procedures that use restraint or seclusion, or cause physical discomfort, unless he or she has been certified through an Agency-approved emergency procedure curriculum under Chapter 65G-8, F.A.C. Emergency intervention procedures that use restraint or seclusion, or cause physical discomfort require approval from the Local Review Committee prior to implementation. A violation of this paragraph shall constitute a Class II violation.~~

(d) The following responses are strictly forbidden:

1. Physical or corporal punishment that includes, but is not limited to, hitting, slapping, smacking, pinching, paddling, pulling hair, pushing or shoving residents;

2. No change.

3. Verbal abuse such as cursing at residents, using slurs or derogatory names, or screaming; or

4. Humiliation, such as keeping a resident in wet or soiled clothing or diapers, making the resident stand in front of others to be ridiculed, or making the resident wear a sign or dunce cap, placing residents in dark or locked time-out rooms; and-

~~A violation of this paragraph shall constitute a Class I violation.~~

5. Any reactive strategy prohibited under Rule 65G-8.009, F.A.C.

(9) Sexual Activity and Physical Contact. SEXUAL ACTIVITY.

(a) The licensee shall develop and enforce a written policy regarding sexual activity involving residents of the facility. Such policy shall: ~~must explicitly prohibit sexual activity between a resident and a covered person and any sexual activity that involves residents who are under the age of eighteen. Such policy shall not in any way abridge nor restrict the civil and legal rights of persons with developmental disabilities, including those specified within Section 393.13, F.S.~~

1. explicitly prohibit sexual activity between a resident and a covered person;

2. explicitly prohibit sexual activity that involves residents who are under the age of eighteen;

3. not in any way abridge nor restrict the civil and legal rights of persons with developmental disabilities, including those specified within section 393.13, F.S.; and

4. address appropriate physical boundaries and standards among direct service providers and residents and must include the following elements:

a. a dress code for direct service providers that outlines the type of clothing that is acceptable as well as where and under what circumstances it is acceptable;

b. a provision for mutual respect by direct service providers and residents for personal space, such as knocking before entering a bedroom, except as may be necessary for residents who require visual supervision due to documented behavioral or medical issues;

c. parameters establishing who is allowed to visit whose bedroom and under what conditions;

d. a provision that all residents and direct service providers shall sleep in separate beds;

e. a provision that permits direct service providers to assist or supervise residents while the resident bathes, showers, or toilets, if the resident requires assistance or supervision, and that prohibits staff from bathing, showering, or toileting simultaneously with the resident under any circumstances;

f. guidelines concerning the level and type of supervision required for residents and all direct service providers shall be familiar with such guidelines; and

g. open communication among residents and direct service providers about events occurring in the facility in order to encourage reporting of incidents of inappropriate sexual behavior.

(b) The licensee shall provide direct service providers with training regarding the licensee's policy regarding sexual activity involving residents of the facility. ~~The policy shall address appropriate physical boundaries and standards among direct service providers and residents and must include the following elements:~~

~~1. Physical affection between direct service providers and residents should be brief, age appropriate, and should avoid bodily contact, such as lying together or sitting on laps, unless such affection is appropriate and clinically indicated based upon the context, such as consoling a grieving resident upon the death of a loved one, nurturing a young child recently separated from their family, or comforting a resident recovering from surgery;~~

~~2. A dress code, for both residents and direct service providers, shall be established which outlines the type of clothing that is acceptable, and where and under what circumstances it is acceptable;~~

~~3. Direct service providers and residents must respect personal space, such as knocking before entering a bedroom except as may be necessary for residents who require visual supervision due to documented behavioral or medical issues. A violation of this subparagraph constitutes a Class III violation;~~

~~4. The licensee shall limit access to bedrooms by establishing and enforcing house rules on who is allowed to visit whose bedroom and under what conditions;~~

~~5. All residents and direct service providers shall sleep in separate beds;~~

~~6. A provision which permits direct service providers to assist or supervise residents while the resident bathes, showers, or toilets, if the resident requires assistance or supervision, and which prohibits staff from bathing, showering, or toileting simultaneously with the resident under any circumstances;~~

~~7. Guidelines concerning the level and type of supervision required for residents and all direct service providers shall be familiar with such guidelines;~~

~~8. Open communication among residents and direct service providers about events occurring in the facility in order to encourage reporting of incidents of inappropriate sexual behavior.~~

(c) The following safeguards shall be implemented in any facility which serves one or more sexually aggressive residents or residents who require a Safety Plan under this rule chapter, under the iBudget Handbook incorporated by reference in Rule 59G-13.070, F.A.C., or under any other similar requirement:

1. All direct service providers shall review all available written, detailed and complete ~~history information~~ related to sexually aggressive residents in order to prevent the occurrence of sexual abuse incidents. When available to the licensee, such information provided to staff must include, but is not limited to, the date of the sexual abuse incident, type of abuse, brief narrative outlining the event, type of treatment the resident received and the outcome of the treatment. If the resident is currently in treatment, the licensee shall maintain contact information for the treatment provider;

2. Prior to admission, the facility must review the Safety Plan of any resident. The facility is responsible for complying with any requirements of the Safety Plan and implementing its provisions, as applicable to the facility. All staff must be trained on the Safety Plan prior to working with the resident;

3. The prospective resident, if legally competent, or his or her legal representative must sign and agree to the Safety Plan. The Safety Plan shall be reviewed and updated as needed, at least once a year;

~~4.2.~~ No change.

~~5.3.~~ A sexually aggressive resident ~~is~~ must not be allowed to share a bedroom with another resident without Agency approval. Such ~~approval~~ approvals shall take into consideration the licensee's plan to ~~ensure~~ assure supervision sufficient to ensure the safety of residents;

~~6.4.~~ Known sexually aggressive residents ~~who are minors~~ shall never be left alone with other residents in a bedroom, ~~or~~ bathroom, or behind closed doors without prior Agency

approval. Only one resident may use the bathroom at any time that the bathroom door is closed; and,

~~7.5.~~ Residents who are minors are not permitted to possess obscene materials as defined in Section 847.001, F.S., on the premises.

~~(d) Except as otherwise provided, a violation of this subsection shall constitute a Class I violation.~~

(10) Solicitation activities. ~~SOLICITATION ACTIVITIES.~~ The licensee must have the written permission of the resident, client, if competent, or the resident's legal client's authorized representative prior to using the resident's image, voice, client, the client's name, picture, personal information, or disability for the purpose of securing donations. ~~A violation of this subsection shall constitute a Class III violation.~~

(11) First Aid. FIRST AID. The facility shall have on the premises an American Red Cross approved first aid kit. The first aid kit shall be maintained in places known to and readily available to all direct service providers. ~~Potentially toxic materials contained within first aid kits should be stored in a manner which does not pose a risk to residents. A violation of this subsection shall constitute a Class III violation.~~

(a) The facility shall have on the premises an American Red Cross-approved or equivalent first aid kit that meets essential safety standards with unexpired contents. The first aid kit shall be maintained in places known to and readily available to all direct service providers.

(b) Potentially toxic materials contained within first aid kits should be stored in a manner which does not pose a risk to residents.

(12) Medication. MEDICATION.

(a) Medication shall be administered to a resident clients in accordance with the written order or prescription issued by the resident's an individual's health care practitioner. Ongoing staff re-training and competency-based competency-based verification of skills shall be provided when there is evidence of medication errors to correct staff practices and prevent future occurrences. ~~A violation of this paragraph resulting in a direct, negative impact to the health and safety of the individual, or presenting an imminent danger to the individual shall constitute a Class I violation.~~

(b) All prescription medication shall be kept in its original container bearing the original dated label with legible information stating the prescription number, direction for use, resident's client's name, physician's name, and address of the issuing pharmacy.

(c) Medication shall be kept in a locked enclosure and shall only be accessible by the facility's staff.

(d) A resident whose client, whom the physician has deemed the resident capable of handling his or her his/her own medications, should be encouraged to do so. Staff shall assist

the resident client by making the medication available and reminding the resident client to take medication at appropriate times.

(e) The licensee must maintain a current an up-to-date and accurate daily record of prescription and non-prescription and/or nonprescription medication administered to residents clients in accordance with the provisions of Chapter 65G-7, F.A.C.

(f) The administration of medication to residents, as well as the documentation of administration of such medication, medication storage, and error reporting shall be performed in accordance with Sections 393.13 and 393.506, F.S., Chapter 65G-7, F.A.C., and this rule chapter.

(g) If the licensee or a direct service provider observes or receives reports from other individuals that a resident client may have experienced an adverse reaction to an administered medication, such information must be conveyed immediately to either the prescribing physician or the licensed medical professional employed by the licensee who has been charged with the responsibility of securing appropriate medical treatment for residents with health-related issues or concerns. If either the prescribing physician or medical professional employed by the licensee is unable to be reached, facility staff shall immediately seek medical attention for the resident. A violation of this paragraph shall constitute a Class I violation.

(h) With the exception of paragraphs (a) and (g), a violation of this subsection shall constitute a Class II violation.

(13) Specialized Equipment. SPECIALIZED EQUIPMENT. The licensee shall ensure that all direct service providers have been trained and are competent in the proper application, monitoring, and removal of specialized equipment worn by residents, including but not limited to Ankle Foot Orthoses (AFOs), leg braces, arm splints, neck collars, helmets, and safety belts. In addition, direct service providers shall be knowledgeable in the proper operation of other specialized equipment required by residents such as wheelchairs, lifts, and positioning devices. The licensee shall contact the appropriate support coordinator(s) as soon as significant signs of wear and tear are noticed on specialized equipment used by the residents. A violation of this subsection shall constitute a Class III violation.

(a) The licensee shall ensure that all direct service providers have been trained and are competent in the proper application, monitoring, and removal of specialized equipment worn by residents, including but not limited to Ankle-Foot Orthoses (AFOs), leg braces, arm splints, neck collars, helmets, and safety belts.

(b) The licensee shall ensure that all direct service providers are knowledgeable in the proper operation of other specialized equipment required by residents such as wheelchairs, lifts, and positioning devices.

(c) The licensee shall contact the appropriate support coordinator(s) as soon as significant signs of wear and tear are noticed on specialized equipment used by a resident.

(14) Transportation. TRANSPORTATION.

(a) The facility shall provide or arrange for the incidental transportation of residents within the community as a typical household would provide for its members. This shall include, but is not limited to, trips to malls, grocery stores, religious worship services, medical or dental appointments, and recreational outings within the surrounding community. These trips shall be provided by the facility at no cost to the residents unless such trips involve destinations which are more than 25 miles from the facility.

(b) A record must be maintained that lists each participant being transported in a vehicle. The record must be maintained on file at the facility for a minimum of 12 months.

1. All transportation records must be available for review by the Agency during monitoring visits and upon request.

2. The transportation record must include, at minimum:

a. Name of each resident;

b. Date and time of departure;

c. Date and time of the arrival; and

d. Name and signature of the driver.

3. Prior to each departure, the transportation record must be recorded with each resident's name, date and time of departure, and initialed by the direct service provider verifying each resident is accounted for.

4. Upon arrival at the destination, the driver of the vehicle must complete the transportation record and mark each resident off the record as the resident departs the vehicle.

(c) The driver must complete a physical inspection and visual sweep of the vehicle at the arrival of the destination to ensure that no resident is left in the vehicle.

(d) If the licensee contracts with an outside entity to provide transportation, the licensee must assign a direct care personnel to perform the duties described in this rule.

(e) The maximum number of individuals transported must not exceed the manufacturer's designated seating capacity or the number of factory installed seatbelts.

(f) When transporting residents, the staff to resident ratio must be maintained.

(g) Residents must use seatbelts or other safety restraints during transportation.

(h) Direct care staff must meet all training requirements set forth in this rule.

(i) All vehicles used to transport participants must be maintained in a clean condition and pursuant to the vehicle or manufacturers' requirements or instructions to ensure that they are in proper working order. Documentation of the maintenance must be maintained on file for a minimum of 12 months, and

available to Agency staff during monitoring visits and upon request.

(j) Smoking and vaping shall be prohibited in vehicles.

(k) The interior of the vehicle, when being used to transport residents must be maintained at a temperature between 65 to 78 degrees Fahrenheit. The vehicle can be ventilated either by mechanical or natural means to maintain the temperature. This is only during operational transportation of the vehicle and does not include the loading or unloading of the vehicle.

(l) Transportation shall be provided by the facility at no cost to the residents unless such trips involve destinations which are more than 25 miles from the facility. If the trip is more than 25 miles, the facility may charge the residents for the excess.

(m)(b) Any vehicle operated by the facility in which residents are transported shall: ~~have a current license plate, carry at least the minimum insurance coverage required by state law, contain a working and tagged fire extinguisher, be operated by a driver holding an appropriate valid driver's license, have working seatbelts and wheelchair tie-downs when applicable, have working heat and air conditioning, and be maintained in a manner to ensure safe transport.~~

1. have a current license plate;

2. carry at least the minimum insurance coverage required by state law;

3. contain a working and tagged fire extinguisher;

4. be operated by a driver holding an appropriate valid driver's license;

5. have working seatbelts and wheelchair tie-downs when applicable;

6. have working heat and air conditioning; and

7. be maintained in a manner to ensure safe transport.

(c) through (d) renumbered (n) through (o) No change.

(p)(e) Residents shall ~~may~~ not be left unattended in any vehicle operated by the facility. A violation of this paragraph shall constitute a Class I violation.

(f) ~~With the exception of paragraph (e), a violation of this subsection shall constitute a Class II violation.~~

(q) Facilities that plan to use facility staff to take clients outside of Florida shall provide prior notification to the Agency.

(15) Communication Among Staff. COMMUNICATION AMONG STAFF. A facility shall have a system in place to communicate recent incidents and client information to staff working on subsequent shifts.

(a) Each facility shall have a system in place to communicate recent incidents and resident information to staff working on subsequent shifts. The system shall include: ~~a mechanism for documenting in writing, any and all information, such as medical or behavioral incidents or physician or therapist orders or recommendations, of which staff should be made aware and which could potentially affect~~

~~the residents' health or safety if staff were unaware of such information.~~

1. a mechanism for documenting in writing any and all information, such as medical or behavioral incidents or physician or therapist orders or recommendations, of which staff should be made aware and which could potentially affect the residents' health or safety if staff were unaware of such information; and

~~2.(b) The system established shall include a procedure or mechanism to ensure assure that the information described in this subsection is reviewed across all shifts.~~

(b)(e) No change.

~~(d) A violation of this subsection shall constitute a Class III violation.~~

*Rulemaking Authority 393.067(1), 393.067(7), 393.501(1), 393.067, 393.506(6) FS. Law Implemented 393.067, 393.13, 393.135, 393.506 FS. History—New 7-1-14, Amended \_\_\_\_\_.*

### 65G-2.010 Fire and Emergency Procedures.

(1) Emergency Standards EMERGENCY STANDARDS.

(a) No change.

(b) There shall be at least one telephone which is accessible to direct service providers and residents for emergency use at all times. The facility must have the following telephone numbers readily accessible at each telephone extension in the facility:

1. through 2. No change.

3. Each resident's Residents<sup>2</sup> doctors;

4. No change.

5. Support Coordinator for each resident ~~client~~;

6. through 9. No change.

~~(e) A violation of this subsection shall constitute a Class III violation.~~

(2) Fire Safety Standards FIRE SAFETY STANDARDS. The licensee shall annually request that the local authority having jurisdiction over fire safety or the State Fire Marshall shall be requested to annually inspect the facility for compliance with Chapter 69A-38, F.A.C., as applicable. The facility must have an approved fire inspection prior to receiving an initial license or the renewal of a license. Dates and results of required monthly fire drills (i.e., time of day, points of exit used, evacuation time, and signature of person conducting the drill) shall be recorded and maintained for one year following the date of the drills. Required monthly fire drills shall not be conducted between the hours of midnight and 5:00 a.m. Regional Office employees shall be afforded the opportunity to observe monthly fire drills in order to verify the effectiveness and efficiency of evacuations. A violation of this subsection shall constitute a Class III violation.

(3) Emergency Preparedness Drills.

(a) Dates and results of required monthly fire drills (i.e., time of day, points of exit used, evacuation time, and signature of person conducting the drill) shall be recorded and maintained for one year following the date of the drills.

(b) Required monthly fire drills shall not be conducted between the hours of midnight and 5:00 a.m.

(c) Regional Office employees shall be afforded the opportunity to observe monthly fire drills in order to verify the effectiveness and efficiency of evacuations.

(4)(3) Emergency Management Plans ~~EMERGENCY MANAGEMENT PLANS.~~

(a) EMERGENCY PLAN COMPONENTS. ~~Under Pursuant to~~ Section 393.067(8), F.S., each facility shall prepare and maintain a written comprehensive emergency management plan which shall be updated as needed and on an annual basis. The emergency management plan must address the following:

1. Provisions ~~Provision~~ for all hazards. Each plan shall describe the potential hazards to which the facility is vulnerable such as hurricanes, tornadoes, flooding, fires, hazardous materials, incidents from fixed facilities or transportation accidents, and power outages during severe cold or hot weather.

2. Provisions ~~Provision~~ for the care of residents remaining in the facility during an emergency, including pre-disaster or emergency preparation, protecting the facility, ensuring residents and staff have adequate supplies, medications, emergency power, food and water, maintaining adequate staffing, and emergency equipment.

3. Provisions ~~Provision~~ for the care of residents who are evacuated from the facility during an emergency, and provision for the care of any residents that remain in the facility during an emergency, including identification of such residents and transfer of resident records, evacuation transportation, sheltering arrangements, supplies, staffing, emergency equipment, and medications.

4. through 5. No change.

6. Arrangement for post-disaster activities including responding to family inquiries, obtaining medical intervention for residents, transportation, and reporting to the county office of emergency management the number of residents who have been relocated and the place of relocation.

7. No change.

(b) Emergency Management Plan Development ~~EMERGENCY MANAGEMENT PLAN DEVELOPMENT.~~

1. Emergency management plans shall be updated at least annually and may be developed with the assistance of appropriate resource persons from the local fire marshal, Regional Office, or local emergency management agency. ~~Comprehensive transitional education programs and facilities which serve residents with complex medical conditions must~~

~~have their emergency management plans approved by the local emergency management agency.~~

2. No change.

(c) Emergency Management Plan Implementation ~~EMERGENCY MANAGEMENT PLAN IMPLEMENTATION.~~ In the event of an internal or external disaster, the facility shall implement the facility's emergency management plan in accordance with sections 252.355 and 252.356, F.S.

1. All staff must be knowledgeable of facility procedures for handling emergencies, trained in their duties and are responsible for implementing the emergency management plan. All staff must be trained on the facility's emergency management plan within 30 days of hire. Staff shall be trained on the emergency management plan annually, after the plan's annual update.

2. All staff are responsible for implementing the emergency management plan and must be able to implement the emergency management plan.

~~3.2.~~ If telephone service is not available during an emergency, the facility shall request assistance from local law enforcement or emergency management personnel in maintaining communication.

(d) Facility Evacuation ~~FACILITY EVACUATION.~~ The facility must evacuate the premises during or after an emergency if so directed by the local emergency management agency.

1. The facility shall report the evacuation to the designated Agency Regional local office of emergency management or designee and to the Agency within six hours of the evacuation order and at every six hour interval until the evacuation is complete.

2. The facility shall not be reoccupied ~~re-occupied~~ until the area is cleared for reentry by the local emergency management agency, local fire marshall, or any other agency or entity having authority or its designee and the facility can meet the immediate needs of the residents.

3. In cases where the facility experiences significant structural damage, the licensee or facility staff must relocate residents until the facility can be safely reoccupied ~~re-occupied~~.

4. The licensee or designated facility staff is responsible for knowing the location of all relocated ~~re-located~~ residents and for ensuring until such time that those residents return to the facility safely.

5. The licensee or designated facility staff shall provide the Agency with the name of a contact person who shall be available by telephone 24 hours a day, seven days a week, until the facility is reoccupied ~~re-occupied~~.

6. The licensee or designated facility staff shall assist in the relocation of residents and shall cooperate with outreach teams established by the Agency or emergency management officials

to assist in relocation efforts. ~~The Resident~~ needs and preferences of each resident shall be considered to the greatest extent possible in any relocation decision.

(e) Emergency Shelter ~~EMERGENCY SHELTER~~. In the event a state of emergency has been declared and the facility is not required to evacuate the premises, the facility may provide emergency shelter above the facility's licensed capacity provided the following conditions are met:

1. ~~No person's life, health, and overall~~ Life safety will ~~not~~ be jeopardized ~~for any individual~~;

2. The immediate needs of all residents and other individuals sheltered at the facility can be met by the facility;

3. Within forty-eight (48) hours following the facility exceeding its capacity, the facility must report ~~reports~~ to the Agency that the facility is over capacity and describes the conditions which have caused it to be over capacity. If the facility will continue to be over capacity after the declared emergency ends, the Agency shall review such ongoing requests on a case-by-case basis; ~~and~~;

4. The facility must ensure that those individuals who are not residents of the facility are returned to their place of residence or other suitable placement as soon as possible; and maintains a log of the additional persons being housed in the facility. The log shall include the individual's name, usual address, and the dates of arrival and departure. The log shall be available for review by representatives of the Agency and the local emergency management agency or its designee. The admissions and discharge log maintained by the facility may be used for this purpose provided the information is maintained in a manner that is easily accessible.

5. The facility maintains a log of the additional persons being housed in the facility. The log shall include the individual's name, usual address, and the dates of arrival and departure. The log shall be available for review by representatives of the Agency and the local emergency management agency or its designee. The admissions and discharge log maintained by the facility may be used for this purpose provided the information is maintained in a manner that is easily accessible.

~~(f) A violation of this subsection shall constitute a Class II violation.~~

~~(5)(4) Missing Residents~~ MISSING RESIDENTS. ~~After Beyond one hour after determining that a resident child or an adult who has been adjudicated incompetent is missing, staff shall immediately call local law enforcement and ask the officer to:~~

(a) No change.

(b) Assign a case number and provide the number to the ~~staff person~~ reporting the resident as missing; and;

(c) No change.

(d) If the responding law enforcement officer refuses to take a missing person report for any reason, the ~~staff person~~ making the report will document the name of the officer and call the responding local law enforcement agency and request to speak to the appropriate Watch Commander about the refusal to take a missing person report. ~~If the local law enforcement officials do not accept the report, the staff shall immediately notify the Regional Office. A violation of this paragraph shall constitute a Class III violation.~~

~~(e) The facility shall make a critical incident report in accordance with paragraph (6)(f) of this rule. Except as otherwise provided a violation of this subsection shall constitute a Class II violation.~~

~~(6)(5) Incident Reporting. INCIDENT REPORTING. In all cases involving known or suspected abuse, neglect or exploitation, the incident shall be reported immediately to the Florida Abuse Hotline as required under Sections 39.201 and 415.1034, F.S. The Provider or Covered person must take immediate action in the situation to resolve the emergency and ensure the individual's health and safety. This action may include, but is not limited to, calling 911, or performing Cardiopulmonary Resuscitation (CPR) for recipients without a pulse who are not breathing and do not have a Do Not Resuscitate (DNR) Order, or back blows and abdominal thrust maneuvers for choking. In all cases involving known or suspected abuse, neglect or exploitation, the incident shall be reported immediately to the Florida Abuse Hotline as required under Sections 39.201 and 415.1034, F.S. In addition, all incidents must be reported to the Regional Office in the following manner and according to the specified timeframes utilizing the APD Incident Reporting, Form APD OP 3 0006, effective May 25, 2018, which may be obtained at <http://www.flrules.org/Gateway/reference.asp?No=Ref-09533>, which is herein incorporated by reference. A copy of this form may be obtained from the Regional Office.~~

~~(a) In all cases involving known or suspected abuse, neglect or exploitation, the incident shall be reported immediately to the Florida Abuse Hotline as required under sections 39.201 and 415.1034, F.S. Critical incidents must be reported to the appropriate Regional Office by telephone or in person within 1 hour after facility staff become aware of the incident. If this occurs after normal business hours or on a weekend or holiday the person reporting the incident shall call the Regional Office after hours designee. If the incident occurs between the hours of 8:00 p.m. and 8:00 a.m., a telephonic or in-person contact must be made with the Regional Office no later than 9:00 a.m. It shall be within the provider's discretion and judgment to determine the appropriateness of waiting until the following morning. A supervisor may be the one to make the verbal report. Telephonic or in person contacts should be followed up with the submission of a completed APD Incident~~

Reporting Form to the Regional Office within 1 business day following the critical incident. This form should be faxed, electronically mailed, or personally delivered to the Regional Office. The information contained in the first page must be provided by the person with firsthand knowledge of the incident. Additionally, any and all follow up measures taken by a Provider or Covered Person to protect a resident or client, gain control or manage the situation must be noted on the second page of the incident reporting form, which may be completed and submitted to the Regional Office at a later date, not to exceed five business days. The measures must specify what actions will be taken to mitigate a recurrence of the same type of incident. Critical incidents include the following:

1. The unexpected death of a resident or a client;
2. Any sexual activity, as defined in Section 393.135, F.S., between a covered person and a resident or client regardless of the consent of the resident or client, incidents of nonconsensual sexual activity between residents or clients, sexual activity involving any resident or client who is a minor; and nonconsensual sexual activity between a resident or client and any person in the community.
3. The unexpected absence or unknown whereabouts, beyond one hour, of a resident or client who is a minor or an adult resident or client who has been adjudicated incompetent;
4. A resident or client has sustained a life threatening injury or illness;
5. Negative news media reports regarding the operation of the facility or the care of residents or clients;
6. The arrest of a resident or client for a violent criminal offense;
7. The arrest of a covered person for a potentially disqualifying offense specified in Section 393.0655, F.S.; or
8. The Department of Children and Families has made a finding of verified abuse, neglect, exploitation, or abandonment by the provider or the provider's employees.

(b) The licensee shall report all incidents and follow up measures to incidents to the Agency in the following manner and according to the specified timeframes using APD Incident Reporting Form OP 3-0006 (December 2025), incorporated herein by reference and available at <https://flrules.org/Gateway/reference.asp?No=Ref-18972>. A copy of this form may also be obtained from the Agency. Other reportable incidents must be reported to the Regional Office within one business day following the incident through the completion of a written incident report which may be faxed, electronically mailed, or personally delivered to the Regional Office. Additionally, any and all follow up measures taken by a Provider or Covered Person to protect a resident or client, gain control or manage the situation must be noted on the second page of the incident reporting form, which may be completed

and submitted to the Regional Office at a later date, not to exceed five business days. Reportable incidents include:

1. The death of a resident or client that does not constitute an unexpected death;
2. Physical altercations occurring between a resident or client and a member of the community, a resident or client and direct service providers, or two or more residents or clients, that results in law enforcement contact;
3. Any injury to a resident or client due to an accident, act of abuse, neglect or other incident that occurs or allegedly occurs while the resident or client is receiving services from a covered person that requires the resident or client to receive medical treatment in an urgent care center, emergency room or physician office setting due to injury that is being reported currently or requires admission to a hospital;
4. The arrest of a resident or client for a non-violent offense while that resident or client is under the care of a provider or covered person;
5. The unexpected absence or unknown whereabouts of a legally competent adult resident or client beyond eight hours;
6. Any act which clearly reflects the physical attempt by a resident or client to cause his or her own death;
7. The commitment of a resident or client to mental health services pursuant to Chapter 394, F.S., also known as the "Baker Act;" or
8. Any sudden onset of illness to a resident or client while receiving services from a covered person that requires the resident or client to receive medical treatment in an urgent care center, emergency room or physician office setting due to sudden onset of illness or requires admission to a hospital.

(c) The reporting provider or covered person making the report shall also immediately notify the resident's legal authorized representative and support coordinator, as appropriate and, for children in the custody of the Department of Children and Families, the designated caseworker.

(d) The provider or covered person must take immediate action in the situation to resolve the emergency and ensure the individual's health and safety. This action may include, but is not limited to, calling 911, performing Cardiopulmonary Resuscitation (CPR) for recipients without a pulse who are not breathing, and back blows and abdominal thrust maneuvers for choking. Upon statewide implementation of the Agency's electronic incident reporting system, licensees shall also be required to submit all critical and reportable incidents to the Agency via the electronic system.

(e) The APD Incident Reporting Form shall be electronically submitted to the appropriate Regional Office in the agency approved method within the required timeframes outlined in this rule. The report must be completed as accurately as possible, based on firsthand knowledge when available. A violation of this subsection shall constitute a Class II violation.

(f) Providers or covered persons must provide initial notice of the occurrence of a critical incident within four hours after the provider or covered person becomes aware of the incident. Initial notice may be made via electronic submission through the Agency's designated incident reporting system, e-mail, or phone call to the appropriate Regional Office. A complete APD Incident Reporting Form must be submitted electronically within one calendar day after the initial notification. Telephonic contact does not include the sending of text messages over the phone.

1. A supervisor may be the one to make the initial notice of the critical incident.

2. The APD Incident Reporting Form must be completely filled out and electronically submitted via the Agency's designated incident reporting system and must include, at minimum:

a. Individuals involved in the incident, including staff and any witnesses;

b. When the incident occurred;

c. Location of incident;

d. Incident category and type;

e. Detailed description of the incident, including circumstances prior, during, and after the incident;

f. Causes or contributing factors to the incident;

g. Provider responsible for care during the incident, when applicable;

h. Any and all actions taken by a provider or covered person to protect a resident, participant, or client, gain control, remedy or manage the situation;

i. Any information identified within the providers investigation into the incident, if applicable;

j. Law enforcement information, when applicable; and

k. Department of Children and Families investigation information, when applicable.

3. Critical incidents include the following:

a. The unexpected death of a resident or a client;

b. Any sexual activity, as defined in section 393.135, F.S., between a covered person and a resident or client regardless of the consent of the resident or client, incidents of nonconsensual sexual activity between residents or clients, sexual activity involving any resident or client who is a minor; and nonconsensual sexual activity between a resident or client and any person in the community;

c. The unexpected absence or unknown whereabouts, beyond one hour, of a resident or client who is a minor or an adult resident or client who has been adjudicated incompetent;

d. A resident or client has sustained a life-threatening injury or illness;

e. A hospital admission as a result of a medication error;

f. Negative news media reports regarding the operation of the facility or the care of residents or clients;

g. The arrest of a resident or client for a violent criminal offense;

h. The arrest of a covered person for a potentially disqualifying offense specified in section 393.0655, F.S.;

i. The Department of Children and Families has made a finding of verified abuse, neglect, exploitation, or abandonment by the provider or the provider's employees;

j. Suspected or confirmed human trafficking of a resident, participant, or client; or

k. Resident, participant, or client left in vehicle unattended.

(g) Reportable incidents must be reported to the Regional Office within one calendar day following the incident by submitting a completed APD Incident Reporting Form which must be electronically mailed to the designated Regional Office email address for the region in which the resident resides. Reportable incidents include:

1. The death of a resident or client that does not constitute an unexpected death;

2. Physical altercations occurring between a resident or client and a member of the community, a resident or client and direct service providers, or two or more residents or clients, that results in law enforcement contact;

3. Any injury to a resident or client due to an accident, act of abuse, neglect or other incident that occurs or allegedly occurs while the resident or client is receiving services from a covered person that requires the resident or client to receive medical treatment in an urgent care center, emergency room or physician office setting due to injury that is being reported currently or requires admission to a hospital;

4. The arrest of a resident or client for a non-violent offense while that resident or client is under the care of a provider or covered person;

5. The unexpected absence or unknown whereabouts of a legally competent adult resident or client beyond eight hours;

6. Any act which clearly reflects the physical attempt by a resident or client to cause his or her own death;

7. The commitment of a resident or client to mental health services pursuant to chapter 394, F.S., also known as the "Baker Act;"

8. The commitment of a resident, participant, or client to mental health services through voluntary commitment;

9. Injury of a covered person caused by a resident, participant, or client; or

10. Any sudden onset of illness to a resident or client while receiving services from a covered person that requires the resident or client to receive medical treatment in an urgent care center, emergency room or physician office setting due to sudden onset of illness or requires admission to a hospital.

(h) Any and all follow-up measures taken by a provider or covered person to protect a resident, participant, or client, gain control, remedy or manage the situation must be noted on APD

Incident Reporting Form, which must be completed and submitted to the Regional Office no later than five days following the date the incident was reported. Ongoing follow-up information must be submitted to the Regional Office until the incident is resolved. If the initial incident report contains all necessary information for the initial and follow-up reporting, an additional follow-up is not necessary. Follow-up documentation includes:

1. All follow-up actions implemented by the provider.

2. Preventative measures taken or initiated by the provider to prevent the recurrence of the same type of incident, when applicable.

3. Any follow-up activities related to medical, behavioral, additional support, etc. to ensure ongoing health and safety of the client.

*Rulemaking Authority 393.067(1), 393.067(7), 393.501(1), 393.067 FS. Law Implemented 393.067 FS. History—New 7-1-14, Amended 7-1-18.*

APD Incident Reporting Form OP 3-0006 is substantially rewritten. See F.A.C. for present text at <http://www.flrules.org/Gateway/reference.asp?No=Ref-09533>.

#### **65G-2.014 Comprehensive Transitional Education Program Standards.**

*Rulemaking Authority 393.501(1), 393.067 FS. Law Implemented 393.067, 393.18 FS. History—New 7-31-91, Formerly 10F-6.013, 65B-6.013, Amended 7-1-14, Repealed.*

#### **65G-2.015 Siting.**

(1) This rule applies to facilities licensed by the Agency ~~under pursuant to~~ §Section 393.067, F.S., and this rule chapter. It does not apply to those facilities licensed as foster care facilities ~~that which~~ also use live-in caregivers.

(2) Definitions.

(a) No change.

(b) “Facility” means a home licensed by the Agency as ~~defined described~~ defined within §Section 393.067, F.S., and this chapter.

(c) “Foster care facility” means a residential facility licensed by the Agency as ~~defined described~~ defined within §Chapter 393, F.S., which 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 not be more than three residents.

(d) No change.

(e) “Lot” means a parcel or tract of land ~~defined described~~ by reference to recorded plats or by metes and bounds, or the least fractional part of subdivided lands having limited fixed boundaries or an assigned number, letter, or any other legal description by which it can be identified.

~~(f) “Parcel” means a platted or unplatted lot, tract, unit, or other subdivision of real property within a community.~~

(3) All facilities seeking initial licensure, or licensure in a different licensing category, on or after July 1, 2014 ~~the effective date of this rule~~ must fully comply with the requirements of §Section 419.001, F.S., to the extent applicable.

~~(4) After the effective date of this rule, only one facility may be sited on a single parcel of land. An applicant may seek an exception to this requirement in the following circumstances: If the facilities are located on a single parcel but are each located on a part of the parcel that is separated from the other parts of the parcel by a body of water or a limited access highway (not intended for an individual to cross on foot, or bicycle, by motor vehicle or other means of transport conveyance) that divides the parcel and separates the facilities. Approval by the Agency Director or his/her designee must be obtained prior to licensure under this exception.~~

~~(5) After the effective date of this rule, facilities may be sited on no more than two adjacent parcels of land. An applicant may seek an exception to this requirement in the following circumstances: If the parcels are separated by a body of water or a limited access highway (not intended for an individual to cross on foot, or bicycle, by motor vehicle or other means of transport conveyance) that divides the parcels and separates the facilities. Approval by the Agency Director or his/her designee must be obtained prior to licensure under this exception.~~

~~(4)(6) Even with the aforementioned exceptions described within subsections (4) and (5) of this rule, there shall be not more than three facilities within a radius of 1,000 feet. In addition, licensure of any facility located within 1,000 feet of another facility can only occur if a variance is first granted by the appropriate local government unit in accordance with the provisions of §Section 419.001, F.S.~~

~~(5)(7) All distance requirements in this section shall be measured from the nearest point of the existing home or area of single-family zoning to the nearest point of the proposed home. For purposes of this rule, distance shall be measured along a radius from the center of the actual parcel (where the new proposed facility is to be located) in all directions. The facility seeking initial licensure or a change in an existing license shall be included in the computation of numbers of facilities within a 1,000 foot radius.~~

~~(6)(8) The requirements of subsections (4) and (5), and (6) of this rule, do not apply to a “community residential home” located within a “planned residential community” as those terms are defined in §Section 419.001, F.S. A facility has the burden of establishing that it is a “community residential home” within a “planned residential community.” To satisfy this burden, a facility must provide the following documents with its initial license application and each subsequent license renewal application:~~

~~(a) No change.~~

~~(b) Documents which verify that the facility:~~

- 1. ~~The facility~~ is a community residential home located within a planned residential community;
- 2. ~~The planned residential community~~ is under unified control;
- 3. ~~The planned residential community~~ was planned and developed as a whole;
- 4. ~~The planned residential community~~ has a gross lot area of 8 acres or more; and;
- 5. ~~The planned residential community~~ provides choices with regard to housing arrangements, support providers, and activities.

Rulemaking Authority ~~393.066(8), 393.067(1), 393.067(7), 393.501(1) FS. Law Implemented 393.066, 393.067, 393.501 FS. History—New 8-1-05, Formerly 65B-6.014, Amended 7-1-14,\_\_\_\_\_.~~

**65G-2.017 Health Safety Standards for Licensed Facilities.**

Rulemaking Authority 393.066, 393.0662, 393.067, 393.501, 402.33, FS. Law Implemented 393.066, 393.0662, 393.067, 402.33, FS. History—New 8-17-23, Repealed\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Sean Buchanan, Assistant Director of Quality and Accountability

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Bob Asztalos, Director

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 9, 2025

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: June 27, 2025

**Section III  
Notice of Changes, Corrections and  
Withdrawals**

**FISH AND WILDLIFE CONSERVATION COMMISSION**

RULE NO.: 68-1.003      RULE TITLE: Florida Fish and Wildlife Conservation Commission Grants Program  
NOTICE OF CORRECTION

Notice is hereby given that the following correction has been made to the proposed rule in Vol. 51 No. 242, December 16, 2025 issue of the Florida Administrative Register.

**68-1.003 Florida Fish and Wildlife Conservation Commission Grants Program.**

- (1) through (8) No change.
- (9) All Florida Boating Improvement Program grant applicants must meet the requirements set forth in the Florida Boating Improvement Program Guidelines (August 2025) [https://www.flrules.org/Gateway/reference.asp?No=Ref-](https://www.flrules.org/Gateway/reference.asp?No=Ref-18982)

~~18982, and apply utilizing the FWC Boating Access Programs Application System (Form 2025.08) at <https://www.flrules.org/Gateway/reference.asp?No=Ref-18981>. Both the guidelines and application are available from the Commission at <https://myfwc.com/boating/grants-program/fbip/>, effective August 2025, and is hereby incorporated by reference. Both the Guidelines and Application are available from the Commission at <https://myfwc.com/boating/grants-programs/fbip/> ~~<https://myfwc.com/boating/grants-programs/bigp/>~~, effective August 2025, and are hereby incorporated by reference.~~

(10) through (14) No change.  
Rulemaking Authority 206.606, 327.04, 327.47, 379.106, 823.11(4) FS. Law Implemented 206.606, 327.47, 328.72, 379.106, 823.11(4) FS. History—New 4-4-04, Amended 3-15-05, Formerly 68A-2.015, Amended 5-22-07, 7-6-08, 1-18-09, 3-21-10, 6-30-10, 5-20-12, 2-9-15, 9-11-16, 9-13-16, 4-23-17, 5-24-18, 2-21-19, 4-18-19, 7-17-19, 9-11-19, 11-28-19, 4-15-20, 4-19-20, 1-6-21, 12-7-21, 1-25-23, 4-13-23, 3-7-24, 3-14-24, 12-25-24,\_\_\_\_\_.

**Section IV  
Emergency Rules**

**DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES**

**Division of Food Safety**

RULE NO.: 5KER25-6      RULE TITLE: Requirement to Label the Concentration of 7-Hydroxymitragynine on Kratom Products

SPECIFIC REASONS FOR FINDING AN IMMEDIATE DANGER TO THE PUBLIC HEALTH, SAFETY OR WELFARE: On August 20, 2025, the Attorney General of Florida adopted Emergency Rule 2ER25-2, and on December 8, 2025 adopted Emergency Rule 2ER25-3, adding 7-Hydroxymitragynine (methyl (E)-2[(2S,3S,7aS,12bS)-3-ethyl-7a-hydroxy-8-methoxy-2,3,4,6,7,12b-hexahydro-1H-indolo[2,3-a]quinolizin-2-yl]-3-methoxyprop-2-enoate) concentrated at a level above four hundred parts per million on a dry-weight basis, to the list of Schedule I Controlled Substances in subsection 893.03(1)(a), F.S., and excluding mitragynine from the declaration. Kratom Products are food products sold in Florida that commonly contain 7-Hydroxymitragynine, its isomers, esters and ethers. In order to protect the public health, safety, and welfare, the Department is adopting this emergency rule to require that the concentration of 7-Hydroxymitragynine, its isomers, esters, and ethers, be declared on the label of Kratom Products. The rule provides requirements for reporting the concentration of 7-Hydroxymitragynine in the product and how it should be displayed on the product label to provide the public adequate notice of the contents. Without this information consumers may not know how much 7-Hydroxymitragynine they are

consuming and businesses may not know whether they are buying and selling controlled substances.

REASON FOR CONCLUDING THAT THE PROCEDURE IS FAIR UNDER THE CIRCUMSTANCES: This rule is fair and justified because it takes only the actions necessary to protect public health, safety, and welfare by ensuring Kratom Products are properly labeled to put consumers on notice that the product contains a substance that is a controlled substance in certain concentrations.

SUMMARY: This rule adopts additional labeling requirements for Kratom Products.

THE PERSON TO BE CONTACTED REGARDING THE EMERGENCY RULE IS: Isaiah Hunt, at [Isaiah.Hunt@fdacs.gov](mailto:Isaiah.Hunt@fdacs.gov) or at (850)245-5520, 3125 Conner Blvd., Tallahassee, Florida 32399

THE FULL TEXT OF THE EMERGENCY RULE IS:

**5KER25-6 Requirement to Label the Concentration of 7-Hydroxymitragynine on Kratom Products.**

(1) Kratom Products, as defined in Rule 5K-4.030, F.A.C., shall declare on the label the concentration of 7-Hydroxymitragynine (methyl (E)-2[(2S,3S,7aS,12bS)-3-ethyl-7a-hydroxy-8-methoxy-2,3,4,6,7,12b-hexahydro-1H-indolo[2,3-a]quinolizin-2-yl]-3-methoxyprop-2-enoate), also known as “7-OH” or “7-Hydroxy”, and each of its isomers, esters, ethers, salts, and salts of isomers, esters, and ethers, whenever the existence of such isomers, esters, ethers, and salts is possible within the specific chemical designation, expressed in parts per million (PPM) on a dry-weight basis, of the net contents of the package. The sale of Kratom Products in violation of Rule 5K-4.030, F.A.C., or of this emergency rule shall be subject to penalties as provided in subsection 5K-4.030(5), F.A.C.

(2) For purposes of declaring the concentration of 7-Hydroxymitragynine on a product label as required in subsection (1), if the concentration of 7-Hydroxymitragynine is below the method detection limit, the method detection limit may be used as the stated concentration of 7-Hydroxymitragynine if the limit of quantitation or practical quantitation limit for 7-Hydroxymitragynine is below 400 PPM. If the concentration of 7-Hydroxymitragynine is above the method detection limit, the actual concentration must be stated on the label. The label must state the concentration of 7-Hydroxymitragynine as described above in parts per million (PPM) and denote that it is on a dry weight basis.

Rulemaking Authority 500.09, 500.12, 500.92, 570.07(23) FS. Law Implemented 500.03, 500.04, 500.09, 500.10, 500.11, 500.12, 500.121, 500.13, 500.92, 500.172 FS. History—New 12-17-25.

THIS RULE TAKES EFFECT UPON BEING FILED WITH THE DEPARTMENT OF STATE UNLESS A LATER TIME AND DATE IS SPECIFIED IN THE RULE.

EFFECTIVE DATE: December 17, 2025

NOTE: The full text of Emergency Rules that are currently in effect can be viewed by going to <https://flrules.org/Notice/emergencyRules.asp>.

## Section V Petitions and Dispositions Regarding Rule Variance or Waiver

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Division of Hotels and Restaurants

RULE NO.: RULE TITLE:

61C-1.004 General Sanitation and Safety Requirements

The Florida Department of Business and Professional Regulation, Division of Hotels and Restaurants hereby gives notice: On December 9, 2025 for paragraph 61C-1.004(1)(a), Florida Administrative Code and Paragraph 5-202.11(A), 2017 FDA Food Code from Bubba Ice Events LLC. located in Miami Gardens. The above referenced F.A.C. addresses the requirement that each establishment have an approved plumbing system installed to transport potable water and wastewater. They are requesting to utilize holding tanks to provide potable water and to collect wastewater at the handwash sink.

The Petition for this variance was published in Vol. 51/238 on December 10, 2025. The Order for this Petition was signed and approved on December 18, 2025, After a complete review of the variance request, the Division finds that the application of this Rule will create a financial hardship to the food service establishment. Furthermore, the Division finds that the Petitioner meets the burden of demonstrating that the underlying statute has been achieved by the Petitioner ensuring the wastewater holding tank for the handwash sink is emptied at a frequency as to not create a sanitary nuisance; and potable water provided must come from an approved source and be protected from contamination during handling. The Petitioner shall also ensure that the handwash sinks are provided with hot and cold running water under pressure, soap, an approved hand drying device and a handwashing sign.

A copy of the Order or additional information may be obtained by contacting: [Daisy.Aleman@myfloridalicense.com](mailto:Daisy.Aleman@myfloridalicense.com), Division of Hotels and Restaurants, 2601 Blair Stone Road, Tallahassee, Florida 32399-1011.

DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Beaches and Coastal Systems

RULE NO.: RULE TITLE:

62B-33.0051 Coastal Armoring and Related Structures

NOTICE IS HEREBY GIVEN that on December 17, 2025, the Department of Environmental Protection, received a petition for variance or waiver pursuant to section 120.542, F.S. from 108 El Mirasol, LLC. The amended petition requested a variance from subparagraphs 62B-33.0051(1)(a)1., and 62B-33.0051(2)(b)3., F.A.C., related to proposed reconstruction of existing armoring. The property is located at 108 El Mirasol, Palm Beach County, Florida. The petition has been assigned OGC #25-2088.

A copy of the Petition for Variance or Waiver may be obtained by contacting: Douglas Aarons, Florida Department of Environmental Protection, 2600 Blair Stone Road, Mail Station 3522, Tallahassee, Florida 32399-2400; telephone (850)245-7672; e-mail Douglas.Aarons@floridadep.gov, during normal business hours, 8:00 a.m. - 5:00 p.m., Monday through Friday, except legal holidays. If you have any questions, please call the Coastal Construction Line Program Office at (850)245-2094.

Written comments must be received by the Department of Environmental Protection no later than 14 days from the date of publication of this notice.

DEPARTMENT OF HEALTH

Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling

The Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling hereby gives notice: that on November 19, 2025, an Order was filed on the Petition for Variance or Waiver. The Petition was filed by Rebecca Parrish, Petitioner. Petitioner sought a petition for variance or waiver from paragraph 64B2-2.0025(5)(b), F.A.C., which states that in addition to the requirements found in Rule 64B4-2.002, F.A.C, a qualified supervisor shall not commence supervision until the qualified supervisor confirms Board approval, registration status, and receipt of an approval letter from the Board office for each intern under supervision. Petitioner requested that the Board waive this rule, and consider approving Christopher Stabile, BCaBA, as Ms. Parrish’s clinical supervisor, based on his qualifications, and Ms. Parrish’s having (subject to Mr. Stabile’s approval as such) already more than satisfied the hourly requirements of the post-master’s clinical experience requirement.

The Notice of Petition for Variance or Waiver was published in Vol. 51, No. 109, on June 5, 2025, in the Florida Administrative Register. The Board, at its meeting held on August 21, 2025, denied the Petition for variance or waiver finding that the Petitioner has failed to establish that the Board’s application for paragraph 64B4-2.0025(5)(b), F.A.C. or subsection 64B4-

3.0085(2), F.A.C., to the Petitioner’s circumstances would violate the principles of fairness or impose a substantial hardship.

A copy of the Order or additional information may be obtained by contacting: Ashleigh Irving, Executive Director, Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling, 4052 Bald Cypress Way, Bin # C08, Tallahassee, Florida 32399-3258, telephone: (850)488-0595, or by electronic mail – Ashleigh.Irving@flhealth.gov

DEPARTMENT OF FINANCIAL SERVICES

Division of Consumer Services

RULE NO.: RULE TITLE:

69J-7.001 My Safe Florida Home Program

NOTICE IS HEREBY GIVEN that on December 16, 2025, the Department of Financial Services, received a petition for Waiver from Niva Hirshfeld. Niva Hirshfeld is requesting that the Department of Financial Services grant a Waiver from subsection 69J-7.001(2) of the Florida Administrative Code regarding the Improvement 1.0 – Opening Protection requirements.

Comments on this Petition should be filed with the DFS Agency Clerk via mail at 200 East Gaines Street, 612 Larson Building, Tallahassee, Florida 32399-0333; via fax at (850)488-0697; or via email at DFSAgencyClerk@myfloridacfo.com within 14 days of publication of this notice.

A copy of the Petition for Variance or Waiver may be obtained by contacting: the DFS Agency Clerk at any of the contacts above or by telephone at (850)413-4279.

## Section VI

### Notice of Meetings, Workshops and Public Hearings

DEPARTMENT OF LEGAL AFFAIRS

The Services and Resources Committee of the Statewide Council on Human Trafficking announces a public meeting to which all persons are invited.

DATE AND TIME: Friday, January 16, 2026, 2:00 p.m. until conclusion

PLACE: Microsoft Teams Meeting - 1(412)912-1530, Phone Conference ID: 832092691#; <https://www.microsoft.com/en-us/microsoft-teams/join-a-meeting?rtc=1>, Meeting ID: 2247864515594, Passcode: Fo3zV32T; and 2415 North Monroe Street, Tallahassee, FL 32303, COT\_C100\_Auditorium

GENERAL SUBJECT MATTER TO BE CONSIDERED: Committee Business

A copy of the agenda may be obtained by contacting: Lynn Guyton at Lynn.Guyton@myfloridalegal.com or by accessing the board’s website at:

<https://www.myfloridalegal.com/human-trafficking/council/meetings>

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 7 days before the workshop/meeting by contacting: the Office of the Attorney General James Uthmeier at (850)414-3300. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Lynn Guyton at [Lynn.Guyton@myfloridalegal.com](mailto:Lynn.Guyton@myfloridalegal.com) by telephone at (813)287-7960.

#### DEPARTMENT OF EDUCATION

The Florida Department of Education announces a public meeting to which all persons are invited.

DATES AND TIMES: January 8, 2026, 4:00 p.m. - 5:30 p.m., ET; January 22, 2026, 4:00 p.m. - 5:30 p.m., ET; February 9-12, 2026, 8:30 a.m. - 5:00 p.m., ET; February 26, 2026, 4:00 p.m. - 5:30 p.m., ET; and March 12, 2026, 4:00 p.m. - 5:30 p.m., ET; or until business is concluded, whichever is earlier. If business is finished in fewer meetings, subsequent meetings will not occur.

PLACES: January 8, 2026, 4:00 p.m. - 5:30 p.m., ET

[https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_ODNkMTI5OTQtZjRhNS00MzZM5LTIIZjMtN2QyNGM2NDI5NTNh%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%226697e194-5a99-4242-8364-93ff746be47c%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_ODNkMTI5OTQtZjRhNS00MzZM5LTIIZjMtN2QyNGM2NDI5NTNh%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%226697e194-5a99-4242-8364-93ff746be47c%22%7d)

Meeting ID: 213 126 471 936 73 Passcode: qk2QS2DC

January 22, 2026, 4:00 p.m. - 5:30 p.m., ET

[https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_YmVhNjg0MmMtYjYzNS00MWU4LTgzZTEtYzllYjU0NjJzYTVI%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%226697e194-5a99-4242-8364-93ff746be47c%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmVhNjg0MmMtYjYzNS00MWU4LTgzZTEtYzllYjU0NjJzYTVI%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%226697e194-5a99-4242-8364-93ff746be47c%22%7d)

Meeting ID: 265 796 932 772 32 Passcode: vw3oz2oW

February 9-12, 2026, 8:00 a.m. - 5:00 p.m., ET

In-person meeting

Hilton University of Florida Conference Center Gainesville  
1714 SW 34th Street, Gainesville, FL 32607

February 26, 2026, 4:00 p.m. - 5:30 p.m., ET

[https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_ZGEwNWRmYWETMzZM5Yy00ZTY1LWFjMjItOTYwYzJkNjI4NjZk%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%226697e194-5a99-4242-8364-93ff746be47c%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_ZGEwNWRmYWETMzZM5Yy00ZTY1LWFjMjItOTYwYzJkNjI4NjZk%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%226697e194-5a99-4242-8364-93ff746be47c%22%7d)

Meeting ID: 253 671 376 967 57 Passcode: BK2h5oX9

March 12, 2026, 4:00 p.m. - 5:30 p.m., ET

[https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_N2FhNjdiZTEtOGFhZi00NDAXLWFhZTAAtMTc3MDg3ZmViNzBj%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%226697e194-5a99-4242-8364-93ff746be47c%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_N2FhNjdiZTEtOGFhZi00NDAXLWFhZTAAtMTc3MDg3ZmViNzBj%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%226697e194-5a99-4242-8364-93ff746be47c%22%7d)

Meeting ID: 259 365 479 683 79 Passcode: JR6Y9eS7

GENERAL SUBJECT MATTER TO BE CONSIDERED:  
State Academic Standards for Science

A copy of the agenda may be obtained by contacting:  
[LaKeesha.Parker@fldoe.org](mailto:LaKeesha.Parker@fldoe.org)

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: [LaKeesha.Parker@fldoe.org](mailto:LaKeesha.Parker@fldoe.org). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

For more information, you may contact:  
[LaKeesha.Parker@fldoe.org](mailto:LaKeesha.Parker@fldoe.org)

#### DEPARTMENT OF EDUCATION

State Board of Education

The Military Interstate Children's Compact Commission – Florida Council announces a public meeting to which all persons are invited.

DATE AND TIME: January 9, 2026, 10:00 a.m. – 11:00 a.m., ET (or until business is concluded, whichever is earlier).

PLACE: Teams

[https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_MjU4MGE1YTktYjQ3Mi00OWFhLWlyYmYtYmRhYTk0YzQzNmI2%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%22068abc60-daa1-4756-b9e1-0fe94a10b333%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_MjU4MGE1YTktYjQ3Mi00OWFhLWlyYmYtYmRhYTk0YzQzNmI2%40thread.v2/0?context=%7b%22Tid%22%3a%2263bf107b-cb6f-4173-8c1c-1406bb5cb794%22%2c%22Oid%22%3a%22068abc60-daa1-4756-b9e1-0fe94a10b333%22%7d)

GENERAL SUBJECT MATTER TO BE CONSIDERED:  
Provide updates on Military Interstate Children's Compact.

A copy of the agenda may be obtained by contacting:  
[StudentSupportServices1@fldoe.org](mailto:StudentSupportServices1@fldoe.org)

DEPARTMENT OF MANAGEMENT SERVICES  
Joint Task Force on State Agency Law Enforcement  
Communications

The Department of Management Services announces a public meeting to which all persons are invited.

DATE AND TIME: Monday, January 26, 2026, 1:00 p.m., Eastern Time

PLACE: 4050 Esplanade Way Conference Room 101, Tallahassee, FL 32399; Dial in (Toll Free) 1(877)309-2073, United States +1(646)749-3129, Access Code: 956-662-253, Audio Pin (None) Select #

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Joint Task Force (JTF) Technical Committee will discuss items to bring to the attention of the JTF Board regarding the Statewide Law Enforcement Radio System (SLERS).

A copy of the agenda may be obtained by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov).

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Office Operations, by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov), or by phone at (850)922-7435. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Office Operations, by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov), or by phone at (850)922-7435.

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DEPARTMENT OF MANAGEMENT SERVICES  
Joint Task Force on State Agency Law Enforcement  
Communications

The Department of Management Services announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, January 27, 2026, 9:00 a.m., Eastern Time

PLACE: 4050 Esplanade Way Conference Room 101, Tallahassee, FL 32399; Dial in (Toll Free) 1(877)309-2073, United States +1(646)749-3129, Access Code: 956-662-253, Audio Pin (None) Select #

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Joint Task Force (JTF) Board of the Statewide Law Enforcement Radio System (SLERS) will meet to discuss matters pertaining to the network. The agenda and handouts

will be made available closer to the date of the meeting at the following web address:

[https://www.dms.myflorida.com/business\\_operations/telecommunications/public\\_safety\\_communications/radio\\_communications\\_services/statewide\\_law\\_enforcement\\_radio\\_system\\_slers/upcoming\\_joint\\_task\\_force\\_meetings](https://www.dms.myflorida.com/business_operations/telecommunications/public_safety_communications/radio_communications_services/statewide_law_enforcement_radio_system_slers/upcoming_joint_task_force_meetings)

A copy of the agenda may be obtained by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

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DEPARTMENT OF MANAGEMENT SERVICES  
Joint Task Force on State Agency Law Enforcement  
Communications

The Department of Management Services, Division of Telecommunications announces a public meeting to which all persons are invited.

DATE AND TIME: Monday, May 4, 2026, 1:00 p.m., Eastern Time

PLACE: Betty Easley Conference Center, Room 152, 4075 Esplanade Way, Tallahassee, FL 32399; Dial in (Toll Free) 1(877)309-2073, United States +1(646)749-3129, Access Code: 956-662-253, Audio Pin (None) Select #

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Joint Task Force (JTF) Technical Committee will discuss items to bring to the attention of the JTF Board regarding the Statewide Law Enforcement Radio System (SLERS).

A copy of the agenda may be obtained by contacting: Office Operations, by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Office Operations, by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Office Operations, by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

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DEPARTMENT OF MANAGEMENT SERVICES

Joint Task Force on State Agency Law Enforcement Communications

The Department of Management Services, Division of Telecommunications announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, May 5, 2026, 9:00 a.m., Eastern Time

PLACE: Betty Easley Conference Center, Room 152, 4075 Esplanade Way, Tallahassee, FL 32399; Dial in (Toll Free) 1(877)309-2073, United States +1(646)749-3129, Access Code: 956-662-253, Audio Pin (None) Select #

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Joint Task Force (JTF) Board of the Statewide Law Enforcement Radio System (SLERS) will meet to discuss matters pertaining to the network. The agenda and handouts will be made available closer to the date of the meeting at the following web address:

[https://www.dms.myflorida.com/business\\_operations/telecommunications/public\\_safety\\_communications/radio\\_communications\\_services/statewide\\_law\\_enforcement\\_radio\\_system\\_slers/upcoming\\_joint\\_task\\_force\\_meetings](https://www.dms.myflorida.com/business_operations/telecommunications/public_safety_communications/radio_communications_services/statewide_law_enforcement_radio_system_slers/upcoming_joint_task_force_meetings)

A copy of the agenda may be obtained by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

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DEPARTMENT OF MANAGEMENT SERVICES

Joint Task Force on State Agency Law Enforcement Communications

The Department of Management Services announces a public meeting to which all persons are invited.

DATE AND TIME: Monday, August 3, 2026, 1:00 p.m., Eastern Time

PLACE: Betty Easley Conference Center, Room 152, 4075 Esplanade Way, Tallahassee, FL 32399; Dial in (Toll Free) 1(877)309-2073, United States +1(646)749-3129, Access Code: 956-662-253, Audio Pin (None) Select #

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Joint Task Force (JTF) Technical Committee will discuss items to bring to the attention of the JTF Board regarding the Statewide Law Enforcement Radio System (SLERS).

A copy of the agenda may be obtained by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov) or by phone at (850)922-7435.

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DEPARTMENT OF MANAGEMENT SERVICES

Joint Task Force on State Agency Law Enforcement Communications

The Department of Management Services, Division of Telecommunications announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, August 4, 2026, 9:00 a.m., Eastern Time

PLACE: Betty Easley Conference Center, Room 152, 4075 Esplanade Way, Tallahassee, FL 32399; Dial in (Toll Free) 1(877)309-2073, United States +1(646)749-3129, Access Code: 956-662-253, Audio Pin (None) Select #

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Joint Task Force (JTF) Board of the Statewide Law Enforcement Radio System (SLERS) will meet to discuss matters pertaining to the network. The agenda and handouts

will be made available closer to the date of the meeting at the following web address:

[https://www.dms.myflorida.com/business\\_operations/telecommunications/public\\_safety\\_communications/radio\\_communications\\_services/statewide\\_law\\_enforcement\\_radio\\_system\\_slers/upcoming\\_joint\\_task\\_force\\_meetings](https://www.dms.myflorida.com/business_operations/telecommunications/public_safety_communications/radio_communications_services/statewide_law_enforcement_radio_system_slers/upcoming_joint_task_force_meetings)

A copy of the agenda may be obtained by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov) or by phone at (850)922-7435.

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#### DEPARTMENT OF MANAGEMENT SERVICES

Joint Task Force on State Agency Law Enforcement Communications

The Department of Management Services announces a public meeting to which all persons are invited.

DATE AND TIME: Monday, November 2, 2026, 1:00 p.m., Eastern Time

PLACE: Betty Easley Conference Center, Room 152, 4075 Esplanade Way, Tallahassee, FL 32399; Dial in (Toll Free) 1(877)309-2073, United States +1(646)749-3129, Access Code: 956-662-253, Audio Pin (None) Select #

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Joint Task Force (JTF) Technical Committee will discuss items to bring to the attention of the JTF Board regarding the Statewide Law Enforcement Radio System (SLERS).

A copy of the agenda may be obtained by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov) or by phone at (850)922-7435.

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#### DEPARTMENT OF MANAGEMENT SERVICES

Joint Task Force on State Agency Law Enforcement Communications

The Department of Management Services, Division of Telecommunications announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, November 3, 2026, 9:00 a.m., Eastern Time

PLACE: Betty Easley Conference Center, Room 152, 4075 Esplanade Way, Tallahassee, FL 32399; Dial in (Toll Free) 1(877)309-2073, United States +1(646)749-3129, Access Code: 956-662-253, Audio Pin (None) Select #

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Joint Task Force (JTF) Board of the Statewide Law Enforcement Radio System (SLERS) will meet to discuss matters pertaining to the network. The agenda and handouts will be made available closer to the date of the meeting at the following web address:

[https://www.dms.myflorida.com/business\\_operations/telecommunications/public\\_safety\\_communications/radio\\_communications\\_services/statewide\\_law\\_enforcement\\_radio\\_system\\_slers/upcoming\\_joint\\_task\\_force\\_meetings](https://www.dms.myflorida.com/business_operations/telecommunications/public_safety_communications/radio_communications_services/statewide_law_enforcement_radio_system_slers/upcoming_joint_task_force_meetings)

A copy of the agenda may be obtained by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov)

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Office Operations by email at [BPS.Requests@dms.fl.gov](mailto:BPS.Requests@dms.fl.gov) or by phone at (850)922-7435.

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DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Division of Alcoholic Beverages and Tobacco

RULE NOS.:RULE TITLES:

61A-8.001 Safety Standards

61A-8.002 Training Curriculum

61A-8.003 Enforcement

The Department of Business and Professional Regulation announces a workshop to which all persons are invited.

DATE AND TIME: January 29, 2026, 1:30 p.m.

PLACE: Department of Business and Professional Regulation, 2601 Blair Stone Road, Tallahassee, Florida 32399.

GENERAL SUBJECT MATTER TO BE CONSIDERED: Proposed Rules 61A-8.001 – safety standards for convenience businesses, 61A-8.002 – training curricula for convenience business employees for robbery deterrence and safety, and 61A-8.003 – enforcement of the Convenience Business Security Act. A copy of the agenda may be obtained by contacting: Susan Hartmann Swartz, Department of Business and Professional Regulation, Rules Attorney, tel. (850)488-0063, susan.swartz@myfloridalicense.com.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 4 days before the workshop/meeting by contacting: Susan Hartmann Swartz, Department of Business and Professional Regulation, Rules Attorney, tel. (850)488-0063, susan.swartz@myfloridalicense.com. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Professional Engineers

The Florida Board of Professional Engineers Probable Cause Panel announces a public meeting to which all persons are invited.

DATE AND TIME: January 14, 2026, 8:30 a.m. or soon thereafter

PLACE: via video and/or telephone conference

GENERAL SUBJECT MATTER TO BE CONSIDERED: Although this meeting is open to the public, the Probable Cause Panel meeting may be closed consistent with the law. If you wish to participate in any public portion of the Probable Cause

Panel Meeting, please contact Rebecca Sammons at least 10 days prior to the meeting.

<https://us02web.zoom.us/j/81691654802>

Meeting ID: 816 9165 4802

A copy of the agenda may be obtained by contacting: Rebecca Sammons, rsammons@fbpe.org

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 10 days before the workshop/meeting by contacting: Rebecca Sammons, rsammons@fbpe.org. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Rebecca Sammons, rsammons@fbpe.org

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Professional Engineers

The Florida Board of Professional Engineers announces a telephone conference call to which all persons are invited.

DATE AND TIME: January 14, 2026, 1:00 p.m. or soon thereafter

PLACE: via video and/or telephone conference

GENERAL SUBJECT MATTER TO BE CONSIDERED: General business of the board, including reviewing and approving or denying applications for licensure, and any old or new business of the Board.

<https://us02web.zoom.us/j/82289485226>

Meeting ID: 822 8948 5226

+13052241968,,82289485226#,,,,\*9509910706# US

+19294362866,,82289485226#,,,,\*9509910706# US (New York)

A copy of the agenda may be obtained by contacting: Rebecca Sammons, rsammons@fbpe.org

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 10 days before the workshop/meeting by contacting: Rebecca Sammons, rsammons@fbpe.org. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing,

he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Rebecca Sammons, [rsammons@fbpe.org](mailto:rsammons@fbpe.org)

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#### DEPARTMENT OF HEALTH

Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling

The Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling announces a public meeting to which all persons are invited.

DATE AND TIME: January 08, 2026, 9:00 a.m., ET

PLACE: You may join the meeting from your computer, tablet, or smartphone through the following link: [https://teams.microsoft.com/l/meetupjoin/19%3ameeting\\_MzhmYWM1NDItMTNhOS00MTNhLWJmOTktYjkwOGFmYjRjZDcy%40thread.v2/0?context=%7b%22Tid%22%3a%2228cd8f80-3c44-4b27-81a0-cd2b03a31b8d%22%2c%22Oid%22%3a%22b9ce8bd1-5fbc-43d4-bfc1-75742afd1ba2%22%7d](https://teams.microsoft.com/l/meetupjoin/19%3ameeting_MzhmYWM1NDItMTNhOS00MTNhLWJmOTktYjkwOGFmYjRjZDcy%40thread.v2/0?context=%7b%22Tid%22%3a%2228cd8f80-3c44-4b27-81a0-cd2b03a31b8d%22%2c%22Oid%22%3a%22b9ce8bd1-5fbc-43d4-bfc1-75742afd1ba2%22%7d). You may also join the meeting using your phone at the following number: (850)792-1375, access code: 455-851-766#. To maximize your access to the meeting, the Department highly recommends that you download the Microsoft Teams app on your computer, tablet, or smartphone prior to the meeting.

GENERAL SUBJECT MATTER TO BE CONSIDERED: General board business involving discussion and actions, including, but not limited to general board business, licensure applications, rules, and disciplinary matters.

A copy of the agenda may be obtained by contacting: the board office at (850)245-4292 or by visiting our website at <https://floridasmentalhealthprofessions.gov/meeting-information/>.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 7 days before the workshop/meeting by contacting: Ashleigh Irving, Executive Director by phone at (850)245-4462, by email at [Ashleigh.Irving@flhealth.gov](mailto:Ashleigh.Irving@flhealth.gov), or by mail at 4052 Bald Cypress Way, Bin C-08, Tallahassee, FL 32399. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Ashleigh Irving, Executive Director by phone at (850)245-4462, by email at

[Ashleigh.Irving@flhealth.gov](mailto:Ashleigh.Irving@flhealth.gov), or by mail at 4052 Bald Cypress Way, Bin C-08, Tallahassee, FL 32399.

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#### DEPARTMENT OF HEALTH

Division of Emergency Preparedness and Community Support  
The Department of Health, Bureau of Emergency Medical Oversight, Emergency Medical Services Section announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, January 6, 2026, 8:00 a.m., EST

PLACE: Orange County Convention Center, South Concourse, 9899 International Drive, Room S222, Orlando, FL 32819

GENERAL SUBJECT MATTER TO BE CONSIDERED: Review of EMS matching grant proposals.

A copy of the agenda may be obtained by contacting: Amy Lefstead at [Amy.Lefstead@FLHealth.gov](mailto:Amy.Lefstead@FLHealth.gov)

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 7 days before the workshop/meeting by contacting: Amy Lefstead at [Amy.Lefstead@FLHealth.gov](mailto:Amy.Lefstead@FLHealth.gov). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

For more information, you may contact: Amy Lefstead at [Amy.Lefstead@FLHealth.gov](mailto:Amy.Lefstead@FLHealth.gov)

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#### FISH AND WILDLIFE CONSERVATION COMMISSION

Marine Fisheries

RULE NOS.:RULE TITLES:

- 68B-8.001 Purpose and Intent
- 68B-8.002 Definitions
- 68B-8.003 General Conditions and Restrictions
- 68B-8.005 Third Party Contractors
- 68B-8.006 Scientific Research Special Activity License
- 68B-8.007 Education/Exhibition Special Activity License
- 68B-8.008 Florida Marine Science Educators Association Certification
- 68B-8.009 Prohibited Species Collection Criteria
- 68B-8.010 Stock Collection and Release Special Activity License
- 68B-8.011 Aquaculture Broodstock Collection Special Activity License
- 68B-8.012 Snook Special Activity License
- 68B-8.013 Non-Conforming Gear Special Activity Licenses and Exemptions
- 68B-8.0131 Gear Innovation Special Activity License
- 68B-8.0132 Governmental Purpose Special Activity License
- 68B-8.0133 Nonprofit Corporation Special Activity License
- 68B-8.014 Marine Chemical Special Activity License
- 68B-8.016 Commission Activities and Agreements

The Florida Fish and Wildlife Conservation Commission announces a workshop to which all persons are invited.

DATE AND TIME: January 8, 2026, 6:00 p.m. – 8:00 p.m. (EST)

PLACE: Statewide webinar. More information about how to participate in the webinar will be available on the FWC website prior to the webinar date: <https://www.myfwc.com/fishing/saltwater/rulemaking/workshops/>. People interested in participating may also contact the Division of Marine Fisheries Management at (850)487-0554 for more information.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Fish and Wildlife Conservation Commission is considering changes to rules governing the Marine Special Activity License (SAL) program and is holding a virtual public workshop to gather public input. Potential changes under consideration include updates to the Florida Marine Science Educators Association (FMSEA) Certification and process, updates to requirements for tagging marine organisms, reorganizing rules related to non-conforming gear SALs, and changes to the Gear Innovation, Governmental Purpose, and Nonprofit Corporation SALs. Public input on additional changes under consideration related to the collection of marine prohibited species was solicited at a previous workshop held on December 18, 2025; however, input on this topic is also welcome.

During the virtual workshop, staff will deliver a presentation providing an overview of the marine SAL program and the need for rule changes. Staff will also seek feedback on a range of potential rule changes. Public feedback gathered during this workshop will be taken into consideration when developing rule recommendations for the Commission.

A copy of the agenda may be obtained by contacting: Jessica McCawley, at 620 South Meridian St., Tallahassee, Florida 32399, (850)487-0554, or [Jessica.McCawley@MyFWC.com](mailto:Jessica.McCawley@MyFWC.com).

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: the ADA Coordinator at (850)488-6411. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

For more information, you may contact: Jessica McCawley, at 620 South Meridian St., Tallahassee, Florida 32399, (850)487-0554, or [Jessica.McCawley@MyFWC.com](mailto:Jessica.McCawley@MyFWC.com).

FISH AND WILDLIFE CONSERVATION COMMISSION  
Manatees

RULE NO.: RULE TITLE:

68C-22.007 Indian River County Zones

The Florida Fish and Wildlife Conservation Commission announces a workshop to which all persons are invited.

DATE AND TIME: January 13, 2026, 5:30 p.m., EST. - 7:30 p.m., EST.

PLACE: Indian River County Commission Chambers [Building A]; 1807 27th Street, Vero Beach, Florida

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Commission is proposing amendments to portions of the existing Indian River County manatee protection rule (68C-22.007, F.A.C.).

A copy of the agenda may be obtained by contacting: Ms. Michelle Pasawicz,

Imperiled Species Management Section, Florida Fish and Wildlife Conservation Commission, 620 South Meridian Street, Tallahassee, Florida 32399, telephone: (850)922-4330, email: [ManateeRuleComments@MyFWC.com](mailto:ManateeRuleComments@MyFWC.com).

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: The ADA Coordinator at (850)488-6411. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

FLORIDA ASSOCIATION OF CENTERS FOR INDEPENDENT LIVING

The Florida Association of Centers for Independent Living announces a public meeting to which all persons are invited.

DATE AND TIME: January 7, 2026, 3:00 p.m.

PLACE:

<https://us02web.zoom.us/j/3257750135?pwd=NnJ3S2laZGlsdXhHbnhGUG42TTdzZz09&omn=84095219268&jst=1>

GENERAL SUBJECT MATTER TO BE CONSIDERED: Matters pertaining to the James Patrick Memorial Work Incentive and Employment Assistance Program.

Join Zoom Meeting

<https://us02web.zoom.us/j/3257750135?pwd=NnJ3S2laZGlsdXhHbnhGUG42TTdzZz09&omn=84095219268&jst=1>

View meeting insights with Zoom AI Companion

<https://us02web.zoom.us/launch/edl?muid=28522f05-303e-432c-bf5d-ce6c50e5e746>

Meeting ID: (325)775-0135

Passcode: tqN3gd

One tap mobile

+13017158592,,3257750135#,,,,\*792092# US (Washington DC)

+13052241968,,3257750135#,,,,\*792092# US

Join instructions

<https://us02web.zoom.us/meetings/84095219268/invitations?signature=23JESLOSvSSBrZW7f6SI1dE0a-lpJspQvPQ4L0-Bolo>

A copy of the agenda may be obtained by contacting: Kristen@floridacils.org

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Kristen@floridacils.org. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

#### BRYANT MILLER OLIVE

The Capital Trust Authority announces a hearing to which all persons are invited.

DATE AND TIME: December 26, 2025, 8:00 a.m., CST/9:00 a.m., EST

PLACE: Telephonic public hearing using the instructions provided herein.

#### GENERAL SUBJECT MATTER TO BE CONSIDERED: NOTICE OF TELEPHONIC PUBLIC HEARING

The Capital Trust Authority (the "CTA") has been requested by AIDS Healthcare Foundation, a California nonprofit public benefit corporation, and/or one or more related and/or affiliated entities (collectively, the "Borrower"), and an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), to issue its Revenue Bonds, pursuant to a plan of finance, in one or more series of tax-exempt qualified 501(c)(3) bonds or taxable bonds, in an aggregate principal amount not to exceed \$90,000,000 (the "Bonds").

For the purposes of Section 147(f) of the Code, notice is hereby given that, in accordance with the Internal Revenue Service Revenue Procedure 2022-20, a telephonic public hearing will be held by a hearing officer on behalf of the CTA on December 26, 2025 at 8:00 a.m., CST/9:00 a.m., EST, or as soon thereafter as the matter may be heard, using the telephone conference instructions provided herein. The purpose of the hearing is to take public comments regarding the issuance of the Bonds by the CTA, the nature and location of the Project (hereinafter defined) and the plan of finance. The proceeds of the Bonds will be loaned to the Borrower by the CTA for the purpose of financing or refinancing, including through reimbursement, (i) the acquisition, construction, improvement, rehabilitation, equipping and furnishing of certain health care, housing and related facilities, as more fully described below (collectively, the "Facilities"); (ii) the funding of one or more debt service reserve funds for the benefit of all or a portion of the Bonds, if deemed necessary or desirable; (iii) the payment of a portion of the interest to accrue on the Bonds, if deemed necessary or desirable; (iv) the payment of certain working capital expenditures, if deemed necessary or desirable; and (v) the

payment of certain costs of issuance of the Bonds (collectively, the "Project").

The Facilities consist of the following:

(A) an existing approximately 125,031 square foot, nine (9)-story building, including approximately 217 units, which will provide immediate relief for patients awaiting permanent housing, located on approximately 3.9 acres of land at 21485 Northwest 27th Avenue, Miami Gardens, Florida 33056, including related facilities, fixtures, furnishings, and equipment, with proceeds of the Bonds in an amount not to exceed \$24,000,000;

(B) an existing approximately 15,854 square foot single-story building, which will provide a central fill robotic pharmacy and administrative facilities, located on approximately two (2) acres of land at 2880 West Cypress Creek Road, Fort Lauderdale, Florida 33309, including related parking and other facilities, fixtures, furnishings, and equipment, with proceeds of the Bonds in an amount not to exceed \$5,250,000;

(C) an existing approximately 10,005 square foot two (2)-story building, which will provide office space and administrative facilities to facilitate the Borrower's charitable purpose, located on approximately 5,000 square feet of land at 707 East Colonial Drive, Orlando, Florida 32803, including related parking and other facilities, fixtures, furnishings, and equipment, with proceeds of the Bonds in an amount not to exceed \$1,550,000; and

(D) a new approximately 296,418 square foot 12-story building, including approximately 232 studio units and 18 one (1)-bedroom units, which will provide patients affordable housing, located on approximately one (1) acre of land at 7952 Northeast 3rd Avenue, Miami, Florida 33138, including related parking and other facilities, fixtures, furnishings, and equipment, with proceeds of the Bonds in an amount not to exceed \$59,200,000. The plan of finance contemplates that the CTA will issue, in respect to the Project, not exceeding \$90,000,000 in aggregate principal amount of its Bonds, in one or more series of tax-exempt qualified 501(c)(3) bonds or taxable bonds, and loan the proceeds of the Bonds to the Borrower to provide funds for the Project. The Facilities will be owned by the Borrower, or an affiliate thereof or another entity chosen by the Borrower.

The Bonds, when issued, will be special, limited obligations payable solely out of the revenues, income and receipts pledged to the payment thereof and derived from financing agreements with the Borrower, and none of the CTA, Miami-Dade County, Florida, Broward County, Florida and Orange County, Florida (the "Counties"), or the State of Florida (the "State") will be obligated to pay the principal of, premium, if any, or interest on the Bonds except from the payments of the Borrower. The Bonds and the interest thereon shall never (i) pledge the taxing power of the Counties, the State or any other political subdivision, public agency or municipality thereof within the

meaning of any constitutional or statutory provision, (ii) constitute the debt or indebtedness of the CTA, the Counties, the State or any other political subdivision, public agency or municipality thereof within the meaning of any constitutional or statutory provision, or (iii) pledge the full faith and credit of the CTA, the Counties, the State or any political subdivision, public agency or municipality thereof., CTA has no taxing power. Issuance of the Bonds is subject to several conditions including satisfactory documentation and receipt of necessary approvals for the financing.

INTERESTED PERSONS ARE ENCOURAGED TO ATTEND BY TELEPHONE CONFERENCE USING THE INSTRUCTIONS BELOW. PRIOR TO SAID TELEPHONIC PUBLIC HEARING, WRITTEN COMMENTS MAY BE DELIVERED TO THE CTA AT 315 FAIRPOINT DRIVE, GULF BREEZE, FLORIDA 32561, ATTENTION EXECUTIVE DIRECTOR.

TELEPHONE CONFERENCE INSTRUCTIONS:  
TOLL FREE DIAL IN NUMBER: 1(888)667-1808

At the date and time fixed for said telephonic public hearing all who appear by telephone conference will be given an opportunity to express their views for or against the Project, the plan of finance and the proposed approval of the issuance of the Bonds. Comments made at the public hearing are for the consideration of the parties providing an approval of the issuance of the Bonds and the plan of finance but will not bind the CTA or such parties as to any action the CTA or such parties may take. All persons are advised that, if they decide to appeal any decision made with respect to the proposed approval of the issuance of the Bonds, they will need a record of the proceedings, and for such purpose, they may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based. All interested persons are invited to present their comments on the date and time set forth above.

IN ACCORDANCE WITH THE AMERICANS WITH DISABILITIES ACT OF 1990, AS AMENDED, ALL PERSONS WHO ARE DISABLED AND WHO NEED SPECIAL ACCOMMODATIONS TO PARTICIPATE IN THIS TELEPHONIC PUBLIC HEARING BECAUSE OF THAT DISABILITY SHOULD CONTACT THE HEARING OFFICER AT (850)934-4046 AT LEAST 48 HOURS IN ADVANCE OF THE PUBLIC HEARING, EXCLUDING SATURDAY AND SUNDAY.

A copy of the agenda may be obtained by contacting: THE HEARING OFFICER AT (850)934-4046.

Section VII  
Notice of Petitions and Dispositions  
Regarding Declaratory Statements

NONE

Section VIII  
Notice of Petitions and Dispositions  
Regarding the Validity of Rules

Notice of Petition for Administrative Determination has been filed with the Division of Administrative Hearings on the following rules:

NONE

Notice of Disposition of Petition for Administrative Determination has been filed with the Division of Administrative Hearings on the following rules:

NONE

Section IX  
Notice of Petitions and Dispositions  
Regarding Non-rule Policy Challenges

NONE

Section X  
Announcements and Objection Reports of  
the Joint Administrative Procedures  
Committee

NONE

Section XI  
Notices Regarding Bids, Proposals and  
Purchasing

DEPARTMENT OF EDUCATION  
Florida School for the Deaf and the Blind  
PUBLIC ANNOUNCEMENT FOR RFP-26-069 Double Door & Storefront Replacements  
Florida School for the Deaf and the Blind (FSDB) requests proposals for the subject project and has issued a Competitive Solicitation to obtain competitive responses from qualified

firms consistent with the requirements outlined in the Solicitation Document.

Selection will be made in accordance with the published Solicitation Document. Firm(s) must be properly licensed in the State of Florida at the time of submittal.

Be sure to read the entire solicitation document before contacting the Agency with questions, which must be submitted via e-mail. Only procedural questions will be answered on receipt – all other questions will only be answered according to the published timeline.

RESPONSE DUE DATE: February 24, 2026, no later than 1:45 p.m.

INSTRUCTIONS FOR SUBMITTAL: Firms interested in being considered for this project should access the Solicitation Document from: Purchasing | Florida School for the Deaf & the Blind Click “View Active Competitive Solicitations” and navigate to the project folder. RESPONDENTS ARE RESPONSIBLE for checking the FSDB website for amendments and addendums. Failure to comply with any changes published to the FSDB website may be grounds for rejecting a proposal.

Primary Contact: Christine Skaggs, Purchasing Analyst - skaggs@fsdbk12.org; Kim Whitwam, Director of Purchasing – whitwam@fsdbk12.org.

## Section XII Miscellaneous

### DEPARTMENT OF STATE

Index of Administrative Rules Filed with the Secretary of State Pursuant to subparagraphs 120.55(1)(b)7. – 8., F.S., the below list of rules were filed in the Office of the Secretary of State between 3:00 p.m., Friday, December 12, 2025, and 3:00 p.m., Thursday, December 18, 2025.

Rule No.	File Date	Effective Date
5KER25-6	12/17/2025	12/17/2025
15B-9.001	12/17/2025	1/6/2026
15B-9.002	12/17/2025	1/6/2026
15B-9.003	12/17/2025	1/6/2026
15B-9.0031	12/17/2025	1/6/2026
15B-9.0032	12/17/2025	1/6/2026
15B-9.004	12/17/2025	1/6/2026
15B-9.005	12/17/2025	1/6/2026
15B-9.006	12/17/2025	1/6/2026
15B-9.007	12/17/2025	1/6/2026
15B-9.008	12/17/2025	1/6/2026

15B-9.009	12/17/2025	1/6/2026
15B-9.010	12/17/2025	1/6/2026
15B-9.011	12/17/2025	1/6/2026
33-601.602	12/15/2025	1/4/2026
49B-1.007	12/15/2025	1/4/2026
49B-1.008	12/15/2025	1/4/2026
49B-1.009	12/15/2025	1/4/2026
49B-1.010	12/15/2025	1/4/2026
49B-1.011	12/15/2025	1/4/2026
49B-1.013	12/15/2025	1/4/2026
49B-1.0131	12/15/2025	1/4/2026
49B-1.070	12/15/2025	1/4/2026
49B-1.071	12/15/2025	1/4/2026
49B-1.072	12/15/2025	1/4/2026
49B-1.073	12/15/2025	1/4/2026
49B-1.074	12/15/2025	1/4/2026
49B-1.075	12/15/2025	1/4/2026
49B-1.076	12/15/2025	1/4/2026
49B-1.077	12/15/2025	1/4/2026
49B-1.078	12/15/2025	1/4/2026
49B-3.005	12/15/2025	1/4/2026
49B-3.006	12/15/2025	1/4/2026
65C-41.004	12/15/2025	1/4/2026
68-1.003	12/16/2025	1/5/2026
68-5.002	12/18/2025	1/7/2026
68-5.007	12/18/2025	1/7/2026
69I-22.001	12/18/2025	1/7/2026
69I-22.002	12/18/2025	1/7/2026
69I-22.003	12/18/2025	1/7/2026
69O-137.009	12/12/2025	1/1/2026
69O-149.0025	12/12/2025	1/1/2026
69O-170.0155	12/18/2025	4/1/2026
69O-171.011	12/12/2025	1/1/2026
<b>LIST OF RULES AWAITING LEGISLATIVE APPROVAL SECTIONS 120.541(3), 373.139(7) AND/OR 373.1391(6), FLORIDA STATUTES</b>		
Rule No.	File Date	Effective Date
14-10.0043	4/11/2025	**/**/****
60FF1-5.009	7/21/2016	**/**/****
65C-9.004	3/31/2022	**/**/****
69C-2.004	11/5/2025	**/**/****
69C-2.005	11/5/2025	**/**/****

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69C-2.016	11/5/2025	**/**/****
69C-2.022	11/5/2025	**/**/****
69C-2.026	11/5/2025	**/**/****
69C-2.034	11/5/2025	**/**/****
69C-2.035	11/5/2025	**/**/****

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AGENCY FOR HEALTH CARE ADMINISTRATION

Certificate of Need

RECEIPT OF EXPEDITED APPLICATION

The Agency for Health Care Administration received the following CON application for expedited review:

CON #10938 Received: 12/17/2025

County: Lake District: 3-7

Applicant/Facility/Project: Leesburg SNF LLC

Project Description: Transfer Exemption #E250024 from Okahumka RE T LLC to the applicant to establish a 163-bed community nursing home

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Section XIII

Index to Rules Filed During Preceding  
Week

NOTE: The above section will be published on Tuesday beginning October 2, 2012, unless Monday is a holiday, then it will be published on Wednesday of that week.

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